

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

COVID-19 VARIANCE ATTESTATION FORM

FOR Tulare 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 [Statewide industry guidance to reduce risk](#)). 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.¹ 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: Tulare County

County Contact: Dr. Karen Haught, Public Health Officer

Public Phone Number: 559-624-8480

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 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.

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.

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.

Tulare County has 3 hospitals and receives daily reports on hospitalized patients, PPE supplies, among other indicators. As of 5/25, The 7-day average of daily percent change in total number of hospitalized confirmed COVID-19 patients was **+1.04%**, which meets the target.

- 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.

Tulare County received 233 positives out of 2,952 total test results from 5/19 – 5/25 for a test positivity over the 7 day range of 7.89%, which meets the target.

- 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).

COVID19 Guide attached.

Early in the outbreak response it became evident that specialized liaison teams would be necessary in order the communicate effectively with several sectors. The following specialized teams were implemented:

- Business Liaison team
- Public Safety Liaison team
- Homeless Liaison team
- Tribal Liaison team
- Clinical Liaison team

On March 19, 2020, Governor Newsom issued Executive Order N-33-20 directing all residents immediately to heed current State public health directives to stay home, except as needed to maintain continuity of operations of essential critical infrastructure sectors and additional sectors as the State Public Health Officer may designate as critical to protect health and well-

being of all Californians. In accordance with this order, the State Public Health Officer has designated the following list of “Essential Critical Infrastructure Workers” to help state, local, tribal, and industry partners as they work to protect communities, while ensuring continuity of functions critical to public health and safety, as well as economic and national security. Guidance was provided for the locals and businesses were placed into two categories, essential and non-essential.

There are thousands of businesses that operate within Tulare County and for this reason the business liaison team was created. It was designed to give businesses a direct line of communication, to answer questions regarding restrictions to their operations depending on the category type and to provide CDPH and CDC guidance. The information provided is based on the Governors stay in home order and the Tulare County Health Officer’s order.

There has been consistent messaging to the community via the Joint Information Center to the Tulare County website and social media in both English and Spanish. Along with messaging and fliers, a playbook was created to help assist the businesses community. Information is updated as needed.

The COVID 19 Guide for Businesses includes the following information:

- The development and Implementation of appropriate policies, in accordance with federal, state and local guidance as well as industry best practices
- How to keep the workplace safe
- Communicating with your team
- Preparing your space
- Cleaning and disinfecting after opening
- Personal Protective Equipment (PPE)
- How long COVID lives on surfaces
- 5 essential actions for individuals
- Industry specific recommendations based on federal and state guidelines

The guide is posted on the Tulare County website and the Tulare County Environmental Health (TCEH) website which is the permitting authority for many of the businesses within the County. TCEH has also communicated with regulated businesses via email blast to ensure ongoing communication. The Tulare County main website has additional business resources that include but are not limited to information from CDPH, CDC, Cal OSHA and industry best practices.

When our county is in a normal state, our first responders work hard, but in a state of emergency our first responders are stretched far beyond their normal call of duty and are on the front line keeping our communities safe. The public safety liaison team is designed to give Tulare County first responders a direct line to seek information and assistance during a pandemic. The main function of the public safety liaison team is to provide a main line to nurses and assistance in the event our community first responders are subjected to a potential exposure while assisting the most vulnerable of our communities. The nurses then arrange for immediate specimen collection at one of the designated collection sites, testing is then expedited through the Tulare County Public Health Lab. All the while the public safety liaison remains in communication with the affected department until results are released.

The homeless liaison team (HLT) was formed to plan and implement the process for leasing hotel space for the homeless community impacted by COVID-19, one of our most vulnerable populations. Several teams comprise the HLT including, meal planning, case management planning, referral process, hotel process, and financing operations. Co-leads provide general oversight, objectives, and goals to the HLT. Supervisors oversee the daily operations and work directly with teams to ensure objectives are met within the specified timeline.

Tule River Tribe of California is a proud sovereign nation that strives to improve the livelihood of their members, their community, and their surrounding communities. The tribal liaison team was created to provide a point of contact for all inquiries coming from the Tule River Tribe to the Health Officer. The effort to continue to have an open line of communication and collaboration has been a priority for Tulare County HHSA. Meetings with the tribe occur every two weeks and a weekly update is sent to the tribe to provide consistent communication.

The clinical liaison team was created to provide support to healthcare providers, Skilled Nursing Facilities, and other patient centric facilities in our County. The individuals on this team are assigned to facilities when employees and/or inpatients at the facility test positive for COVID19. The nurses provide support during and after business hours to answer questions, provided direct support with risk assessments, arrange for collection/testing, and provide guidance on quarantine and isolation needs.

- o Availability of supplies (disinfectant, essential protective gear) to protect essential workers. Please describe how this availability is assessed.

The medical health operational area coordinator (MHOAC) works closely with essential healthcare workers in Tulare County to provide appropriate personal protective equipment (PPE). All resource requests are sent to TCMHOAC@tularehhsa.org. Once the request is received, all requests are reviewed and evaluated within 24 hours. The MHOAC and Logistics team work closely to review the request and available inventory, including the urgency of items requested. The disbursement of PPE is determined by a standardized prioritization process. Prioritization is based on the Health Officers risk assessment in regard to direct patient care. The logistics team is tasked with the distribution of all PPE. Essential health care facilities also have a direct phone number to the logistics chief and MHOAC on duty, if there is an immediate and urgent need, a phone call is made to initiate the process while the forms are being completed and submitted.

- 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:
 - o 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.

Tulare County has approximately 480,000 residents, so it must have a minimum daily testing capacity of 720 tests to meet this requirement. Tulare County Public Health surveyed the hospitals and clinics which are providing testing for COVID-19 for their daily testing capacity and average testing volumes. In addition, two OptumServ testing sites are located within Tulare County with testing capacity of 132 per day each. As of 5/25, the testing capacity in Tulare County is 966 tests per day, or **2.01 tests per 1,000 residents per day, so this criterion has been met.**

In the past week, results of 2,903 PCR tests have been received, which equates to 0.86 tests per 1,000 residents per day. It is likely that not all negative test results are received even though laboratories are required to submit all COVID-19 test results. From the survey of clinics, they estimate an average of 463 specimens are collected per day which would equate to 1.0 test per 1,000 residents. CDPH has also provided an estimate for Tulare County which was 0.99 tests per 1,000 residents.

Tulare County has been working hard to push the message to our communities that anyone who needs a test can now get tested. We have revised our testing guidelines for physicians to emphasize that commercial laboratory testing is available for all low-risk and even asymptomatic persons. We are also partnering with CDPH and local providers to enroll sentinel physicians who would conduct surveillance testing in communities that have low testing rates. Our Public Health Laboratory has worked to continuously increase their testing capacity and is able to test persons of high risk, such as those associated with potential outbreak situations with a 1-day turnaround time.

- 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.

Tulare County is maintaining a specimen collection site map at: <https://covid19.tularecounty.ca.gov/covid-19-testing-collection-sites/>. The testing sites identified on this website are all within 30-60 minute drive time for residents of Tulare County. All geographic sites meet these criteria.

Specimen collection sites are located in:

Tulare (Altura Centers for Health, Adventist Tulare)

Woodville (Altura Centers for Health)

Dinuba (Aria Community Health Center, OptumServ site, Mountain View Medical Clinic, Valley Health Team)

Lindsay (Aria Community Health Center)

Porterville (Family HealthCare Network, OptumServ site, Sierra View Medical Center)

Visalia (Kaweah Delta Outpatient Collection Center, Family HealthCare Network, Omni Family Health, Advanced Care Medical Center)

Tipton (Tipton Medical Center)

Pixley (Pixley Medical Center)

Tule River Indian Health Center

Earlimart (United Health Center)

Listing and map attached.

- o 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.]

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In addition to all of the testing sites listed above, all of which are available to the average resident without any additional criteria (do not need to be a health care worker or contact to a case, for example), Tulare County Public Health is actively enrolling sentinel providers to provide additional surveillance data which will be reported to CDPH weekly as per the CDPH surveillance protocol. Specimens from non-hospitalized individuals will be tested for COVID-19 at Tulare County Public Health Laboratory. The state lab will then test for additional respiratory viruses. TCPH is in the process of recruiting providers with a goal to obtain 10-50 specimens per week, along with the data specified by CDPH. We are targeting communities that currently have low testing volumes. The two OptumServ sites which are located in the North and South regions of the county also provide important surveillance data as they are open to the general public. Our hospital partner, Kaweah Delta, conducts outreach to homeless individuals with their Street Medicine Team and a nurse from TCPH and collect specimens for testing anyone with symptoms.

TCPH is also partnering with the CZ BioHub to sequence viruses obtained from positive specimens in order to better understand the movement of the virus in our community and potentially to inform contact tracing investigations.

In addition to testing surveillance, TCPH also has a syndromic surveillance system based on emergency department registrations from all 3 of our hospitals. This system allows us to monitor ED visits for influenza-like-illness and syndromes consistent with COVID-19 on a daily basis. Data can be analyzed by age group, race/ethnicity, and patient residence zip code. Current syndromic surveillance for ILI or COVID-19 compatible symptoms shows a sustained downward trend.

- 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:

- o 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).

Currently, Tulare County has 59 employees trained and available to do contact tracing, which equates to 12.3 staff per 100,000. An additional 10 staff are currently enrolled in the virtual online training and are expected to complete training at the end of May. On May 19th the Board approved an MOU with Visalia Unified School District for use of the school nurses as additional contact tracers. Tulare County is expecting to bring on 10 additional nurses through this agreement, **which will allow the County to surpass the 72 FTE requirement for contact tracers by early June.** The contact tracers are representative of the community in racial, ethnic, and linguist diversity. In addition, Tulare County has lined up another 32 staff by partnering with the local Workforce Investment Board to hire on as contact tracers. The recruitment process for the additional staff has already began. Tulare County anticipates that the additional staff from the WIB will begin to be hired within the first week of June. Thus, by mid-June, Tulare County will have 111 trained contact tracing staff which will accommodate a potential 3-fold increase in COVID-19 cases. Tulare County can draw upon TC-HHSA staff as well as staff from other partners, who will be trained and placed on reserve in the event of an even larger surge. Tulare County is developing a train the trainer strategy in order to rapidly respond to any surges and seamlessly bring on new employees to assist. Tulare County has been able to quickly mobilize resources to expand contact tracers and institute new contact tracing strategies and processes to keep up with any surge in cases. Sample workflow of contact tracers attached.

- o 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.

As of May 25, Tulare County will have sufficient temporary housing units to shelter more than 15% of its residents experiencing homelessness and requiring isolation or quarantine. The most recent results from the point in time homeless count in 2019* identified 804 individuals; fifteen percent of this would be 120 persons. Tulare County is utilizing Project Room Key contracts with 4 hotel facilities in 3 cities with a total bed capacity of 151, which is **19% of the homeless population, which meets the target.**

Tulare County is working with its partners, including hospitals and the Continuum of Care, to identify and receive referrals for these beds, of which will fall into three primary groups: i) COVID positive but not needing inpatient care; ii) Under investigation for COVID; and iii) COVID negative but at higher risk for complications related to COVID (e.g. medically fragile or elderly). Tulare County has and will continue to provide and track wraparound services - including case

management, transportation, security, laundry, meals, and on-site management - for those being placed in these beds.

***2020 Point in Time results are not yet available and are not expected to be finalized until late July.**

- 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.

Tulare County has three hospitals: Kaweah Delta Medical Center, Adventist Health Medical Center Tulare, and Sierra View District Hospital located in the three major cities within Tulare County. Kaweah Delta is located in the city of Visalia, Adventist Medical Center Tulare is located in the city of Tulare, and Sierra View District Hospital is located in the city of Porterville. Each of the hospitals have a robust emergency operations plan which includes planning and preparing for surge, infection disease, alternate care sites and other hazards they are vulnerable to determine by their Hazard and Vulnerability Assessment. Each hospital is required to train and exercise their plans at least twice per year per CMS guidelines.

All three hospitals in Tulare County work closely together and are involved in the local Healthcare Coalition (HCC). The hospitals and the Tulare County Public DOC meet with the hospital leadership twice per week and have created an additional coalition specific to COVID-19 response which has been active since April 4, 2020 this coalition meets on a weekly basis. Resources, joint messaging and education are shared amongst the group.

The hospitals have all prepared a surge capacity plan during COVID-19. Surge beds were acquired by the planned reduction of services, elimination of elective surgeries, substantial conversion of space, and use of curbside tent screening. Each facility has plans in place and can accommodate greater than a 35% surge.

- Kaweah Delta Medical Center is a 448 licensed bed facility, expanded surge capacity by an additional 126 beds.
- Adventist Medical Center Tulare is a 108 licensed bed facility, expanded surge capacity of 61 beds.

- Sierra View Medical Center is a 132 licensed bed facility, expanded surge capacity beds of 68 beds.

Examples of hospital surge plan strategies include: canceling elective procedures and utilizing on-call and per diem staff. Each facility has specific plans for reassigning beds and opening additional spaces for patient care such as conference rooms and other treatment areas not traditionally used as bed space. These plans also include utilizing tents for COVID screening at Kaweah Delta Medical Center and Sierra View District Hospital.

In addition to our hospitals, Tulare County also has a state Alternate Care Site (ACS) with the capacity for 246 beds. Currently ACS planning continues between the three hospitals and Tulare County as contingency plan in the event that we do not have availability at the state ACS. An ACS tabletop will be held on June 4, 2020 to work through any challenges. Tulare County is in the process of securing two MOU's with additional ACS sites.

Tulare County has a Medical Reserve Corp (MRC) which will be advantageous in our ACS plan. Currently, we have a total of 223 volunteers both medical and non-medical. The Tulare County Medical Reserve Corps members are currently being onboarded and are required to complete core competencies prior to deployment. The MRC will assist with setting up the ACS and with the daily operations. Tulare County continues to recruit for the MRC to help better prepare for a surge in our county.

- o 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.

All three hospitals have strict policies in place to protect patients and clinical and non-clinical staff. Daily screening procedures are in place, Personal Protective Equipment is provided and training and education occurs regularly. All staff is notified of COVID testing facilities and allows work time for tests. Each facility implemented strict guidelines for workforce safety in early March. The hospitals have existing systems for tracking occupational exposures within their workforce. Any COVID-related exposures would be monitored through the hospital's incident command.

All three hospitals in Tulare County are able to acquire appropriate PPE through their normal vendors at this time and are not relying on MHOAC. The hospitals are practicing PPE optimization using guidance from the CDC. Employees are being trained and monitored regarding PPE use. In the event of a surge and a shortage of PPE, MHOAC would work with the hospitals to provide PPE.

- 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:
 - o 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.

There is a total of 18 skilled nursing facilities (SNF's) in Tulare County. The Tulare County Public Health Department works very closely with each of the skilled nursing facilities (SNF's). The SNF's in Tulare county are a part of the health care coalition. The coalition meets every quarter to plan and discuss emergency preparedness. The coalition works together on an annual basis to exercise emergency plans. In March, the Tulare County Public Health Department including the Health Officer began to meet with the SNF's on a weekly basis to provide updates and guidance. The SNF's are also encouraged to attend a weekly call with CDPH Center for Health Care Quality for Skilled Nursing Facility IP.

Tulare County has established a SNF support team which includes a representative, from Healthcare Associated Infections, CDPH licensing (HAI), and a Tulare County clinical liaison (public health nurse) who work in collaboration with the SNF's to address outbreaks, infection prevention issues, testing and resources including staffing. Each SNF has a Tulare County clinical liaison assigned to them to address any issues. The Tulare County Public Health Lab supplies the SNF's with testing supplies and expedites the testing process to ensure 24-48-hour results. In addition, each of the clinical liaisons works closely with the Health Officer, MHOAC and the logistics team to provide support and resources. Any facility that is experiencing an outbreak provides a daily report to the Health Officer on the status of the facility.

In addition, the MHOAC works closely with each of the SNF's and local hospitals to provide staff support. The MHOAC has also worked closely with the state to assist with staffing. The state has provided CalMat resources, and is now offering support via California Health Core to the SNF's experiencing staff shortages due to COVID19.

- o 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.

Tulare County has verified that all long-term care facilities have access to sufficient PPE. In the event of an outbreak in a facility that were to exceed the facilities' PPE capacity, PPE contingency plan includes Healthcare Coalition and Public Health/MHOAC support. Some SNF's have received the allocated FEMA distribution as of today's date and are scheduled to arrive in May and June. Dedicated staff are in regular communication with our SNFs and protocols are in place to report SNF PPE availability, including Situation Reporting and Resource Requesting.
SNF listing and PPE survey attached.

- 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.

Below is the list of business activities/sectors that fall within and outside Stage 2. Once metrics are met, additional sectors may be phased in.	
Stage 2	Not Permitted in Stage 2
<p><i>Early Stage 2: California is now open with modifications.</i></p> <ul style="list-style-type: none"> • Curb-side Retail • Manufacturers • Logistics • Childcare for those outside of the essential workforce • Office-based businesses (telework remains strongly encouraged) • Select services: car washes, pet grooming, and landscape gardening • Outdoor museums, and open gallery spaces and other public spaces with modifications 	<ul style="list-style-type: none"> • Personal services such as nail salons, tattoo parlors, gyms and fitness studios
<p><i>Expanded Stage 2 with Attestation: Upcoming changes in the Stay-at-Home Order will move the entire state methodically through opening further. Those counties with variation attestation may progress to open these sectors more rapidly, according to their county-specific plan for modification.</i></p>	
<p>Once Metrics have been met the following sectors may be phased in:</p> <ul style="list-style-type: none"> • Destination retail (retail stores), including shopping malls and swap meets with modifications • Dine-in restaurants with modifications (other amenities, like bars or gaming areas, are not permitted in Stage 2) • Schools with modifications 	<ul style="list-style-type: none"> • Entertainment venues with limited capacities, such as movie theaters, gaming, gambling, and arcade venues, and pro sports • Indoor museums, kids' museums and gallery spaces, zoos and libraries • Community centers, including public pools, playgrounds, and picnic areas • Limited-capacity religious services and cultural ceremonies • Nightclubs • Concert venues • Live audience sports • Festivals • Theme parks • Hotels/lodging for leisure and tourism – non-essential travel • Higher Education

- 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.

TCPH monitors surveillance indicators regularly and reports them to the DOC, EOC, and the public. Our syndromic surveillance system captures ED registrations at all 3 of our hospitals in near-real-time. Hospital and Skilled Nursing Facility data (including PPE availability) will be monitored daily. New case numbers, testing, and death registrations will also continue to be monitored on a regular basis.

Triggers for adjusting modifications will include:

- A steady increase in influenza-like illness, identified through syndromic surveillance
- A steady increase in COVID-19-like illness, identified through syndromic surveillance
- A sharp increase in new case counts over a 7-day period
- A substantial increase in unexplained deaths within the county

Any efforts in tightening or reinstituting business or activity restrictions would be instructed by information obtained in local contact tracing. Decisions could be made to revert back to Stage 1, State supported Stage 2, or only to specific activities and sectors based on the disease transmission dynamics observed.

The County will inform the State of emerging concerns and of actions taken to mitigate disease transmission by the local Health Officer contacting the appropriate staff at the California Department of Public Health.

- 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.

Tulare County is developing a formal Containment Plan with engagement from members of the COVID 19 coalitions, community providers and Board of Supervisors. The department will note the work provided thus far in the following sections. Public Health will continue to engage our county, agency, and community partners to complete the plan by the end of June. Please see attached draft Containment Plan.

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?

Tulare County has already reached the recommended daily testing capacity and has capacity to test at least 2.1 per 1,000 residents. The average percentage of positive tests has been stable or slightly declining and is less than 8%. Specimen collection sites are located throughout the county with most FQHCs offering collections as well as the Tule River Tribe Health Center, the 3 hospitals, and 2 OptumServ collection sites. Tulare County maintains a map of collection sites on the website with hours and contact information so that residents can easily find a site to get tested. Tulare HHS in collaboration with the Tulare-Kings COVID-19 Coalition has distributed messaging urging residents to get tested through a variety of information dissemination channels to the general public including: press releases, website postings, social media outlets including Facebook and Twitter, traditional media outlets via press interviews including: newspaper, television and radio. The Agency has disseminated this messaging in both English and Spanish to multilingual media outlets. Tulare County Public Health Laboratory has worked to continuously increase testing capacity while maintaining a short turnaround time. In addition, TCPHL also has contracts in place with Quest, Bioreference, and LabCorp for additional surge capacity. Our community surveillance plan is outlined above and will follow the CDPH protocol.

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?

Currently, Tulare County has 59 employees trained and available to do contact tracing, which equates to 12.3 staff per 100,000. An additional 10 staff are currently enrolled in the virtual online training and are expected to complete training at the end of May. On May 19th the Board approved an MOU with Visalia Unified School District for use of the school nurses as additional contact tracers. Tulare County is expecting to bring on 10 additional nurses through this agreement, **which will allow the County to surpass the 72 FTE requirement for contact tracers by early June.** The contact tracers are representative of the community in racial, ethnic, and linguist diversity. In addition, Tulare County has lined up another 32 staff by partnering with the local Workforce Investment Board to hire on as contact tracers. The recruitment process for the additional staff has already begun. Tulare County anticipates that the

additional staff from the WIB will begin to be hired within the first week of June. Thus, by mid-June, Tulare County will have 111 trained contact tracing staff which will accommodate a potential 3-fold increase in COVID-19 cases. Tulare County can draw upon TC-HHSA staff as well as staff from other partners, who will be trained and placed on reserve in the event of an even larger surge. Tulare County is developing a train the trainer strategy in order to rapidly respond to any surges and seamlessly bring on new employees to assist. Tulare County has been able to quickly mobilize resources to expand contact tracers and institute new contact tracing strategies and processes to keep up with any surge in cases.

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?

There is a total of 18 skilled nursing facilities (SNF's) in Tulare County. The Tulare County Public Health Department works very closely with each of the skilled nursing facilities (SNF's) to ensure they have the proper resources to care for their staff and residents.

Tulare County has a total of 5 correctional facilities with a total capacity of 2,058.

Juvenile Detention Facility - 210 capacity

Main Jail - 264 capacity

South County Detention Facility - 510 Capacity

Pre-Trial - 384 capacity

Bob Wiley Detention Facility - 690 capacity

Two correctional facilities in Tulare County can house and treat COVID+ individuals. The two facilities will provide support to the other facilities should they need to house a COVID+ individual. In addition, each correctional facility has their own health administrator to assist with test collections. The Tulare County Public Safety Liaison works with WellPath and the Public Health Lab to expedite lab results.

Tulare County has a total of 6 homeless shelters with a total capacity of 177. The shelters each have implemented a plan to work directly with the Tulare County Homeless Liaison. The Homeless Liaison has created a process to assist the homeless community with testing and sheltering using Project Roomkey.

Porterville Women's Shelter - Porterville - capacity 6
 Porterville Women's Shelter - Porterville - capacity 32
 Karens House - Visalia - capacity 33
 Light House Rescue Mission - Tulare - capacity 16
 VRM-ONG - Visalia - capacity 50
 VRM-Shelter of Hope - Visalia - capacity 40

Through Project Roomkey, Tulare County has contracts with 4 hotels in 3 cities and can accommodate 151 individuals, 19% of the estimated homeless population.

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.)?

Members of the workforce required to isolate are most commonly instructed to remain home for the duration of their isolation/quarantine. In some cases where home quarantine is not feasible hotels have been offered to workforce.

We have focused a number of resources and interventions to address vulnerable populations within our county, which includes congregate settings, incarcerated populations, and elder populations in long term care facilities.

In each of the Tulare County congregate settings we have educated the staff and administrators about COVID risks and prevention with weekly teleconferences, and technical assistance conversations as needed.

Tulare County has initiated surveillance testing and continue to do symptomatic testing on all persons with COVID symptoms or close contacts who qualify for testing based on CDPH priorities for testing.

The Tulare County MHOAC continues to supply congregate settings and LTCFs with PPE and other supplies as requested. We have contacted, and remain in contact with all SNFs, and they report having >14-day supply of PPE. In addition, SNFs have established or are planning processes for procuring PPE through private vendors.

Tulare County is currently working with its non-profit community partners and contracted providers to ensure that seniors, those with access and functional needs, home bound and medically fragile clients are receiving or have access to healthy well balanced meals (Meals on Wheels program). The county is ensuring that the local

food bank has the resources needed in order to go out to rural communities and continue to distribute food with minimal risk to the resident and populations they serve - which includes many people who are identified in this category.

Additionally, we are making available to these populations, services various programs that will ensure they do not become socially isolated by reaching out to them by phone and mail (Wellness Call Center and Mailers). Appropriate measures are taken so that person to person interaction is done meeting the recommendations made by state and local health officials to minimize clients exposure during the pandemic. Partners include Agency for Aging, Senior Centers, CSET, Meals on Wheels Program, MSSP, Senior Counseling Program, IHSS.

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?

Provide summary for this section and attach complete plan or describe your strategy for developing this section of your plan.

Tulare County tracks hospital capacity daily, including hospital census, ICU census, ventilator availability and surge bed availability through the Department Operations Center Hospital Dashboard. See also the draft Containment Plan attached.

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?

Provide summary for this section and attach complete plan or describe your strategy for developing this section of your plan. **See our attached draft Containment Plan.**

Our business liaisons will continue working with employers who have positive cases. In the event they are interested in arranging for mass testing of their facility we are working with our health care centers who have agreed to make arrangements for mass testing. Depending on the size and location of the employer testing might be arranged on site via a mobile unit/POD setup or slots will be reserved for the employees to visit the health care center for specimen collection. The business liaison team has also written a guidance document for businesses that includes information from CDPH and CDC guidelines in regards to preparing the workplace in the age of COVID. It also has information regarding what to do if you have an employee with suspected or confirmed COVID and what to expect if you have an employee put in quarantine/isolation. The Business Liaisons and Clinical team also have conference calls with businesses to assist with any questions they may have about the process. The business playbook is available to the public on the Tulare County website. Tulare County HHSA also provides wrap-around supportive services for all persons in quarantine.

Special Considerations

- 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?

Tulare County has a large agricultural community and work base. The county has provided videos through social media to reach out to these workers for continued education and outreach. The county has representation from identified leaders in this community to establish the trust to encourage engagement and testing.

The department has a business liaison team that works with the businesses within the county and has been crucial in engaging the business that have experienced outbreaks. The team has worked with food processing, warehouse, fruit packing, and manufacturing businesses to provide a direct line of communication, to answer questions regarding restrictions to their operations depending on the category type and to provide CDPH and CDC guidance.

The Environmental Health Department has established strong relationships with the business community and this has been an asset in working with all companies during this pandemic. The Joint Information Center has established liaisons with several businesses within the community also to place out consistent messaging and communication. Telecommuting has been embraced by all businesses able to roll out these services and are encouraged.

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 and Agency holds weekly meetings with all City Managers and attends frequent City Council Meetings to provide updates and answer questions.

The Agency has initiated a Community Care Coalition that includes a variety of departments and community based organizations that reflect the racial, ethnic, and linguistic diversity of the community. The partners are engaged in the providing input into the ongoing variance plan. Partners include: CSET, Family Services, United Way, The Source, Food Link, Kings View, Family Resource Centers, Rescue Mission, First 5, Turning Point, Homeless Alliance, Probation, Sheriff, Regular meetings are held with the group to share updates and solicit feedback

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?

Tulare County is an active member in the San Joaquin Valley Public Health Consortium that includes 10 counties in the surrounding area. Bi-weekly meetings have been held since March with this group. The department also holds close partner relationships with the Fresno, Kings and Madera County Public Health Departments. There has been engagement one to two times per week during this pandemic to coordinate services and plans. The EOC Managers through Region 5 are engaged and communicate frequently. The Fresno County Emergency Services Department coordinates the ambulance services in Tulare County and is in communication for assistance and support.

Each surrounding county has submitted successful variance attestations to increase the pace through Stage 2 and have provided support to Tulare County to assist in also attaining this status. There have been meetings and conferences with shared elected officials to organize and support a regional approach in moving to the accelerated phase plan.

Many community members cross county lines for services related to health and testing services. Tulare County Public Health Lab has provided support and guidance in providing the testing for the priority groups to the neighboring counties. The coordination of services and assistance will continue in all these areas while moving through the different stages of recovery.

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


- Letter of support from the County Board of Supervisors
- 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.
- County Plan for moving through Stage 2

All documents should be emailed to Jake Hanson at Jake.Hanson@cdph.ca.gov.

I Karen Haught, hereby attest that I am duly authorized to sign and act on behalf of Tulare County. I certify that Tulare 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 Tulare 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 Karen Haught

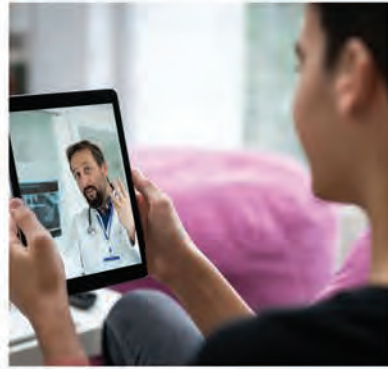
Signature 

Position/Title Public Health Officer

Date 5/26/2020

COVID-19 GUIDE

PLAYBOOK FOR REOPENING YOUR
BUSINESS IN THE AGE OF COVID-19



Tulare County
Health & Human
Services Agency

MESSAGE FROM LEADERSHIP

Dear Business Leaders,

These unprecedented times have been challenging, to say the least. However, we're proud of you for helping our community succeed, from donating meals to essential employees, to sewing masks, to simply sharing resources on social media. We are truly #StrongerTogether.

As we move forward, we know you are anxious to reopen your doors. To ensure the safety of our community and to help you navigate the new normal, we have created this playbook. This comprehensive guide includes many of the recommendations and developed guidelines from the CDC and other federal, state, and local agencies. This resource will act as a living document, which we will update as this fluid situation changes.

Though we all wish to return to our regular lives, we must take necessary precautions during this time. The last thing we want is for the virus to grow during this stage. This playbook is a guideline to help you safely serve your customers and accommodate your employees. If you have any questions, please contact the Tulare County Public Health Branch. We are here to help you.

Thank you for your support and courage as we continue to navigate this pandemic together. We'll continue to persevere the only way we know how: together.

Stay safe.



Tulare County
Health & Human
Services Agency

DISCLAIMER

Please be advised that some or all of the information contained in this document may not be applicable to some businesses or places of work and may not include all information necessary for certain businesses and places of work. This document does not attempt to address any health, safety, and other workplace requirements in place prior to the age of COVID-19. As COVID circumstances continue to evolve, so will the public health and safety recommendations and requirements, and as a result this document may not include all current governmental or health expert requirements and recommendations. We strongly advise that before implementing any of the practices and procedures contained herein, you carefully evaluate this guidance and consult with your own legal counsel and other advisors regarding the legality, applicability, and potential efficacy of this information in your place of business and to determine what, if any, other recommendations or requirements may apply to your business.




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GENERAL RECOMMENDATIONS TO PROTECT EMPLOYEES & CUSTOMERS

The majority of these recommendations come from the California Department of Public Health and CDC guidelines. This playbook provides specific measures for business categories to aid in a safe, thoughtful reopening. The specific recommendations in each category support the overall goal of opening businesses in a way that protects employees and customers from exposure to COVID-19 and helps prevent the virus's spread. Individuals' temperature standards as used in this report will be in accordance with directions from the California Department of Public Health and CDC.

It is also important that businesses take responsibility to ensure they have adequate supplies for their employees and customers such as soap, disinfectant, hand sanitizer, paper towels, tissue, face masks, etc. Companies should keep a minimum of a 15-day supply at all times.

EMPLOYEE & CUSTOMER PROTECTION



- Employees should wear PPE when possible.
- Customers should use face coverings while in public.



- Practice sensible social distancing, maintaining six feet between co-workers.
- All persons in the store will be required to maintain a social distance of at least six feet between each other. Sales registers must be at least six feet apart.
- When possible, open all non-essential doors to reduce the need for direct contact.
- Stores with higher traffic will mark spaces 6 feet apart at the sales registers and outside the entrance to the store.



- Employees who have a fever or are otherwise exhibiting COVID-19 symptoms should not be allowed to work.
- A sign will be posted on the store that individuals who have a fever, cough, or any sign of sickness should not enter.
- Employees should avoid touching your eyes, nose, and mouth. Do NOT shake hands.
- Employees will be required to take reasonable steps to comply with guidelines on sanitation from the Center for Disease Control and Prevention and the California Department of Public Health.
- Encourage workers to report any safety and health concerns to the employer.



- Provide a place to wash hands or alcohol-based hand rubs containing at least 60% alcohol.
- Train workers in proper hygiene practices.
- Sanitize any high-traffic areas, such as doorknobs, counters, etc.



- Limit cash handling.
- Encourage customers to use credit/debit cards, tap to pay, Venmo, PayPal, or another form of contact-free payment.
- Sanitize point-of-sale equipment after each use, including pens.
- Provide hand sanitizer and disinfectant wipes at register locations.

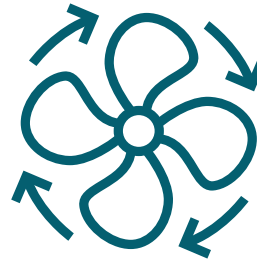
KEEPING THE WORKPLACE SAFE



**PRACTICE GOOD
HYGIENE**



**STOP HANDSHAKING &
AVOID TOUCHING FACE**



**INCREASE
VENTILATION**



**USE
VIDEOCONFERENCING**



**ADJUST/POSTPONE
LARGE GATHERINGS**



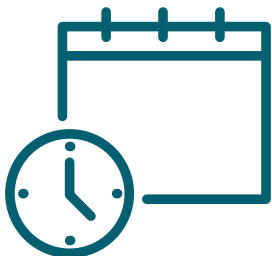
**LIMIT BUSINESS
TRAVEL**



**LIMIT FOOD
SHARING**



**STAY HOME IF YOU OR
A FAMILY MEMBER
IS SICK**



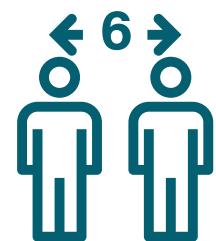
**USE BOOKING SYSTEM
TO STAGGER
CUSTOMERS**



**LIMIT CASH
HANDLING**



**USE ONLINE
TRANSACTIONS**



**PRACTICE SOCIAL
DISTANCING**



**HOLD MEETINGS IN
OPEN SPACES**



**REMAND STAFF OF
HAND WASHING**



**SANITIZE HIGH
TRAFFIC AREAS**



**COMMUNICATE
COVID-19 PLAN WITH
STAFF**

COMMUNICATING WITH YOUR TEAM

Communication during this time is incredibly important. Remain available to and transparent with your employees. Have conversations with employees about their concerns. Some employees may be at higher risk for severe illness, such as older adults and those with chronic medical conditions. Your team's health is of the utmost importance, so loop employees in on your COVID-19 strategy for reopening.



Provide education and training materials in an easy-to-understand format and in the appropriate language and literacy level for all employees, like fact sheets and posters.



Develop other flexible policies for scheduling and telework (if feasible) and create leave policies to allow employees to stay home to care for sick family members or care for children if schools and childcare close.



Actively encourage sick employees to stay home. Develop policies that encourage sick employees to stay at home without fear of reprisal, and ensure employees are aware of these policies.



Educate workers performing cleaning, laundry, and trash pick-up to recognize the symptoms of COVID-19. Develop policies for worker protection and provide training to all cleaning staff on site prior to providing cleaning tasks.



Talk with companies that provide your business with contract or temporary employees about their plans. Discuss the importance of sick employees staying home and encourage them to develop non-punitive "emergency sick leave" policies.



Plan to implement practices to minimize face-to-face contact between employees if social distancing is recommended by the local health department. Actively encourage flexible work arrangements such as teleworking or staggered shifts.



The outbreak of coronavirus disease 2019 (COVID-19) may be stressful for people. Fear and anxiety about a disease can be overwhelming and cause strong emotions in adults and children. Coping with stress will make you, the people you care about, and your community stronger. Encourage employees to take breaks from watching, reading, or listening to news stories, including social media. Hearing about the pandemic repeatedly can be upsetting. Make sure employees are aware of mental health services your company provides. Encourage mindfulness, stretching, meditation and other healthy activities for your team. If employees ask for help regarding their mental health, ask them to reach out to a health care provider and/or call:

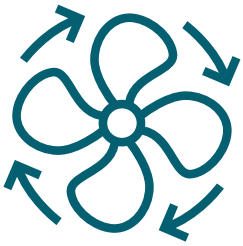
Tulare County Warm Line	1-877-306-2413
Mental Health Crisis Line	1-800-320-1616
Tulare County 24-Hour Crisis Line	1-800-320-1616
Non-Crisis Information	(559) 624-7471

PREPARING YOUR SPACE

Before reopening, you must sanitize your business to limit the spread of germs to your employees and customers. Keep this process limited to as few people as possible.



Disinfect your business before anyone returns to work. Sanitize and disinfect all areas, giving special attention to tools, workstations and equipment, restrooms, food service areas, common surface areas, phones, computers, and other electronics.



Replace HVAC air filters or clean/disinfect existing filters. Increase ventilation by opening windows or adjusting air conditioning.



Put tight controls in place on who enters and exits the site during the cleaning shutdown. Limit the number of workers during this time.

YOUR BUSINESS SHOULD BE 100% DISINFECTED PRIOR TO ANYONE RETURNING TO WORK (OTHER THAN THOSE ASSISTING WITH THE DISINFECTION PROCESS).

DEEP CLEANING

COVID-19 “deep-cleaning” is triggered when an active employee is identified as being COVID-19 positive by testing. Sites may opt to have a deep cleaning performed for presumed cases, at their discretion.

Identify an approved external company that should carry out the deep cleaning activity; this company must have the minimum requirements of:

- Trained personnel to execute the process of cleaning, disinfection, and disposal of hazardous waste
- Proper equipment and PPE to perform the task
- All necessary procedures and local authorizations or permits to perform disinfection services and manage any wastes generated
- Use of approved COVID-19 disinfectant chemicals to perform this activity

A list of approved chemicals and guidelines can be found at [cdc.gov/coronavirus/2019](https://www.cdc.gov/coronavirus/2019)

CLEANING + DISINFECTING AFTER OPENING

CLEAN



Clean surfaces using soap and water. Practice routine cleaning of frequently touched surfaces. High-touch surfaces include: Tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, sinks, etc.

DISINFECT



We recommend use of EPA-registered household disinfectant. Follow the instructions on the label to ensure safe and effective use of the product. Many products recommend:

- Keeping surface wet for a period of time (see product label)
- Precautions such as wearing gloves and making sure you have good ventilation during use

Water-diluted household bleach solutions may also be used if appropriate for the surface.

- Check the label to see if your bleach is intended for disinfection, and ensure the product is not past its expiration date. Some bleaches, such as those designed for safe use on colored clothing or for whitening, may not be suitable for disinfection.
- Unexpired household bleach will be effective against coronaviruses when properly diluted. Follow manufacturer's instructions for application and proper ventilation. Never mix household bleach with ammonia or any other cleanser. Leave solution on the surface for at least 1 minute.

Alcohol solutions with at least 70% alcohol may also be used.

SOFT SURFACES



For soft surfaces such as carpeted floors, rugs, upholstery, and drapes:

- Clean the surface using soap and water or with cleaners appropriate for use on these surfaces.
- Launder items (if possible) according to the manufacturer's instructions. Use the warmest appropriate water setting and dry items completely.
- Disinfect with an EPA-registered household disinfectant if laundry isn't possible.

ELECTRONICS



For electronics, such as tablets, touch screens, keyboards, remote controls, and ATMs:

- Consider putting a wipeable cover on electronics.
- Follow manufacturer's instruction for cleaning and disinfecting.
- If no guidance is available, use alcohol-based wipes or sprays containing at least 70% alcohol. Dry surface thoroughly.

LAUNDRY



For clothing, towels, linens, and other items:

- Launder items according to the manufacturer's instructions. Use the warmest appropriate water setting and dry items completely.
- Wear disposable gloves when handling dirty laundry from a person who is sick.
- Dirty laundry from a person who is sick can be washed with other people's items.
- Do not shake dirty laundry.
- Clean and disinfect clothes hampers according to guidance above for surfaces.
- Remove gloves, and wash hands right away.

[cdc.gov/coronavirus/2019/community/disinfecting-building-facility](https://www.cdc.gov/coronavirus/2019/community/disinfecting-building-facility)

PERSONAL PROTECTION EQUIPMENT

Personal protective equipment is protective clothing, helmets, goggles, or other garments or equipment designed to protect the wearer's body from injury or infection. The hazards addressed by protective equipment include physical, electrical, heat, chemicals, biohazards, and airborne particulate matter. Businesses should keep a minimum quantity of 15-day supply of PPE. PPE can include masks, face shields, and gloves.

WHO SHOULD WEAR MASKS?

Medical and isolation team members
Health screeners (i.e., a supervisor who takes employees' temperature)
Disinfection team members
Those with broad exposure to customers or employees

WHO SHOULD WEAR FACE SHIELDS?

Face shields are commonly used in health care and manufacturing. They can provide extra protection for those who must work within three feet of another person due to their job requirements. They are not necessary unless you work in health care/manufacturing, but they can help.

WHO SHOULD WEAR GLOVES?

Those performing disinfection of common surfaces
Employees handling trash
Employees handling food

Note: Gloves put employees at higher risk of exposure and are not recommended for general protective use for the following reasons:

- The COVID-19 virus does not harm your hands, so gloves provide no protection, and touching your face with contaminated hands, whether gloved or not, poses a significant risk of infection.
- Gloves often create a false sense of security for the individuals wearing them; people are more likely to touch contaminated surfaces because they feel they are protected from the virus because of the gloves, when in reality they are not.
- When wearing gloves, people are less inclined to wash their hands; this is counterproductive and puts others at higher risk; we want people to wash their hands because it is the number-one defense against any virus.
- Proper removal of gloves takes training; if contaminated gloves are not removed properly, our employees are exposed to greater risk.

REMEMBER: PPE IS ONLY EFFECTIVE IF IT IS WORN CORRECTLY. TRAIN YOUR EMPLOYEES IN CORRECT PPE USAGE. REFER TO THE CDC GUIDELINES.

STAY PREPARED

- Confirm operation has an adequate supply of soap, disinfectant, hand sanitizer, paper towels, and tissues.
- Confirm stock of PPE.
- Have touchless thermometers on site for employee screening.
- Businesses should keep a minimum quantity of a 30-day supply of disinfectant supplies.

MAKE YOUR OWN MASK

CDC recommends wearing cloth face coverings in public settings where other social distancing measures are difficult to maintain (e.g., grocery stores and pharmacies), especially in areas of significant community-based transmission.

Sewn Cloth Face Covering

Materials:

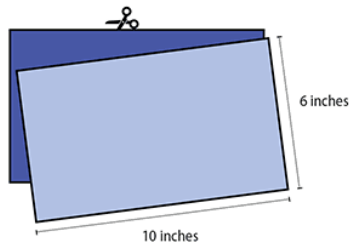
Two 10"x6" rectangles of cotton fabric

Two 6" pieces of elastic (or rubber bands, string, cloth strips, or hair ties)

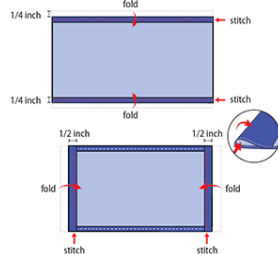
Needle and thread (or bobby pin)

Scissors

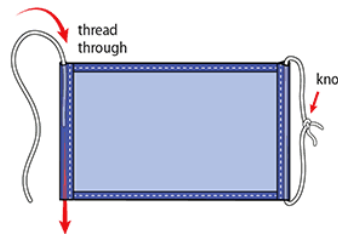
Sewing machine



1. Cut out two 10-by-6-inch rectangles of cotton fabric. Use tightly woven cotton, such as quilting fabric or cotton sheets. T-shirt fabric will work in a pinch. Stack the two rectangles; you will sew the mask as if it was a single piece of fabric.

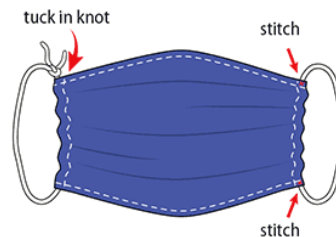


2. Fold over the long sides $\frac{1}{4}$ inch and hem. Then fold the double layer of fabric over $\frac{1}{2}$ inch along the short sides and stitch down.



3. Run a 6-inch length of $\frac{1}{8}$ -inch wide elastic through the wider hem on each side of the mask. These will be the ear loops. Use a large needle or a bobby pin to thread it through. Tie the ends tight.

Don't have elastic? Use hair ties or elastic head bands. If you only have string, you can make the ties longer and tie the mask behind your head.



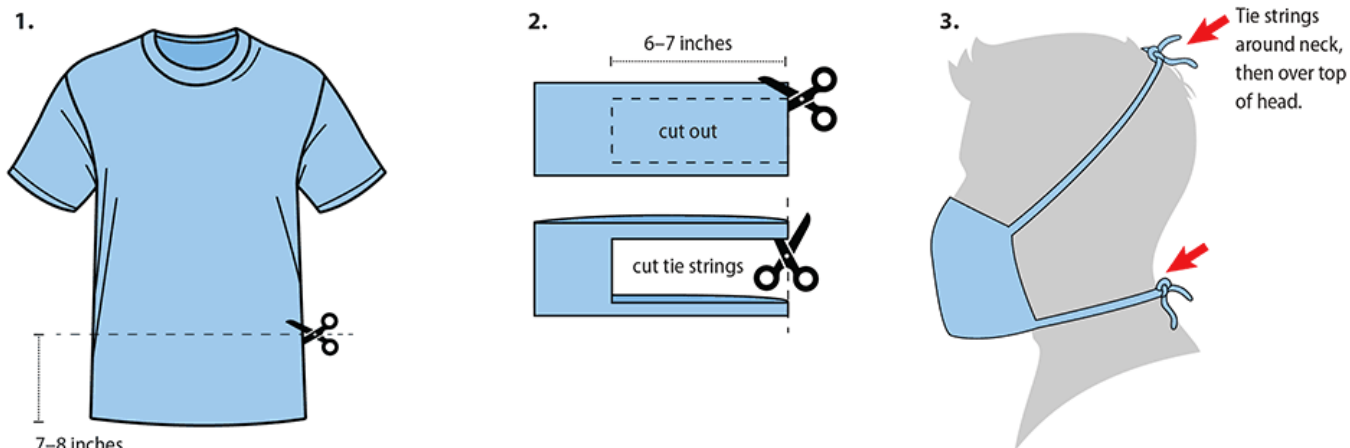
4. Gently pull on the elastic so that the knots are tucked inside the hem. Gather the sides of the mask on the elastic and adjust so the mask fits your face. Then securely stitch the elastic in place to keep it from slipping.

Quick Cut T-shirt Face Covering (no sew method)

Materials:

T-shirt

Scissors



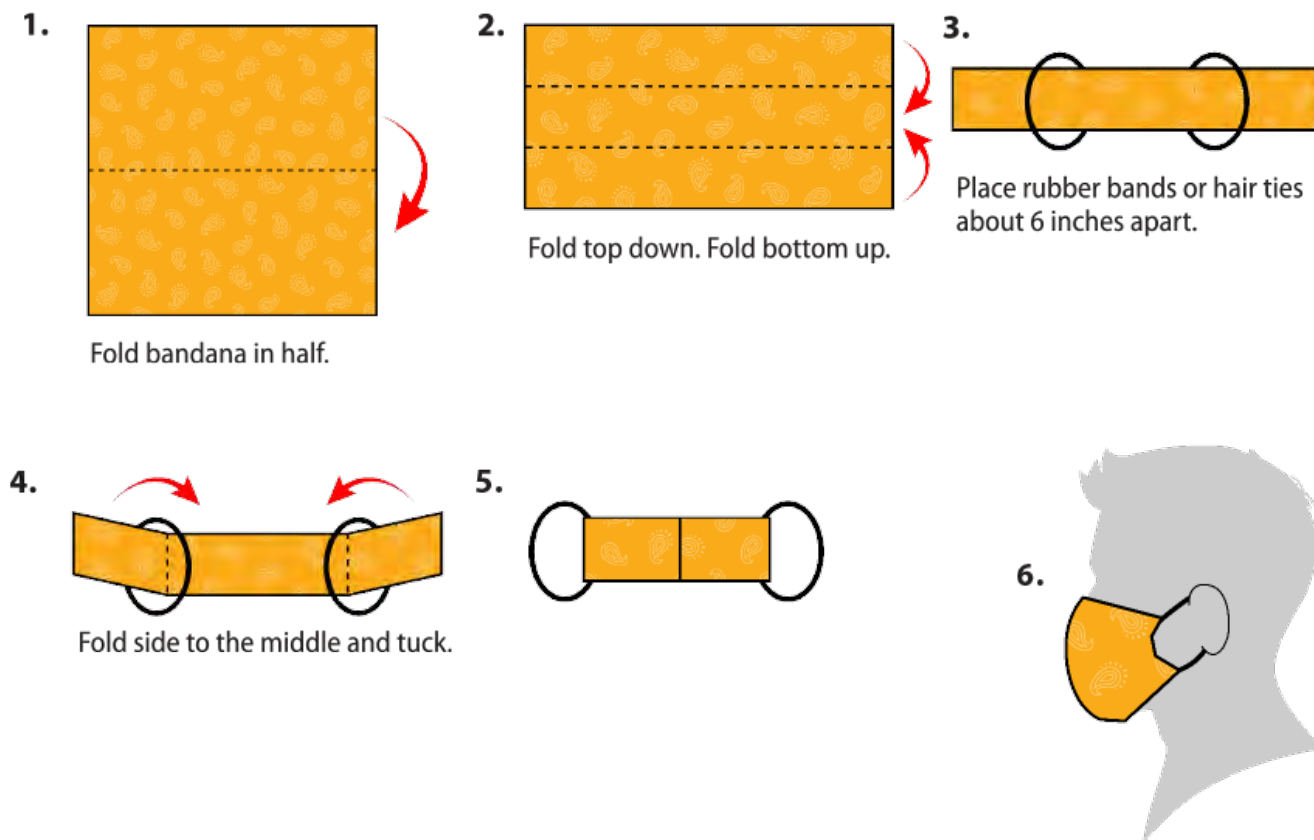
Bandana Face Covering (no sew method)

Materials:

Bandana (or square cotton cloth approximately 20"x20")

Rubber bands (or hair ties)

Scissors (if you are cutting your own cloth)



Tutorials courtesy of CDC. For more information, visit www.cdc.gov/coronavirus/.

HOW LONG COVID-19 LIVES ON SURFACES

ALUMINUM

Examples: soda cans, tinfoil

2–8 hours

CARDBOARD

Examples: shipping boxes

24 hours

CERAMICS

Examples: dishes, pottery, mugs

5 days

PAPER

Examples: magazines, mail, money

Minutes–5 days

COPPER

Examples: pennies, teakettles, cookware

4 hours

METAL

Examples: doorknobs, jewelry, tools

5 days

PLASTICS

Examples: bottles, buttons

2–3 days

GLASS

Examples: glasses, measuring cups, mirrors, windows

5 days

STAINLESS STEEL

Examples: refrigerators, pots, pans, sinks

2–3 days

WOOD

Examples: furniture, decking

4 days

Food

Coronavirus doesn't seem to spread through exposure to food. Still, it's a good idea to wash fruits and vegetables under running water before you eat them. Scrub them with a brush or your hands to remove any germs that might be on their surface. Wash your hands after you visit the supermarket. If you have a weakened immune system, you may consider buying frozen or canned produce.

Water

Coronavirus hasn't been found in drinking water. If it does get into the water supply, your local water treatment plant filters and disinfects the water, which should kill any germs.

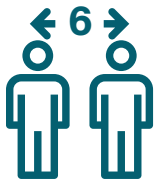
**TO REDUCE YOUR CHANCE OF CATCHING OR SPREADING CORONAVIRUS,
CLEAN AND DISINFECT ALL SURFACES AND OBJECTS IN YOUR
HOME AND OFFICE EVERY DAY.**

FIVE ESSENTIAL ACTIONS FOR INDIVIDUALS

The following Five Essential Actions are recommended to help reduce the spread of COVID-19 and safely maintain the county's reopening efforts. It is important that community members continue to implement these actions through every phase of the reopening plan to prevent the spread of COVID-19.

1. Social Distancing

Physical distancing (also called social distancing) means keeping space between yourself and other people who do not live with you. To practice physical distancing:



- Stay at least 6 feet from people who are not part of your household
- Avoid hand shaking or high fives
- Avoid social and family gatherings larger than the size indicated in each Phase.
- Avoid crowded spaces and mass gatherings as indicated by the Phase.

2. Cloth Face Coverings



When outside the home, the wearing of a cloth face coverings (masks) by individuals is strongly encouraged and at times required. Cloth face coverings are intended to trap droplets leaving the wearer's mouth and nose. This reduces the risk of spreading COVID-19 if someone is asymptomatic or if pre-symptomatic, which means they don't look or feel sick but can still pass COVID-19 on to others.

Wearing a cloth face covering protects your neighbors. When your neighbor wears a cloth face covering they are protecting you. Cloth face coverings also help to remind you not to touch your face with unwashed hands. The CDC has guidance on how to make, wear, and care for a cloth face covering. When not wearing a cloth face covering (at home or when eating, for example), it is important to cough or sneeze into your elbow or a tissue and not your hand.

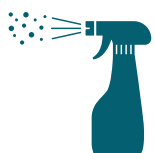
3. Hand Washing



Washing your hands with soap and water for 20 seconds helps to removed the virus from your hands if you come in contact with the virus. If soap and water is not available and your hands are not visibly soiled, hand sanitizer that contains at least 60% alcohol can be used.

Remember to wash your hands after you have been in a public place or touched an item or surface that may be frequently touched by other people, such as door handles, tables, gas pumps, shopping carts, or electronic cashier registers/screens, etc. The CDC website has more information on when and how to wash your hands.

4. Disinfecting Surfaces



Regularly disinfecting surfaces with soap and water or EPA-registered household disinfectants (including bleach and cleaners containing at least 70% alcohol) helps to prevent transmission from droplets that may have settled on surfaces or have transferred to commonly used surfaces through touch, such as door handles and light switches.

5. Stay Home if Sick or You are Instructed to Isolate/Quarantine by a Medical or Public Health Professional



If you are sick or have been instructed to stay home by a medical professional, stay home. The strategies listed above rely on people staying home when they know they feel sick or have been told to self-isolate/quarantine. If you feel sick and are concerned, contact your doctor's office to determine if you need to be seen. If possible, ask others to deliver needed supplies instead of going to the store. If you live with others, follow CDC guidance for caring for someone who is sick at home.

High-Risk Individuals

Higher-risk individuals include those **over the age of 65** and those with **serious underlying health conditions**, such as high blood pressure, chronic lung disease, diabetes, obesity, asthma, and those whose immune system is compromised.

Throughout all stages, higher-risk individuals are strongly encouraged to follow the guidance specifically for them. Residents who are 65+ and individuals with underlying conditions should stay home and wear face covering when unable to continuously maintain 6-foot social distancing when in public.

WHAT SHOULD I DO IF AN EMPLOYEE IS SUSPECTED OR CONFIRMED TO HAVE COVID-19

In most cases, you do not need to shut down your facility. But do close off any areas used for prolonged periods of time by the sick person:

- Wait 24 hours before cleaning and disinfecting to minimize potential for other employees being exposed to respiratory droplets. If waiting 24 hours is not feasible, wait as long as possible.
- During this waiting period, open outside doors and windows to increase air circulation in these areas.

Follow the CDC cleaning and disinfection recommendations:

- Clean dirty surfaces with soap and water before disinfecting them.
- To disinfect surfaces, use products that meet EPA criteria for use against SARS-Cov-2, the virus that causes COVID-19, and are appropriate for the surface.
- Always wear gloves and gowns appropriate for the chemicals being used when you are cleaning and disinfecting.
- You may need to wear additional personal protective equipment (PPE) depending on the setting and disinfectant product you are using.

In addition to cleaning and disinfecting, employers should determine which employees may have been exposed to the virus and need to take additional precautions:

- Most workplaces should follow the Public Health Recommendations for Community-Related Exposure.
- Critical infrastructure workplaces should follow the guidance Implementing Safety Practices for Critical Infrastructure Workers Who May Have Had Exposure to a Person with Suspected or Confirmed COVID-19.

Sick employees should follow CDC-recommended steps. Employees should not return to work until they have met the criteria to discontinue home isolation and have consulted with a healthcare provider and state or local health department.

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 as required by the Americans with Disabilities Act (ADA).

**PLEASE CONTACT TULARE COUNTY
PUBLIC HEALTH DEPARTMENT FOR ADDITIONAL GUIDANCE**

WHAT TO EXPECT WHEN EMPLOYEES ARE QUARANTINED/ISOLATED

Isolation Letter: The Tulare County Public Health Department will notify confirmed cases directly, discuss isolation requirements and send a packet. The packet includes an isolation letter, materials on the precautions individuals must take, a symptom monitoring schedule, and instructions on following up with the health care provider, if their symptoms worsen.

Will the employer be notified of positive test result? PH will release positive test results based on an effort to protect the community. Employers are notified in an effort to prevent the spread of Covid 19 at their facility. All close contacts to a positive case must quarantine to prevent the spread of Covid 19 at their facility. The employer is notified and the risk assessment process is initiated by a business liaison.

Will the employer be notified of negative test result? Negative test results do not meet criteria as a threat to public safety, so generally we do not release that information. The prescribing physician is provided negative test results and has a private conversation with their patient. Employers can obtain a release of information from their employee to obtain test results (positive/negative).

What if my employee has a negative test result, can they work? If an individual has come into contact with a confirmed positive case and tested negative, the individual must still quarantine.

Clearance Letter, When can my employee return to work?

- For a confirmed positive case, the employee is expected to isolate. You can expect to have your employee return to work under the following conditions:
 1. At least 10 days have passed since symptoms first appeared,
 2. No fever (temperature above 100.4 F) for 3 full days, without the use of fever reducing medicine, and
 3. Other symptoms have improved.
- For a contact to a confirmed positive case, the employee is expected to quarantine. You can expect to have your employee return to work under when the individual meets the following criteria:
 1. At least 14 days have passed since exposure date,
 2. No fever (temperature above 100.4 F) for 3 full days, without the use of fever reducing medicine, and
 3. Other symptoms have improved.

Please note: There may be other factors that may extend an employees return. PH will issue a clearance letter

Will PH notify the employer that the employee can work? The Public Health Department will release the patient from isolation and issue a letter which indicates that the individual may resume regular activities to the individual.

The employee can share this information to their employer directly. If the employer would like to receive information, they need to obtain a release of information form prior to releasing Public Health Information.

Is retesting necessary? At this time, the Public Health Department is using time and symptom based procedures to provide clearance. Testing kits are limited and encourage testing to identify new individuals that may be medically vulnerable and provide services to medically vulnerable populations. PH is not encouraging re-testing patients after the isolation period, as long as the individual has met the clearance criteria.

In addition, the Centers for Disease Control (CDC) is not recommending re-testing due to the prolonged detection of the virus without viability of further infection. The employer may request additional criteria be met prior to an individual returning to work.

What if the employer wants the employees tested? Individuals needing to be tested can be referred to their primary care provider and other commercial testing sites.

RESOURCES FOR BUSINESS

STATEWIDE RESOURCES

California is providing broad assistance to small businesses and employers impacted by COVID-19. This includes:

- Small business interest-free deferral of sales/use tax up to \$50,000 for businesses with less than \$5 million in taxable sales.
- Federal small business stimulus programs:
 - Economic Injury Disaster Loan Advance
 - Paycheck Protection Program
 - Small Business Debt Relief
- 90-day extension on all businesses filing a return for less than \$1 million in taxes
- Small Business Disaster Relief Loan Guarantee Program (via IBank) \$50 million in state funding, providing potential capital for individuals who do not qualify for federal funds.

For more information visit the California COVID-19 Response website.

CALIFORNIA “GO-BIZ” RESOURCES

The Governors Office of Business and Economic Development (GO-Biz) has compiled helpful information for employers, employees, and all Californians as it relates to the Coronavirus (COVID-19) pandemic. Californians can access the California GO-Biz Coronavirus Resources page for newsletters, program instruction videos, weekly webinars, latest updates, and more information related to business and economic development.

NATIONWIDE RESOURCES

Small Business Administration (SBA)

The U.S. Small Business Administration (SBA) has a variety of relief options and additional resources for business owners to help overcome challenges created by this health crisis. SBA is offering multiple funding options for those seeking relief made possible by the CARES Act, which contains relief funding for American workers and small businesses.

Visit the SBA website for funding options and more information.

U.S. Chamber of Commerce

The U.S. Chamber of Commerce is marshalling its full resources to assist companies and businesses to continue to operate and keep paychecks flowing to American workers. The Chamber of Commerce has created an array of resources and guidance for business owners. Visit the U.S. Chamber of Commerce website for information regarding Emergency Loan programs, Economic Injury Disaster Load Programs, and other relief programs for businesses and independent contractors.

<https://covid19.tularecounty.ca.gov/business-and-financial-resources/>

AVERAGE LEVEL OF CUSTOMER INTERACTION



Work requires some contact with customers.

EMPLOYEE & CUSTOMER PROTECTION



- Masks should be used for employees working in close proximity.
- Make hand-washing stations more readily available and encourage their use.



- Smaller farms can participate in socially-distant farmers markets to safely provide products for customers.
- Use social distancing when preparing products for delivery/making deliveries.
- Social distancing should be used at the farm for employees, too.
- Stagger break and lunch times.
- Limit crew size by staggering work shifts or increasing the number of work shifts.
- Provide additional seating and shade to allow employees to take breaks while distancing.
- Clean and disinfect commonly touched surfaces and objects throughout the work day.

MORE AGRICULTURE RESOURCES

California Farm Bureau Federation:
<https://www.cfbf.com>

CAL OSHA - Infection Prevention for Agriculture Employers & Employees

ANIMAL SERVICES

STAGE 2

This includes animal shelters.

AVERAGE LEVEL OF CUSTOMER INTERACTION



Work requires some contact with customers.

EMPLOYEE & CUSTOMER PROTECTION



- Masks should be used for employees working in close proximity.
- If a customer or employee is sick, he or she will be sent home or to a health care facility.
- Business may require patrons to wear masks.



- Animal shelters should use virtual tours when possible and limit visits to appointment only. Only one customer should visit at a time.



- Limit cash handling.
- Encourage customers to use credit/debit cards, tap to pay, Venmo, PayPal, or another form of contact-free payment.
- Sanitize point-of-sale equipment after each use, including pens.
- Provide hand sanitizer and disinfectant wipes at register locations.

MORE ANIMAL SERVICES RESOURCES

Tulare County Animal Services:
www.tcanimalservices.org

PHARMACIES

STAGE 2

AVERAGE LEVEL OF CUSTOMER INTERACTION



Some work requires direct physical contact with customer.

EMPLOYEE & CUSTOMER PROTECTION



- Pharmacy personnel will wear protective face masks and gloves as appropriate.
- If an employee is sick, he or she will be sent home or to a health care facility.
- Utilize plastic shields/screens at check-out and other counters.
- Business may require patrons to wear masks.



- Encourage all prescribers to submit prescription orders via telephone or electronically. The pharmacy should have procedures to avoid handling paper prescriptions.
- Drive-through and curbside service should be used for prescription pick-up.
- Deliver pharmacy items to patients' homes where possible.
- Utilize plastic shields/screens at check-out and other counters.
- Widen check-out counters for social distancing.
- Strategies to limit direct contact with customers include:
 - Packaged medication can be placed on a counter for the patient to retrieve.
 - Avoid handling insurance or benefit cards.
 - Avoid touching objects that have been handled by patients.
- Add markings and signs where appropriate to encourage social distancing.



- Provide hand sanitizer on counters for use by customers and have sufficient and easy access to soap and water or hand sanitizer for staff.
- Increase cleaning measures and supplies for the pharmacy area.
- Bathrooms should be sanitized after use.
- Sanitize any high-traffic areas, such as doorknobs, counters, etc.
- Close self-serve blood pressure units.



- Limit cash handling.
- Encourage customers to use credit/debit cards, tap to pay, Venmo, PayPal, or another form of contact-free payment.
- Sanitize point-of-sale equipment after each use, including pens.
- Promote the use of self-serve checkout registers and clean them frequently. Provide hand sanitizer and disinfectant wipes at register locations.

MORE PHARMACY RESOURCES

California Pharmacists Association:
<https://cpha.com>

This section covers real estate agents.

AVERAGE LEVEL OF CUSTOMER INTERACTION



Work requires close contact with customer.

AGENT + CLIENT PROTECTION



- Clients and agents should wear masks and gloves for showings, closings, and other face-to-face interactions.
- Clients and agents should wear shoe covers when entering a home.
- Business may require patrons to wear masks.



- Encourage virtual tours and open houses.
- Use digital notary seal and remote signings.
- Use electronic closing on home loans.
- Limit number of people in office at one time.
- Only the decision maker(s) should attend showings. No children should attend. Sick individuals should not attend showings.



- Provide sanitizing station in home, including soap, paper towels, garbage can, and hand sanitizer.
- Only realtor or sellers turn lights on, open doors, cabinets, closets, etc.
- To minimize germ spread, clients may not open cabinets.
- Sanitize the home prior to and following showings.

MORE REAL ESTATE RESOURCES

California Association of Realtors:
<https://www.car.org>

CONSTRUCTION

STAGE 2

This includes residential, commercial, and industrial construction.

AVERAGE LEVEL OF CUSTOMER INTERACTION



Work requires face-to-face interactions and some work in close quarters.

EMPLOYEE & CUSTOMER PROTECTION



- Masks should be used for employees working in close proximity.
- Field fever tests should be administered before employees are allowed to enter an active construction site.
- Business may require patrons to wear masks.



- All equipment, materials, and tools will be sanitized at the beginning of the workday and upon delivery by a third party.
- Provide required hand-washing stations.

MORE CONSTRUCTION RESOURCES

Associated General Contractors of California:
<https://www.agc-ca.org>

FOOD SERVICE | COFFEE SHOPS

STAGE 2

This section includes restaurants, bars, coffee shops, and catering companies.

AVERAGE LEVEL OF CUSTOMER INTERACTION



Work requires some contact with customer.

EMPLOYEE & CUSTOMER PROTECTION



- Employees should wear masks, and the CDC and FDA recommend masks/face coverings for all employees.
- Gloves are already part of the supplies restaurants use on a daily basis. There should be no additional need for other supplies outside the normal course of business.
- Business may require patrons to wear masks.



- Bathrooms should be sanitized frequently.
- High customer contact areas (e.g., door entrances) should be cleaned every two hours.
- Menus, if laminated, should be cleaned after each usage, or paper menus shall be designed for single use.
- Condiments are not to be left on tables. Provide by request and sanitize after usage, or disposable packets should be used.



- Wash your hands often with soap and water for at least 20 seconds.
- If soap and water are not available, use a 60% alcohol-based handsanitizer per CDC.
- Avoid touching your eyes, nose, and mouth with unwashed hands.



- Never touch Ready-to-Eat foods with bare hands.
- Use single-service gloves, deli tissue, or suitable utensils.
- Wrap food containers to prevent cross-contamination.
- Follow 4 steps to food safety: Clean, Separate, Cook, and Chill.



- Employees who have a fever or other symptoms of COVID-19 will not be allowed to work.
- A sign should be posted on the store that individuals who have a fever, cough, or any sign of sickness should not enter.

SIGNS AND MESSAGES

- Post signs in highly visible locations (e.g., at entrances, in restrooms) that promote everyday protective measures and stop the spread of germs such as by properly washing hands, properly wearing a cloth face covering and do not enter the facility if you are sick or have any of the identified symptoms
- Find free CDC print and digital resources at the bars and restaurant page, as well as on CDC's communications resources main page.

MODIFIED LAYOUTS AND PROCEDURES

- Consider changing restaurant layouts to ensure that all customer parties remain at least 6 feet apart (e.g., marking tables/stools that are not for use).
- Limit seating capacity to allow for social distancing.

Discourage crowded waiting areas by using phone app, text technology, or signs to alert patrons when their table is ready. Avoid using "buzzers" or other shared objects.

AVERAGE LEVEL OF CUSTOMER INTERACTION



Work requires some contact with other employees.

EMPLOYEE & CUSTOMER PROTECTION



- Establish an adequate supply of PPE. This includes:
 - Disposable surgical masks (1 per employee/day).
 - Nitrile gloves (2 pairs per employee/day).
 - Glasses/face shields (1 per employee).
- Business may require patrons to wear masks.



- Establish a social distancing strategy based on the layout and workflow of the facility, including break areas.
- Arrange staggered "day-of-return" meetings to discuss mitigation strategy.
- Limit face-to-face interaction with customers.
- Barriers or screens may be installed in areas where workflow prohibits adherence to social distancing protocol.



- Establish on-site health screening strategy.
- Establish on-site screening checkpoints upon entrance to facility.
- Establish isolation protocols in case an employee contracts COVID-19 and contaminates the facility.



- Establish an adequate supply of preventive material inventory (soap, sanitizer, thermometers, etc.).
- Establish a disinfection team to clean/disinfect entire facility and create a recurring disinfection schedule.
- Establish an inbound parts/materials/packages disinfection strategy.
- Expedited shipments (transit time less than 48 hours) should be handled utilizing PPE and personal sanitization practices.
- Expedited shipment may be sanitized (only by appropriately trained personnel) with a 10% bleach solution or a hospital-grade disinfectant.
- When possible, allow incoming materials to remain untouched for 48 hours after receipt.



- Establish an internal pandemic response team that will design and implement a "return-to-work" plan.
- Assign a COVID-19 protocol coordinator and training strategy.

MORE MANUFACTURING RESOURCES

Automotive Service Councils of California:

<https://www.ascca.com>

FINANCIAL SERVICES

STAGE 2

This includes banks, credit unions, and financial planners.

AVERAGE LEVEL OF CUSTOMER INTERACTION



Work requires some contact with customers and cash handling.

EMPLOYEE & CUSTOMER PROTECTION



- Masks should be used for employees working in close proximity to other employees or customers.
- Employees handling cash should wear gloves.
- Business may require patrons to wear masks.



- Limit the number of individuals inside the lobby/public areas in banks/credit unions capacity per square feet.
- Encourage drive-through use.
- Encourage virtual meetings regarding loans, financial planning, etc.



- Additional hand sanitizing stations will be available to patrons and employees.
- Bathrooms should be sanitized after use.
- Sanitize any high-traffic areas, such as doorknobs, counters, etc.

- Point-of-sale equipment will be frequently cleaned and sanitized.
- Protective screens may be installed at the discretion of each institution.
- Teller windows must be at least 6 feet apart.
- Pens should be sanitized after use.

MORE FINANCIAL SERVICES RESOURCES

Financial Planning Association:
<https://www.onefpa.org/>

California Bankers Association:
<https://www.calbankers.com>

OFFICES/PROFESSIONAL SERVICES

STAGE 2

Examples include law firms, accounting firms, and other essential offices.

AVERAGE LEVEL OF CUSTOMER INTERACTION



Work requires some contact with others.

EMPLOYEE & CUSTOMER PROTECTION



- Masks should be used for employees working in close proximity to other employees or customers/clients.
- Employees who are sick should not come to work. Customers/clients who are sick will not be permitted in the building.
- Business may require patrons to wear masks.



- Allow employees to work remotely if possible.
- Hold large meetings via teleconference.
- Limit number of individuals in the building and use social distancing.
- Encourage clients/customers to connect via phone call or video conference.



- Hand sanitizing stations will be available to customers and employees.
- Any equipment used will be cleaned and disinfected after each use.
- Bathrooms should be sanitized after use.
- Sanitize any high-traffic areas, such as doorknobs, counters, etc.
- Do not use another employee's phone, keyboard, computer, etc.
- Sanitize keyboards, screens, phones, etc., daily.



- Point-of-sale equipment (if applicable) will be frequently cleaned and sanitized.
- Limit cash handling. Encourage use of credit/debit cards, Venmo, PayPal, etc.
- Pens should be sanitized after use by client/customer.

MORE OFFICE RESOURCES

California Certified Public Accountants:
<https://www.calcpa.org>

California Association of Non-profits:
<https://calnonprofits.org>

RETAIL: GROCERIES | GAS STATIONS

STAGE 2

This section includes grocery stores, liquor stores, food retailers, gas stations, and convenience stores.

AVERAGE LEVEL OF CUSTOMER INTERACTION



Requires close interaction between staff and customers but not direct physical contact.

EMPLOYEE & CUSTOMER PROTECTION



- Post a sign to the storefront that informs individuals who have a fever or other symptoms of COVID-19 should not enter the store.
- Employees may be allowed to wear face masks. Gloves should only be worn to handle food.
- Customers will be encouraged to wear face masks in order prevent spreading of the virus.
- Business may require patrons to wear masks.



- All persons in the store should practice sensible social distancing of at least 6 feet from another person.
- Signs and floor markings can be used to encourage social distancing.
- Avoid displays that lead to crowding.
- Encourage guests to make shopping lists to decrease time in the store.



- Encourage customers to use hand sanitizer upon entering the store.
- Sanitize entrance/exit doors at least three times per day. Employees may be allowed to wear face masks or gloves.
- Employees will have access to hand sanitizer or a place to wash their hands.
- Workers and customers will be provided an adequate number of trash receptacles.
- Sanitization of incoming stock and merchandise is recommended.
- Sanitize bathrooms often and limit bathroom occupancy.
- Sanitize shopping carts and baskets often. Encourage customers to wipe down carts before use.



- Point-of-sale equipment will be frequently cleaned and sanitized.
- The stores will encourage customers to make non-cash payments.
- Add clear shields to point of transaction to aid in distancing.
- Sales registers must be at least 6 feet apart.
- Salesperson will encourage customers either to insert payment card or to provide their own pen or sanitize store's pen, before and after use to sign the receipt. Receipt should be left on counter.
- Encourage curbside pick-up options or consider offering these services.
- At gas stations, sanitize pumps and encourage patrons to use a secondary barrier when pumping gas (glove or paper towel).



- Employees who have a fever or are otherwise exhibiting COVID-19 symptoms will not be allowed to work.
- Employees will be required to take reasonable steps to comply with guidelines on sanitation from the Centers for Disease Control and Prevention and the California Department of Public Health.
- Encourage workers to report any safety and health concerns to the employer.

CHILDCARE FACILITIES

STAGE 2

This section includes family child care programs, also known as home-based child care, Pre-K (Pre-kindergarten) programs at private and public schools, and Head Start and Early Head Start programs.

AVERAGE LEVEL OF CUSTOMER INTERACTION



Work requires direct physical contact with children.

EMPLOYEE & CHILD PROTECTION



- When feasible, staff members and older children should wear face coverings within the facility. Cloth face coverings should NOT be put on babies and children under age two because of the danger of suffocation.
- Business may require patrons to wear masks.



- Employees who have a fever or are otherwise exhibiting COVID-19 symptoms will not be allowed to work.
- Persons who have a fever of 100.4°F (38.0°C) or above or other signs of illness should not be admitted to the facility. Encourage parents to be on the alert for signs of illness in their children and to keep them home when they are sick. Screen children upon arrival, if possible.
- Encourage workers to report any safety and health concerns to the employer.



- Facilities should develop a schedule for cleaning and disinfecting.
- Routinely clean, sanitize, and disinfect surfaces and objects that are frequently touched, especially toys and games. This may also include cleaning objects/surfaces not ordinarily cleaned daily, such as doorknobs, light switches, classroom sink handles, countertops, nap pads, toilet training potties, desks, chairs, cubbies, and playground structures. Use the cleaners typically used at your facility.
- Use all cleaning products according to the directions on the label. For disinfection, most common EPA-registered, fragrance-free household disinfectants should be effective.
- If possible, provide EPA-registered disposable wipes to child care providers and other staff members so that commonly used surfaces such as keyboards, desks, and remote controls can be wiped down before use.
- All cleaning materials should be kept secure and out of reach of children.
- Cleaning products should not be used near children, and staff should ensure that there is adequate ventilation when using these products to prevent children from inhaling toxic fumes.
- Toys that cannot be cleaned and sanitized should not be used.
- Machine washable cloth toys should be used by one individual at a time or should not be used at all. These toys should be laundered before being used by another child.
- Do not share toys with other groups of infants or toddlers unless the toys are washed and sanitized before being moved from one group to the other.
- Bedding that touches a child's skin should be cleaned weekly or before use by another child.



- Consider staggering arrival and drop-off times and plan to limit direct contact with parents as much as possible.
- Ideally, the same parent or designated person should drop off and pick up the child every day. If possible, older people such as grandparents or those with serious underlying medical conditions should not pick up children, because they are more at risk for severe illness from COVID-19.
- Hand hygiene stations should be set up at the entrance of the facility so that children can clean their hands before they enter.



- If possible, child care classes should include the same group each day, and the same child care providers should remain with the same group each day.
- Cancel or postpone special events such as festivals, holiday events, and special performances.
- Limit the mixing of children, staggering playground times and keeping groups separate for special activities such as art, music, and exercising.
- If possible, at nap time, ensure that children's nap time mats (or cribs) are spaced out as much as possible, ideally 6 feet apart. Consider placing children head to toe in order to further reduce the potential for viral spread.
- If possible, arrange for administrative staff to telework from their homes.
- Classes should be limited to 11 children per room, as per CDC recommendations.



- It is important to comfort crying, sad, and/or anxious infants and toddlers, and they often need to be held. To the extent possible, when washing, feeding, or holding very young children: Child care providers can protect themselves by wearing an over-large, button-down, long-sleeved shirt and by wearing long hair up off the collar in a ponytail or other updo.
- Child care providers should wash their hands, neck, and anywhere touched by a child's secretions.
- Child care providers should change the child's clothes if secretions are on the child's clothes. They should change the button-down shirt if there are secretions on it and wash their hands again.
- Contaminated clothes should be placed in a plastic bag or washed in a washing machine.
- Child care providers should wash their hands before and after handling infant bottles prepared at home or prepared in the facility. Bottles, bottle caps, nipples, and other equipment used for bottle-feeding should be thoroughly cleaned after each use by washing in a dishwasher or by washing with a bottlebrush, soap, and water.



- If a cafeteria or group dining room is typically used, serve meals in classrooms instead. If meals are typically served family-style, plate each child's meal to serve it so that multiple children are not using the same serving utensils.
- Food preparation should not be done by the same staff who diaper children.
- Sinks used for food preparation should not be used for any other purposes.
- Caregivers should ensure children wash hands prior to and immediately after eating.
- Caregivers should wash their hands before preparing food and after helping children to eat.



- When diapering a child, wash your hands and wash the child's hands before you begin, and wear gloves. Follow safe diaper changing procedures. Procedures should be posted in all diaper changing areas. Steps include:
 - Prepare (includes putting on gloves)
 - Clean the child
 - Remove trash (soiled diaper and wipes)
 - Replace diaper
 - Wash child's hands
 - Clean up diapering station
 - Wash hands
- After diapering, wash your hands (even if you were wearing gloves) and disinfect the diapering area with a fragrance-free bleach that is EPA-registered as a sanitizing or disinfecting solution. If other products are used for sanitizing or disinfecting, they should also be fragrance-free and EPA-registered. If the surface is dirty, it should be cleaned with detergent or soap and water prior to disinfection.

CHILD HEALTH SCREENING OPTIONS

OPTION 1: RELIANCE ON SOCIAL DISTANCING

Ask parents/guardians to take their child's temperature either before coming to the facility or upon arrival at the facility.

Upon their arrival, stand at least 6 feet away from the parent/guardian and child. Ask the parent/guardian to confirm that the child does not have fever, shortness of breath, or cough.

Make a visual inspection of the child for signs of illness, which could include flushed cheeks, rapid breathing or difficulty breathing (without recent physical activity), fatigue, or extreme fussiness.

You do not need to wear personal protective equipment (PPE) if you can maintain a distance of 6 feet.

OPTION 2: RELIANCE ON BARRIER/PARTITION CONTROLS

Stand behind a physical barrier, such as a glass or plastic window or partition that can serve to protect the staff member's face and mucous membranes from respiratory droplets that may be produced if the child being screened sneezes, coughs, or talks.

Make a visual inspection of the child for signs of illness, which could include flushed cheeks, rapid breathing or difficulty breathing (without recent physical activity), fatigue, or extreme fussiness.

- Conduct temperature screening (follow steps below)
- Perform hand hygiene

Wash your hands with soap and water for 20 seconds. If soap and water are not available, use a hand sanitizer with at least 60% alcohol. Put on disposable gloves. Check the child's temperature, reaching around the partition or through the window. Make sure your face stays behind the barrier at all times during the screening.

If performing a temperature check on multiple individuals, ensure that you use a clean pair of gloves for each child and that the thermometer has been thoroughly cleaned in between each check.

If you use disposable or non-contact (temporal) thermometers and you did not have physical contact with the child, you do not need to change gloves before the next check. If you use non-contact thermometers, clean them with an alcohol wipe (or isopropyl alcohol on a cotton swab) between each client. You can reuse the same wipe as long as it remains wet.

OPTION 3: RELIANCE ON PERSONAL PROTECTIVE EQUIPMENT

If social distancing or barrier/partition controls cannot be implemented during screening, personal protective equipment (PPE) can be used when within 6 feet of a child. However, reliance on PPE alone is a less effective control and more difficult to implement, given PPE shortages and training requirements.

Upon arrival, wash your hands and put on a face mask, eye protection (goggles or disposable face shield that fully covers the front and sides of the face), and a single pair of disposable gloves. A gown could be considered if extensive contact with a child is anticipated.

Wash your hands with soap and water for 20 seconds. If soap and water are not available, use a hand sanitizer with at least 60% alcohol. Put on disposable gloves. Check the child's temperature, reaching around the partition or through the window. Make sure your face stays behind the barrier at all times during the screening.

Make a visual inspection of the child for signs of illness, which could include flushed cheeks, rapid breathing or difficulty breathing (without recent physical activity), fatigue, or extreme fussiness, and confirm that the child is not experiencing coughing or shortness of breath.

OPTION 3: CONTINUED

Take the child's temperature. If performing a temperature check on multiple individuals, ensure that you use a clean pair of gloves for each child and that the thermometer has been thoroughly cleaned in between each check. If you use disposable or non-contact (temporal) thermometers and did not have physical contact with an individual, you do not need to change gloves before the next check.

If you use non-contact thermometers, clean them with an alcohol wipe (or isopropyl alcohol on a cotton swab) between each client. You can reuse the same wipe as long as it remains wet.

After each screening, remove and discard PPE, and wash hands. Use an alcohol-based hand sanitizer that contains at least 60% alcohol or wash hands with soap and water for at least 20 seconds. If hands are visibly soiled, soap and water should be used before using alcohol-based hand sanitizer.

If your staff does not have experience in using PPE, check to see if your facility has guidance on PPE. The procedure to take on and off PPE should be tailored to the specific type of PPE that you have available at your facility. You can also review PPE use in this booklet.

MORE CHILD CARE CENTER RESOURCES

CDC:

<https://www.cdc.gov>

California Department of Social Services:

<https://cdss.ca.gov/inforesources/childcare-licensing>

This document provides guidance for businesses operating in the logistics/warehousing industry to support a safe, clean environment for employees.

WORKSITE SPECIFIC PLAN



- Establish a written, worksite-specific COVID-19 prevention plan at every facility, perform a comprehensive risk assessment of all work areas, and designate a person at each facility to implement the plan.
- Identify contact information for the local health department where the facility is located for communicating information about COVID-19 outbreaks among employees.
- Train and communicate with employees and employee representatives on the plan.
- Business may require patrons to wear masks.

CLEANING AND DISINFECTING PROTOCOLS



- Perform thorough cleaning on high traffic areas such as break rooms, lunch areas, and changing areas, and areas of ingress and egress including stairways and stairwells, handrails, elevator controls. Frequently disinfect commonly used surfaces, including tables, amenities, doorknobs, toilets, and handwashing facilities.
- Clean touchable surfaces between shifts or between users, whichever is more frequent, including but not limited to working surfaces, machinery, tools, equipment, shelves, storage rooms, handles, latches and locks, and controls on stationary and mobile equipment.

PHYSICAL DISTANCING GUIDELINES



- Implement measures to ensure physical distancing of at least six feet between workers, including transportation personnel. These can include use of physical partitions or visual cues such as floor markings, colored tape, or signs to indicate to where workers should stand.

Provides guidance for retailers to support a safe and clean work environment for workers.

WORKSITE SPECIFIC PLAN



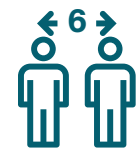
- Establish a written, worksite-specific COVID-19 prevention plan at every facility, perform a comprehensive risk assessment of all work areas, and designate a person at each facility to implement the plan.
- Identify contact information for the local health department where the facility is located for communicating information about COVID-19 outbreaks among employees.
- Train and communicate with employees and employee representatives on the plan.
- Business may require patrons to wear masks.

CLEANING AND DISINFECTING PROTOCOLS



- Perform thorough cleaning in high traffic areas, such as break rooms, lunch areas and areas of ingress and egress including stairways, stairwells, escalators, handrails, and elevator controls. Frequently disinfect commonly used surfaces, including shopping carts, baskets, conveyor belts, registers (including self-checkout), scanners, register telephones, hand-held devices, counters, door handles, shelving, ATM PIN pads, customer assistance call buttons, handwashing facilities, etc.
- Clean and sanitize shared equipment, including but not limited to, pallet jacks, ladders, supply carts, time clocks, payment portals, and styluses between each use.
- Clean touchable surfaces between shifts or between users, whichever is more frequent, including but not limited to working surfaces, tools, and stationary and mobile equipment controls.

PHYSICAL DISTANCING GUIDELINES



- Stagger employee breaks, in compliance with wage and hour regulations, to maintain physical distancing protocols.
- Close breakrooms, use barriers, or increase distance between tables/chairs to separate workers and discourage congregating during breaks. Where possible, create outdoor break areas with shade covers and seating that ensures physical distancing.

OUTDOOR MUSEUMS, OPEN AIR GALLERIES AND OTHER PUBLIC SPACES (PARKS , TRAILS, GOLF COURSES AND LAKES)

STAGE 2

CLEANING AND DISINFECTING PROTOCOLS



- Frequently disinfect commonly touched surfaces such as grab bars, railings, placards, light switches, door handles, etc.
- Clean outdoor surfaces made of plastic or metal. Do not spray disinfectant on playgrounds, wooden surfaces, or sidewalks, as recommended by the CDC.
- Perform thorough cleaning of any indoor work areas that employees must use or occupy in order to maintain operations of outdoor exhibits. This should include high traffic areas and shared workspaces (offices, meeting rooms, break rooms, etc.), and areas of ingress and egress (handrails, stairways, elevator controls, etc.)

PHYSICAL DISTANCING GUIDELINES



- Designate separate routes for entry and exit into outdoor exhibits, galleries, and indoor employee workspaces to help maintain physical distancing and lessen the instances of people closely passing each other, if possible. Establish directional hallways and passageways for foot traffic, if possible, to eliminate employees and guests from passing by one another.
- Display signage at entrances, waiting areas, and throughout outdoor gallery and museum spaces to remind people of physical distancing and face coverings usage at every opportunity. Dedicate staff to direct guests at high traffic and bottleneck areas to avoid congregating.

SELECT SERVICES: CAR WASHES, PET GROOMING AND LANDSCAPE GARDENING

STAGE 2

PHYSICAL DISTANCING



- Maintain minimum six-foot separation between staff and customers in all interactions at all times. When strict physical distancing is not feasible for a specific task, other prevention measures are required, such as use of barriers, minimize staff or customers in narrow or enclosed areas, stagger breaks, and work shift starts.
- Business may require patrons to wear masks.

HAND WASHING



- Ensure frequent and adequate hand washing with adequate maintenance of supplies. Use disposable gloves where safe and applicable to prevent transmission on tools or other items that are shared.

CLEANING & DISINFECTING



- Establish a housekeeping schedule that includes frequent cleaning and sanitizing with a particular emphasis on commonly touched surfaces.

MORE RESOURCES

California Professional Pet Groomers Association:
cppga.wildapricot.org/groomingprotocols-during-covid-19

WAXING SALONS | TATTOO FACILITIES | MASSAGE THERAPY

AVERAGE LEVEL OF CUSTOMER INTERACTION



Work requires direct physical contact with customer.

EMPLOYEE & CUSTOMER PROTECTION



- Use all disposable materials and supplies according to California Department of Public Health rules.
- All employees should wear face masks and gloves. One face mask can be used per day. Gloves should be disposed of and changed after each client.
- Employees should wear a disposable lab coat or protective gown.



- Services should be provided by appointment only; no walk-in customers.
- No one should be allowed to wait in the business; customers should wait in their vehicles until the service provider is ready.
- Add the following questions to your consent form: Have you been exposed to COVID-19? Have you traveled recently? Have you had a fever?



- All equipment, chairs, and tables used by an employee should be sanitized between clients.
- Provide hand sanitizer/sanitization wipes to customers upon arrival.
- Employees should have temperature taken upon beginning each workday.
- Post a sign outside the front door/window that states that any customers who have a fever or other COVID-19 symptoms must reschedule their appointment.
- No books/magazines will be provided to customers.



- Only one person should be admitted to each service room at any time.
- Only one client per service provider.
- Limit the number of people in the building (only those receiving service and service providers allowed in the building).



- Limit cash handling.
- Encourage customers to use credit/debit cards, tap to pay, Venmo, PayPal, or another form of contact-free payment.
- Sanitize point-of-sale equipment after each use, including pens.

MORE CLOSE CONTACT RESOURCES

California Massage Therapy Council:

<https://www.camtc.org>

CLOSE CONTACT SERVICES: BARBER SHOPS | HAIR SALONS

STAGE 3

This section includes barber shops and hair salons.

AVERAGE LEVEL OF CUSTOMER INTERACTION



Work requires direct physical contact with customer.

EMPLOYEE + CUSTOMER PROTECTION



- Use all disposable materials and supplies according to California Department of Public Health rules.
- All employees should wear face masks and gloves. One face mask can be used per day. Gloves should be disposed of and changed after each client.



- Services should be provided by appointment only; no walk-in customers.
- No one should be allowed to wait in the business; customers should wait in their vehicles until the service provider is ready.



- All equipment, chairs, and tables used by an employee should be sanitized between clients.
- Customers should be required to sanitize their hands upon entering the building and also before each treatment.
- No employees with COVID-19 symptoms should provide services to clients.
- Post a sign outside the front door/window that states that any customers who have a fever or other COVID-19 symptoms must reschedule their appointment.
- No books/magazines should be provided to customers.



- Only one client per service provider.
- Limit the number of people in the building (only those receiving service and service providers allowed in the building).
- Barber shops/salons with three or fewer employees may resume operations so long as social distancing and other measures described herein are maintained. Barber shops/salons with four or more employees must stagger the work schedules so that no more than 50% of the normal number of employees should be in the building at a time.
- Stations should be separated by at least six feet from other stations.



- Limit cash handling.
- Encourage customers to use credit/debit cards, tap to pay, Venmo, PayPal, or another form of contact-free payment.
- Sanitize point-of-sale equipment after each use, including pens.

MORE CLOSE CONTACT RESOURCES

California Board of Barbering and Cosmetology:

<https://www.dca.ca.gov>

CLOSE CONTACT SERVICES: NAIL SALONS

STAGE 3

AVERAGE LEVEL OF CUSTOMER INTERACTION



Work requires direct physical contact with customer.

EMPLOYEE & CUSTOMER PROTECTION



- Any tools designed for one-time use should be discarded after use.
- All employees should wear face masks and gloves. One face mask can be used per day. Gloves should be disposed of and changed after each client.
- No technician who has a fever or exhibits symptoms of COVID-19 should provide services to customers. The temperature of each technician should be checked before the technician meets with the first customer of the day.



- Services should be provided by appointment only; no walk-in customers.
- No one should be allowed to wait in the store; customers should wait in their vehicles until the service provider is ready.



- All equipment, chairs, and tables used by an employee should be sanitized between clients.
- Customers should be required to sanitize their hands upon entering the building and also before each treatment.
- No employees with COVID-19 symptoms should provide services to clients.
- Post a sign at the entrance and eye-level at each workstation stating that any customers who have a fever or exhibits symptoms of COVID-19 must reschedule their appointment.
- No books/magazines will be provided to customers.



- Only one client per service provider.
- Limit the number of people in the building (only those receiving service and service providers allowed in the building).
- Salons with three or fewer employees may resume operations so long as social distancing and other measures described herein are maintained. Salons with four or more employees must stagger the work schedules so that no more than 50% of the normal number of employees should be in the building at a time.
- Stations should be separated by at least six feet from other stations.



- Limit cash handling.
- Encourage customers to use credit/debit cards, tap to pay, Venmo, PayPal, or another form of contact-free payment.
- Sanitize point-of-sale equipment after each use, including pens.

CLOSE CONTACT SERVICES: TANNING SALONS

STAGE 3

AVERAGE LEVEL OF CUSTOMER INTERACTION

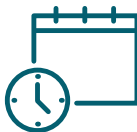


Very minimal customer interaction.

EMPLOYEE & CUSTOMER PROTECTION



- Avoid using other employees' phones, desks, keyboards, etc., and disinfect them before and after use.
- All employees should wear face masks and gloves. One face mask can be used per day. Gloves should be disposed of and changed after each client.
- Employees who display symptoms of COVID-19 should be sent home.



- Services should be provided by appointment only; no walk-in customers.
- No one should be allowed to wait in the business; customers should wait in their vehicles until the service provider is ready.



- Retrain employees in proper hygiene practices.
- Recommend alcohol and gel-based hand sanitizers in salons for employees.
- No employees with COVID-19 symptoms should provide services to clients.
- Provide workers and customers with tissues and trash receptacles.
- Post a sign at the entrance and eye-level at each workstation stating that any customers who have a fever or exhibits symptoms of COVID-19 must reschedule their appointment.
- No books/magazines will be provided to customers.
- Sanitize all tanning equipment and client contact surfaces with our EPA hospital-grade disinfectant.
- Use laundry machines according to the manufacturer's instructions. Use warmest appropriate water settings and dry items completely.



- Limit the number of people in the building (only those receiving service and service providers allowed in the building).
- Clearly mark six feet distances in lines at cash registers and in other high-traffic areas.



- Limit cash handling.
- Encourage customers to use credit/debit cards, tap to pay, Venmo, PayPal, or another form of contact-free payment.
- Sanitize point-of-sale equipment after each use, including pens.

MORE CLOSE CONTACT RESOURCES

California Department of Public Health:

<https://www.cdph.ca.gov>

ENTERTAINMENT VENUES: GAMING

STAGE 3

This section includes gaming facilities, such as racetracks, casinos, and bingo halls. These measures also apply to arcades.

AVERAGE LEVEL OF CUSTOMER INTERACTION



Work requires limited customer interaction.

EMPLOYEE & CUSTOMER PROTECTION



- Staff will be educated and trained on the appropriate use and disposal of personal protective equipment (PPE) and will have appropriate PPE available to them.
- Gloves and masks may be required, and usage could vary based on the level of interaction with customers, namely the touching of physical bingo cards and/or cash.
- If a customer or employee is sick, he or she should be sent home or to a health care facility.



- Limit the number of customers in the venue to better utilize best practices for social distancing based on square footage of building.
- Stagger machines (i.e., turning off every other machine in order to keep a 6-foot distance between patrons).
- Customers should be barred entrance once the safe social distancing capacity has been reached.
- Limit capacity for food service seating to employ 6-foot distance between patrons.
- Barriers may be needed in some areas. Specifically, barriers could be used at bingo card purchasing stations, wager windows or stations, and food service areas.



- Additional hand sanitizing stations should be available to patrons and employees.
- Any equipment used should be cleaned and disinfected after each use.
- Bathrooms should be sanitized more often.
- Sanitize any high-traffic areas, such as doorknobs, counters, etc.
- Follow restaurant guidelines for food-service areas.



- Limit cash handling.
- Encourage customers to use credit/debit cards, tap to pay, Venmo, PayPal, or another form of contact-free payment.
- Sanitize point-of-sale equipment after each use, including pens.

MORE ENTERTAINMENT RESOURCES

American Gaming Association:
<https://www.americangaming.org/>

American Amusement Machine Association:
<https://coin-op.org/>

ENTERTAINMENT VENUES: BOWLING ALLEYS & OTHERS

STAGE 3

This section includes bowling alleys, axe-throwing venues, escape rooms, and other activity-based entertainment. This does not include exercise/fitness or other sports.

AVERAGE LEVEL OF CUSTOMER INTERACTION



Work requires limited customer interaction.

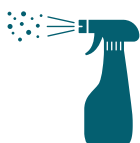
EMPLOYEE & CUSTOMER PROTECTION



- Staff should be educated and trained on the appropriate use and disposal of personal protective equipment (PPE) and should have appropriate PPE available to them.
- Gloves and masks may be required, and usage could vary based on the level of interaction with customers, namely handling point-of-sale interactions.
- If a customer or employee is sick, he or she should be sent home or to a health care facility.



- Limit the number of customers in the venue to better utilize best practices for social distancing based on square footage of the building.
- Stagger machines/lanes at appropriate facilities to encourage social distancing.
- Customers should be barred entrance once the safe social distancing capacity has been reached.
- Limit capacity for food-service seating to employ 6-foot distance between patrons.
- Barriers may be needed in some areas. Specifically, barriers could be used at food service areas or between lanes, if possible.
- Families or those who have quarantined together may play together. Groups cannot intermingle.



- Additional hand sanitizing stations should be available to patrons and employees.
- Any equipment, including bowling balls, used should be cleaned and disinfected after each use.
- Bathrooms should be sanitized after use.
- Sanitize any high-traffic areas, such as doorknobs, counters, etc.
- Follow restaurant guidelines for food-service areas.
- Bowling shoes must be carefully handled by employees and sanitized.



- Limit cash handling.
- Encourage customers to use credit/debit cards, tap to pay, Venmo, PayPal, or another form of contact-free payment.
- Sanitize point-of-sale equipment after each use, including pens.

MORE ENTERTAINMENT RESOURCES

The Bowling Proprietors' Association of America:
<https://bpaa.com/>

AVERAGE LEVEL OF CUSTOMER INTERACTION



Work requires limited customer interaction.

EMPLOYEE & CUSTOMER PROTECTION



- Staff should be educated and trained on the appropriate use and disposal of personal protective equipment (PPE) and should have appropriate PPE available to them.
- Gloves and masks may be required, and usage could vary based on the level of interaction with customers.
- If a customer or employee is sick, he or she should be sent home or to a health care facility.



- Limit the number of customers in the venue to better utilize best practices for social distancing by square footage of the building.
- Stagger payment areas and tables in food-service areas.
- Customers should be barred entrance once the safe social distancing capacity has been reached.
- Space between customers in food service and retail areas, as well as the ticket booth, should be set at the recommended 6 feet. It may also be necessary to set the same requirement in high-traffic exhibit areas.



- Additional hand sanitizing stations should be available to patrons and employees.
- Any equipment used should be cleaned and disinfected after each use.
- Bathrooms should be sanitized after use.
- Sanitize any high-traffic areas, such as doorknobs, counters, etc.
- Follow restaurant guidelines for food-service areas.
- Interactive exhibits (touch and feel exhibits, play areas) may be closed or modified to help maintain best practices for health and safety.



- Limit cash handling.
- Encourage customers to use credit/debit cards, tap to pay, Venmo, PayPal, or another form of contact-free payment.
- Sanitize point-of-sale equipment after each use, including pens.

MORE ENTERTAINMENT RESOURCES

American Alliance of Museums:
<https://www.aam-us.org/>

ENTERTAINMENT VENUES: MOVIE THEATERS

STAGE 3

This section includes movie theaters. Other theaters hosting concerts, performers, etc., can also follow these guidelines but may prefer to open when events can be filled at capacity.

AVERAGE LEVEL OF CUSTOMER INTERACTION



Work requires limited customer interaction.

EMPLOYEE & CUSTOMER PROTECTION



- Staff should be educated and trained on the appropriate use and disposal of personal protective equipment (PPE) and should have appropriate PPE available to them.
- Gloves and masks may be required, and usage could vary based on the level of interaction with customers.
- If a customer or employee is sick, he or she should be sent home or to a health care facility.



- Limit the number of customers in the venue to better utilize best practices for social distancing by square footage. This rule applies per movie screen, too. For example, a theater may be at 35% capacity, but if all attendees are in the same theater, social distancing isn't in order.
- Stagger payment areas and tables in food-service areas.
- Customers should be barred entrance once the safe social distancing capacity has been reached.
- Space between customers in food-service and retail areas, as well as the ticket booth, will be set at the recommended 6 feet.
- Direct customers to seats that separate them from other customers by 6 feet.



- Additional hand sanitizing stations should be available to patrons and employees.
- Any equipment used should be cleaned and disinfected after each use.
- Bathrooms should be sanitized after use.
- Sanitize any high-traffic areas, such as doorknobs, counters, etc.
- Follow restaurant guidelines for food-service areas.
- Sanitize theater seats following each movie. If this isn't possible, install disposable material on seats and discard after each movie.



- Limit cash handling.
- Encourage customers to use credit/debit cards, tap to pay, Venmo, PayPal, or another form of contact-free payment.
- Sanitize point-of-sale equipment after each use, including pens.

MORE ENTERTAINMENT RESOURCES

National Association of Theatre Owners:
<https://www.natoonline.org/>

EXERCISE FACILITIES

STAGE 3

This section includes gyms, fitness centers, and studios.

AVERAGE LEVEL OF CUSTOMER INTERACTION



Work requires limited customer interaction.

EMPLOYEE + CUSTOMER PROTECTION



- Employees and customers should be encouraged to wear PPE where applicable. Do not use PPE if it affects breathing while exercising.
- If a customer or employee is sick, he or she should be sent home or to a health care facility.



- Some locations may require barriers to separate customers and/or employees.
- Stagger/spread equipment to maintain a distance of 6 feet between machines.
- Customers should be barred entrance once the safe social distancing capacity has been reached.



- Additional hand sanitizing stations should be available to patrons and employees.
- Employees should perform regular cleaning and encourage customer assistance with cleaning equipment after each use.
- Bathrooms should be sanitized after use.
- Sanitize any high-traffic areas, such as doorknobs, counters, etc.
- Customers and employees should bring their own water or other drinks.
- No towels should be offered by the gym. Customers should bring their own towels.



- Limit cash handling.
- Encourage customers to use credit/debit cards, tap to pay, Venmo, PayPal, or another form of contact-free payment.
- Sanitize point-of-sale equipment after each use, including pens.

MORE EXERCISE RESOURCES

Association of Fitness Studios:
<https://member.afsfitness.com/>

FAITH BASED ORGANIZATIONS

Religious leaders should decide whether to modify specific religious rites, rituals, and services, consulting with local health officials as needed. Examples of specific preventive actions include:

- Nodding, bowing, or waving instead of shaking hands, hugging, or kissing.
- Avoiding holding hands during the service/prayers.
- Modifying the method for collecting regular financial contributions—using a stationary collection box, the mail, or electronic methods—instead of passing a collection tray.
- Considering modification of practices that are specific to particular faith traditions. For example, congregations that practice Communion could consider modifying or suspending this practice. Modifications could include:
 - ~ Ensuring that religious leaders always wash their hands or use a hand sanitizer that contains at least 60% alcohol prior to conducting the service and Communion.
 - ~ Placing the Communion elements in the recipients' hands, not on their tongues, and avoiding use of a common cup.

Consider canceling or modifying smaller gatherings (e.g., religious education classes), where persons are likely to be in close contact.

IMPLEMENT MULTIPLE SOCIAL DISTANCING STRATEGIES.



Select strategies based on feasibility given the unique space and needs of the organization. Not all strategies will be appropriate or feasible for all organizations. Administrators and leaders are encouraged to think creatively about all opportunities to increase the physical space between individuals and limit interactions in large group settings. Consider ways to accommodate the needs of individuals at higher risk for severe illness from COVID-19 in all strategies.

- Encourage high-risk populations not to attend and offer alternative ways (e.g., phone, online, or recorded) for them to participate.
- If high-risk populations attend any type of gathering in person, try to limit total attendance.
- Encourage people to stay home when sick or exhibiting any of the known COVID-19 symptoms; consider appropriate signage at all entrances that remind people not to enter if sick.
- Modifications to gatherings for social distancing might include:
 - ~ Holding the event in a large, well-ventilated area, maintaining about a 6-foot distance between individuals by having members sit in alternating rows or otherwise spread out
 - ~ Offering a phone or online (live or recorded) meeting or worship service option, especially for high-risk individuals
 - ~ Providing additional times for meetings or worship services, with limited attendance at each
- Mailed newsletters, prerecorded messages from trusted leaders on a designated call-in telephone number, and printed copies of home study or prayers may be options, especially to reach those without internet access.

- ~ For religious services, give people the option to watch your service or other services online (live or recorded).
- ~ In addition to technology, this may require special guidance from religious leaders that not attending religious services in person is acceptable. If leaders want to keep up with attendance, viewers can send a comment via the online/livestream platform or an email or text to let you know they were watching.
- ~ This might also involve special guidance about the use of electronic devices at times when that practice is usually not permitted (e.g., Jewish Sabbath).

INTENSIFY CLEANING AND DISINFECTION EFFORTS.



- Routinely (at least once per day, if possible) clean and disinfect surfaces and objects that are frequently touched. This may include cleaning objects/surfaces not ordinarily cleaned daily (e.g., doorknobs, light switches, classroom sink handles, countertops). Clean with the cleaners typically used. Use all cleaning products according to the directions on the label.
- For disinfection, most common EPA-registered household disinfectants should be effective. A list of products that are EPA-approved for use against the virus that causes COVID-19 is available on the CDC website. Follow the manufacturer's instructions for all cleaning and disinfection products (e.g., concentration, application method, and contact time, etc.).
- CDC offers several free hand washing resources that include health promotion materials, information on proper hand-washing technique, and tips for families to help children develop good hand-washing habits. Consider hanging signs in bathrooms as an extra reminder.
- Ensure adequate supplies (e.g., soap, paper towels, hand sanitizer, tissue) to support healthy hygiene practices.

HOTELS/LODGING CONSIDERATIONS

CHECK IN/OUT

- Consider reducing the number of check-in desks open.
- Social distancing of team members to guests.
- Consider Introducing one-way systems around the hotel particularly on check in/out to ensure guests and staff feel safe moving around the hotel.
- Implement/encourage contactless payments and use of email/e-billing to avoid cross contamination from guest to employee.
- Consider protective shields such as Perspex in place at the desk.
- Use digital check-in where available and express checkout for all.
- Consider entrance and exits on automated sensors or doors propped open for non-automated doors.
- Rope barrier to protect reception staff or signage on the floor.
- Consider not offering a facility to store guest luggage, where possible allow guest to leave in their room.
- TV in lobby area expressing measures, controls and offerings for guest information safety.

HOTEL ETIQUETTE

- Adhere to strict state guidelines and social distancing measures.
- Do not hold doors open while social distancing restrictions are in place.
- Should the lift need to be used, no more than 1 person unless a family member or sharing same room.
Frequent cleaning of lift.

CLEANING/DISINFECTION

- Introduce new cleaning practices to safeguard and protect guests and employees from possible infection.
- Communicate the cleaning regime in place for the public areas.
- Nominate a Hotel 'Safety Champion' to be the overseer of all things hygiene and the go to person for the team with any concerns
- Additional training for all team members around new guidelines and cleaning practices.
- Increase public area cleaning in peak periods for door handles, shared surfaces etc.
- Hygiene stations available in the lobby.
- During low occupancy (<40%) deep clean areas once a week.
- Ensure that champions provide updates and strategy to all team members.
- Complete audits to ensure regimes are being followed correctly.
- Check local government's hygiene and cleanliness standards.

HOUSEKEEPING

- Cleaning program to be developed looking at the key touchpoints in a room.
- From that decide on the chemicals to be used and the PPE required to protect the team from both the chemical and any viral contaminant.
- Check with the team they are comfortable with what is expected and how they are protected. Use their expertise to develop the right practices.
- Housekeeping team to wear own clothes to work and change into their clean uniform at work, they should then change out of their uniform to go home. Uniform to be washed daily, extra uniform provided if required.
During cleaning of bedrooms appropriate gloves and PPE to be worn.
- Stagger breaks and lunches for the Housekeeping team.

COVID-19 GENERAL CHECKLIST FOR RETAIL EMPLOYERS

This checklist is intended to help retail employers implement their plan to prevent the spread of COVID-19 in the workplace and is supplemental to the Guidance for Retail Employers. This checklist is a summary and contains shorthand for some parts of the guidance; familiarize yourself with the guidance before using this checklist.

CONTENTS OF WRITTEN WORKSITE-SPECIFIC PLAN

- ☐ The person(s) responsible for implementing the plan.
- ☐ A risk assessment and the measures that will be taken to prevent spread of the virus.
- ☐ Training and communication with employees and employee representatives on the plan.
- ☐ A process to check for compliance and to document and correct deficiencies.
- ☐ A process to investigate COVID-19 cases, alert the local health department, and identify and isolate close workplace contacts of infected employees until they are tested.

TOPICS FOR EMPLOYEE TRAINING

- ☐ Information on COVID-19, preventing spread, and who is especially vulnerable.
- ☐ Self-screening at home, including temperature and/or symptom checks using CDC guidelines.
- ☐ The importance of not coming to work if employees have a frequent cough, fever, difficulty breathing, chills, muscle pain, headache, sore throat, recent loss of taste or smell, or if they or someone they live with have been diagnosed with COVID-19.
- ☐ When to seek medical attention.
- ☐ The importance of hand washing.
- ☐ The importance of physical distancing, both at work and off work time.
- ☐ Proper use of cloth face covers.

INDIVIDUAL CONTROL MEASURES & SCREENING

- ☐ Symptom screenings and/or temperature checks.
- ☐ Encourage workers who are sick or exhibiting symptoms of COVID-19 to stay home.
- ☐ Encourage frequent hand washing and use of hand sanitizer.
- ☐ Provide disposable gloves to workers using cleaners and disinfectants when required. Consider gloves as a supplement to frequent hand washing for other cleaning tasks, such as handling commonly touched items or conducting symptom screening.
- ☐ Strongly recommend cloth face covers.
- ☐ Close or increase distance between tables/chairs in breakrooms or provide break areas in open space to ensure physical distancing.
- ☐ Communicate frequently to customers that they should use face masks/covers.

CLEANING AND DISINFECTING PROTOCOLS

- ☐ Perform thorough cleaning in high-traffic areas.
- ☐ Frequently disinfect commonly used surfaces.
- ☐ Clean and sanitize shared equipment after each use.
- ☐ Clean touchable surfaces between shifts or between users, whichever is more frequent.
- ☐ Equip customer entrances and exits, checkout stations, and customer changing rooms with proper sanitation products, including hand sanitizer and sanitizing wipes, and provide personal hand sanitizers to all frontline staff (e.g., cashiers).
- ☐ Ensure that sanitary facilities stay operational and stocked at all times.
- ☐ Make hand sanitizer and other sanitary supplies readily available to employees.
- ☐ Use products approved for use against COVID-19 on the Environmental Protection Agency (EPA)-approved list and follow product instructions and Cal/OSHA requirements.
- ☐ Modify store hours to provide adequate time for cleaning and stocking with physical distancing.
- ☐ Provide time for workers to implement cleaning practices before and after shifts; hire third-party cleaning companies.
- ☐ Install hands-free devices if possible.
- ☐ Encourage the use of debit or credit cards by customers.
- ☐ Encourage customers with reusable bags to clean them frequently and require them to bag their own purchases.
- ☐ Consider upgrades to improve air filtration and ventilation.

PHYSICAL DISTANCING GUIDELINES

- ☐ Implement measures to physically separate people by at least six feet using measures such as physical partitions or visual cues (e.g., floor markings, colored tape, or signs to indicate to where workers should stand).
- ☐ Minimize exposure between cashiers and customers. Where physical distancing cannot be maintained, use barriers such as Plexiglas. Where barriers are not feasible, strongly recommend that employees and customers wear face covers.
- ☐ Use signage to remind customers of physical distancing at every opportunity.
- ☐ Adjust in-person meetings, if they are necessary, to ensure physical distancing.
- ☐ Place additional limitations on the number of workers in enclosed areas to ensure at least six feet of separation.
- ☐ Stagger employee breaks, in compliance with wage and hour regulations, to maintain physical distancing protocols.
- ☐ Close in-store bars, bulk-bin options, and public seating areas and discontinue product sampling.
- ☐ Dedicate shopping hours for seniors and other vulnerable populations.
- ☐ Increase pickup and delivery service options such as online ordering for curbside pickup.
- ☐ Provide separate, designated entrances and exits.
- ☐ Limit the number of in-store customers based on the size of the facility.
- ☐ Be prepared to queue customers outside while still maintaining physical distance.
- ☐ Encourage and train employees to practice physical distancing during pickup and delivery.
- ☐ Make some locations pickup- or delivery-only to minimize physical interaction, if possible.
- ☐ Install transfer-aiding materials, such as shelving and bulletin boards, to reduce person-to-person hand-offs where possible. Wherever possible, use contactless signatures for deliveries.
- ☐ Expand direct store delivery window hours to spread out deliveries and prevent overcrowding.
- ☐ Ask non-employee truck drivers, delivery agents, or vendors who are required to enter retail locations to have their employees follow the guidance of local, state, and federal governments regarding wearing masks.

**For other business type checklist,
please visit <https://covid19.ca.gov>**

SOURCES

Centers for Disease Control and Prevention (CDC): <https://www.cdc.gov/>

Food and Drug Administration (FDA): <https://www.fda.gov/>

WebMD: <https://www.webmd.com/>

California Department of Public Health: <https://www.cdph.ca.gov/>

Cal/OSHA: <https://www.dir.ca.gov/dosh/>

We would to thank the Chamber of Commerce of West Alabama at www.westalabamaworks.com

CLOSING

We know this situation is difficult. Many of us are going through circumstances we never thought we would experience, from teaching our children at home to filing for unemployment. We will rise above this. We will emerge from this better than we were. We are #StrongerTogether.

Remember your Tulare County Health & Human Services Agency is here to help you and your business during this time. Do not hesitate to call or email us with your questions, concerns, or ideas. We will continue to update our resources to serve you as this fluid situation develops.

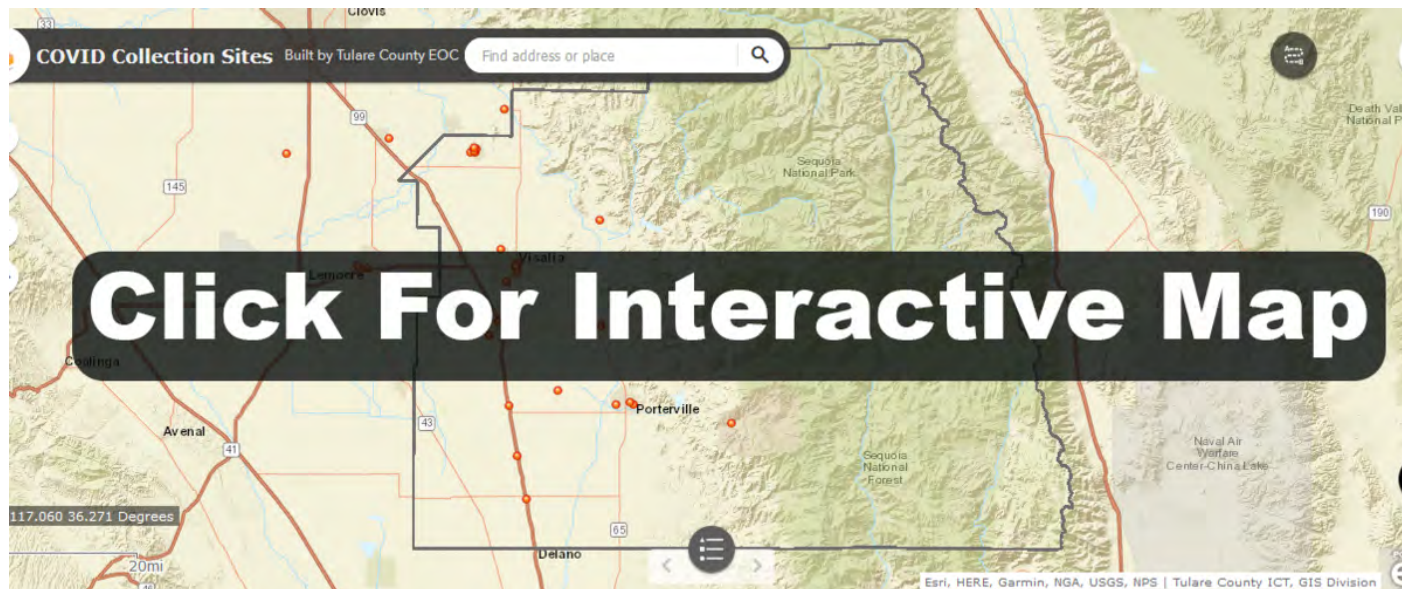
Thank you for your support. Thank you for your drive. Thank you for your grit. Thank you for making Tulare County what it is — a place where amazing things happen.

#STRONGERTOGETHER



Tulare County
Health & Human Services Agency
1-800-834-7121 ♦ www.tchhsa.org

COVID-19 Testing in Tulare County



Below is a list of various COVID-19 test collection sites at area hospitals, health care clinics, and OptumServe sites throughout Tulare County.

Show **50** entries

Search:

Name	Days Hours	Phone	Address
Adventist Health - Hanford Location (https://www.adventisthealth.org)	Thursdays 9:00 AM - 11:00 AM	559-537-0305	1524 W. Lacey Blvd. Hanford, CA, 93230 (https://maps.google.com/?q=1524 W. Lacey Blvd., Hanford, CA, 93230)
Altura Centers for Health (https://www.altura.org/)	Monday - Friday 8:00 AM - 5:00 PM	559-686-9097	1101 N. Cherry St. Tulare, CA, 93274 (https://maps.google.com/?q=1101 N. Cherry St., Tulare, CA, 93274)
Altura Centers for Health on Bardsley (https://www.altura.org/)	Monday - Friday 8:00 AM - 5:00 PM	559-686-9097	3035 E Bardsley Ave Tulare, CA, 93274 (https://maps.google.com/?q=3035 E Bardsley Ave, Tulare, CA, 93274)
Altura Centers for Health on Cherry (https://www.altura.org/)	Monday - Friday 8:00 AM - 5:00 PM	559-686-9097	1203 N Cherry St Tulare, CA, 93274 (https://maps.google.com/?q=1203 N Cherry St, Tulare, CA, 93274)
Name	Days Hours	Phone	Address

Name	Days Hours	Phone	Address
Altura Centers for Health on Leland (https://www.altura.org/)	Monday - Friday 8:00 AM - 5:00 PM	559-686-9097	1186 East Leland Ave Tulare, CA, 93274 (https://maps.google.com/?q=1186 East Leland Ave, Tulare, CA, 93274)
Altura Centers for Health on Tulare (https://www.altura.org/)	Monday -Thursday 8:00 AM - 7:00 PM Friday 9:00 AM - 5:00 PM Saturday 8:00 AM - 5:00PM	559-686-9097	1500 W. Tulare Drive Tulare, CA, 93274 (https://maps.google.com/?q=1500 W. Tulare Drive, Tulare, CA, 93274)
Altura Centers for Health, Woodville (https://www.altura.org/)	Monday - Friday 8:00 AM - 5:00 PM	559-686-9097	16686 Road 168 Woodville, CA, 93257 (https://maps.google.com/?q=16686 Road 168, Woodville, CA, 93257)
Aria Community Health Center in Dinuba ()	Monday - Friday 8:00 AM - 5:00 PM	559-591-1820	271 N. L Street Dinuba, CA, 93618 (https://maps.google.com/?q=271 N. L Street, Dinuba, CA, 93618)
Aria Community Health Center in Lindsay ()	Monday - Friday 10:00 AM - 4:30 PM	559-562-7799	973 Road 214 Lindsay, CA, 93247 (https://maps.google.com/?q=973 Road 214, Lindsay, CA, 93247)
Dinuba Memorial Building - OptumServe (https://lhi.care/covidtesting)	Monday - Friday 7:00 AM - 7:00 PM	888-634-1123	249 S. Alta Ave Dinuba, CA, 93618 (https://maps.google.com/?q=249 S. Alta Ave, Dinuba, CA, 93618)
Family HealthCare Network- Fresno Location (https://www.fhcn.org/)	Monday - Friday 8:00 AM - 8:00 PM Weekends 10:00 AM - 6:00 PM	866-342-6012	290 N. Wayte Ln. Fresno, CA, 93701 (https://maps.google.com/?q=290 N. Wayte Ln., Fresno, CA, 93701)
Family HealthCare Network-Downtown Porterville Location (https://www.fhcn.org/)	Monday - Friday 8:00 AM - 7:00 PM Saturday 8:00 AM - 5:00 PM	877-960-3426	65 N. Hockett St. Porterville, CA, 93257 (https://maps.google.com/?q=65 N. Hockett St., Porterville, CA, 93257)
Family HealthCare Network-Hanford Location (https://www.fhcn.org/)	Monday - Friday 8:00 AM - 7:00 PM Saturday 8:00 AM - 5:00 PM	877-960-3426	250 West 5th St Hanford, CA, 93230 (https://maps.google.com/?q=250 West 5th St, Hanford, CA, 93230)
Family HealthCare Network-Visalia Bridge Location (https://www.fhcn.org/)	Monday - Friday 8:00 AM - 10:00 PM Weekends 8:00 AM - 8:00 PM	877-960-3426	501 N. Bridge St Visalia, CA, 93291 (https://maps.google.com/?q=501 N. Bridge St, Visalia, CA, 93291)
Name	Days Hours	Phone	Address

Name	Days Hours	Phone	Address
Kaweah Delta Dinuba Health Clinic (https://www.fhcn.org/)	Monday - Friday 8:00 AM - 5:00 PM	559-595-7650	355 Monte Vista Dr. Dinuba, CA, 93618 (https://maps.google.com/?q=355 Monte Vista Dr., Dinuba, CA, 93618)
Kaweah Delta Lindsay Health Clinic (https://www.kaweahdelta.org/Locations/Kaweah-Delta-Lindsay-Health-Clinic.aspx)	Monday - Friday 8:00 AM - 5:00 PM	559-562-1546	839 Road 214 Lindsay, CA, 93247 (https://maps.google.com/?q=839 Road 214, Lindsay, CA, 93247)
Kaweah Delta Outpatient COVID-19 Collection Center (https://www.kaweahdelta.org/)	Monday - Saturday 9:00 AM - 6:00 PM Sunday 10:00 AM - 5:00 PM	559-624-4110	402 W. Acequia Ave Visalia, CA, 93291 (https://maps.google.com/?q=402 W. Acequia Ave, Visalia, CA, 93291)
Kaweah Delta Urgent Care on Court in Visalia (https://www.kaweahdelta.org/)	Open Daily 8:00 AM - 10:00 PM	559-624-6090	1633 S. Court St Visalia, CA, 93277 (https://maps.google.com/?q=1633 S. Court St, Visalia, CA, 93277)
Kaweah Delta Urgent Care on Demaree in Visalia (https://www.kaweahdelta.org/)	Open Daily 8:00 AM - 5:00 PM	559-624-6800	3600 W. Flagstaff Ave Visalia, CA, 93291 (https://maps.google.com/?q=3600 W. Flagstaff Ave, Visalia, CA, 93291)
Mountain View Medical Clinic (https://mountainviewmedicalclinic.com/)	Monday - Friday 9:00 AM - 6:00 PM	559-591-6200	468 N. Vermont Dinuba, CA, 93618 (https://maps.google.com/?q=468 N. Vermont, Dinuba, CA, 93618)
Omni Family Health (http://omnifamilyhealth.org/locations/visalia/)	Monday and Wednesday 8:00 AM - 5:00 PM	800-300-6664	311 W Noble Visalia, CA, 93277 (https://maps.google.com/?q=311 W Noble, Visalia, CA, 93277)
Porterville Memorial Building - OptumServe (https://lhi.care/covidtesting)	Monday - Friday 7:00 AM - 7:00 PM	888-634-1123	1900 W. Olive Ave Porterville, CA, 93257 (https://maps.google.com/?q=1900 W. Olive Ave, Porterville, CA, 93257)
Sierra View Medical Center (https://www.sierra-view.com/)	Monday - Friday 9:00 AM - 4:00 PM	559-791-3730	263 Pearson Dr Porterville, CA, 93257 (https://maps.google.com/?q=263 Pearson Dr, Porterville, CA, 93257)
Tipton and Pixley Medical Center ()	Monday - Friday 8:00 AM - 6:00 PM	559-757-2000	205 E. Davis Pixley, CA, 93256 (https://maps.google.com/?q=205 E. Davis, Pixley, CA, 93256)
Name	Days Hours	Phone	Address

Name	Days Hours	Phone	Address
Tipton and Pixley Medical Center ()	Monday - Friday 8:00 AM - 6:00 PM	559-752-4147	575 N. Thompson Rd. Tipton, CA, 93272 (https://maps.google.com/?q=575 N. Thompson Rd., Tipton, CA, 93272)
Tulare Community - Based Outpatient Center (https://www.fresno.va.gov/locations/tulare.asp)	Monday - Friday 8:00 AM - 4:30 PM	559-684-8703	1050 N. Cherry Street Tulare, CA, 93274 (https://maps.google.com/?q=1050 N. Cherry Street, Tulare, CA, 93274)
Tule River Indian Health Center (https://www.trihci.org/)	Monday - Friday 7:00 AM - 5:30 PM	559-784-2316	380 N Reservation Rd Porterville, CA, 93257 (https://maps.google.com/?q=380 N Reservation Rd, Porterville, CA, 93257)
United Health Centers of the San Joaquin Valley ()	Monday 11:00 AM - 8:00 PM Tuesday - Friday 8:30 AM - 5:30 PM	800-492-4227	476 E Washington St Earlimart, CA, 93219 (https://maps.google.com/?q=476 E Washington St, Earlimart, CA, 93219)
Valley Health Team ()	Monday - Friday 8:00 AM - 6:00 PM Saturday 9:00 AM - 3:00 PM	559-595-1000	888 N Alta Ave Dinuba, CA, 93618 (https://maps.google.com/?q=888 N Alta Ave, Dinuba, CA, 93618)

Name	Days Hours	Phone	Address
Showing 1 to 29 of 29 entries		Previous	1 Next

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Contact Info

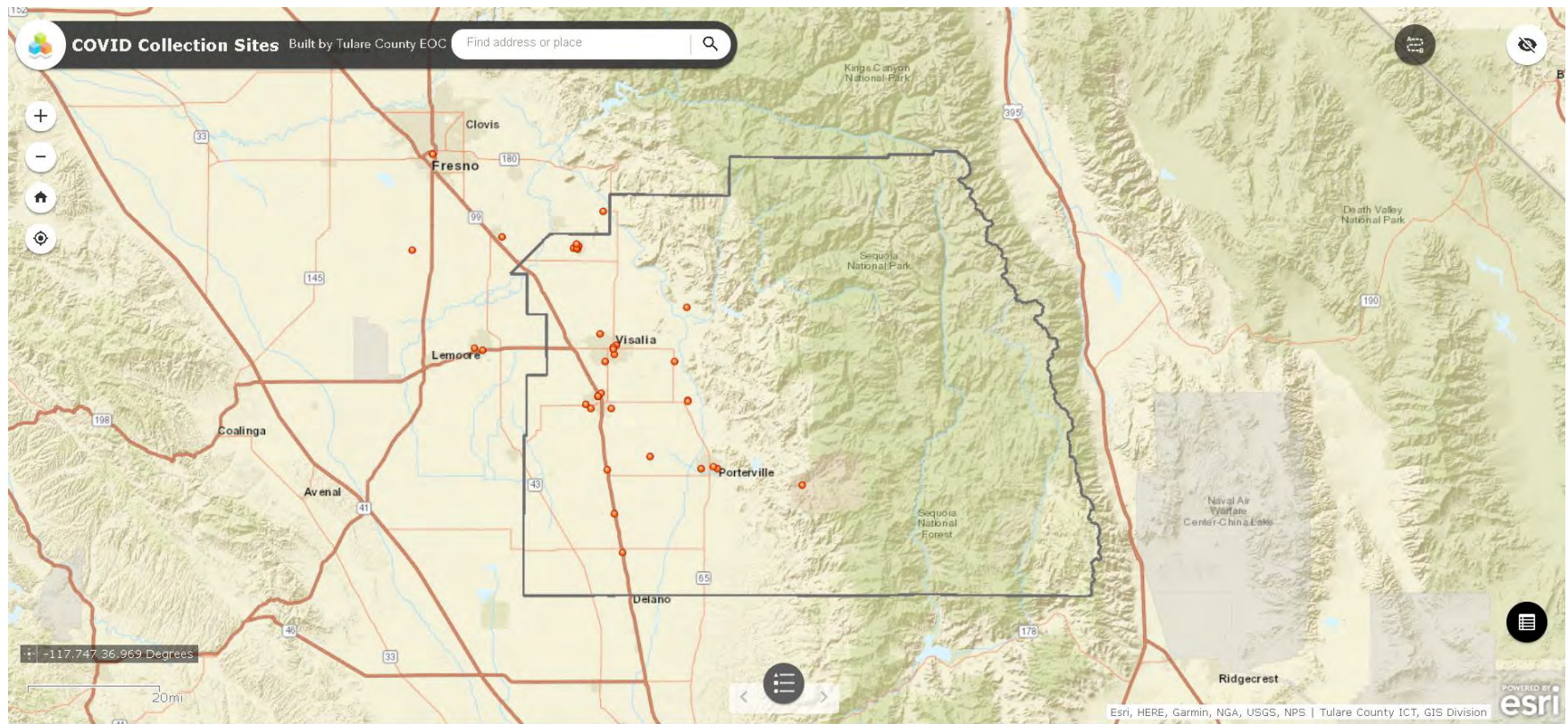
📞 Contact Us (<https://tularecounty.ca.gov/county/index.cfm/contact/>)

Mission and Vision

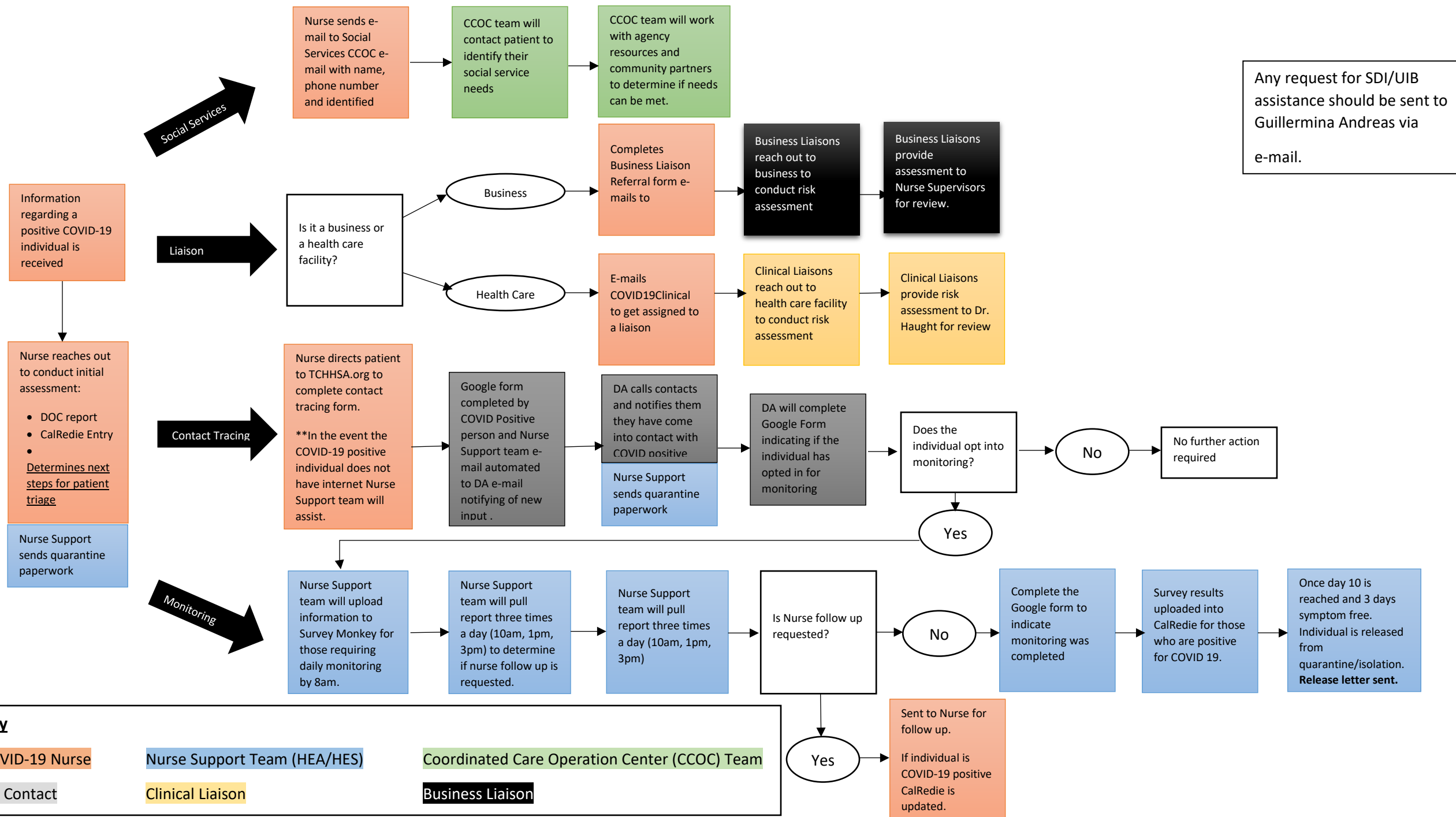
To provide the residents of Tulare County with quality services to improve and sustain the region's safety, economic well-being, and quality of life. Tulare County government strives to earn the trust, respect, and support of its residents through collaboration, fair, and effective service.



Tulare County Specimen Collection Site Map



Initial Contact Triage





HHSA

Public Health

Facility Name	Last	First	Title	Number	Alt Number	Email	14 + Days of PPE
DELTA NURSING & REHABILITATION CENTER	MOORE	ANDREA	DON	559-972-1504	559-732-8614	amoore@deltanc.com	Yes
DINUBA HEALTHCARE	VAZQUE	JAZMIN	DON	559-591-3300		jazminv@madison.care	Yes
GATEWAY POST ACUTE (WAS: PROVIDENCE VALLEY CARE CENTER)	BLOOD	BRYCE	ADMINISTRATOR	559-784-8371	559-997-9563	bryceblood@sequioa.com	Yes
KAWEAH DELTA MEDICAL CENTER D/P SNF	HARROLD	LISA	DIRECTOR	559-624-2036	559-624-6010	lharrold@kdhcd.org	Yes
KAWEAH DELTA SKILLED NURSING CENTER	HARROLD	LISA	DIRECTOR	559-624-2036	559-624-6010	lharrold@kdhcd.org	Yes
KAWEAH MANOR CONVALESCENT HOSPITAL	BECK	LESLIE	ADMINISTRATOR	559-287-1126	559-732-2244		Yes
LINDSAY GARDENS (was: PROVIDENCE LINDSAY GARDENS)	ALLEN	FOREST	ADMINISTRATOR	702-208-8444		forest.allen@lindsaygardenshc.com	Yes
LINWOOD MEADOWS CARE CENTER	NG	SCOTT	ADMINISTRATOR	858-579-6497	559-627-1241	sng@plum.com	Yes
MERRITT MANOR CONVALESCENT HOSPITAL	KNOWLS	DEBBIE	ADMINISTRATOR	559-686-1601	X - 760	administrator@liveoakpa.com	Yes
PORTERVILLE CONVALESCENT HOSPITAL	HOLGUIN	SIMON	ADMINISTRATOR	559-687-1340	(Twin Oaks)	administrator@twinoaks.com	YES
REDWOOD SPRINGS HEALTHCARE CENTER	HUBBARD	ANITA	ADMINISTRATOR	559-732-1020		ahubbard@plum.com	Yes
SEQUOIA TRANSITIONAL CARE (WAS: PROVIDENCE SUN VILLA)	BLOOD	BRYCE	ADMINISTRATOR	559-784-6644	559-997-9563	bryceblood@sequioa.com	Yes
SIERRA VALLEY REHABILITATION CENTER	ALI	KATHARINE	ADMINISTRATOR	559-784-7375		svrc.administrator@sierravalleyrehabcenter.com	Yes
SIERRA VIEW MEDICAL CENTER	SANTOS	ARCADIO	DON	559-784-6157	559-359-8840	asantos@sierra-view.com	Yes
TULARE NURSING & REHABILITATION CENTER	DEWALT	CRYSTAL	ADMINISTRATOR	559-686-8581		cdewalt@tularenrc.com	Yes
TWIN OAKS REHABILITATION & NURSING CENTER	HOLGUIN	SIMON	ADMINISTRATOR	559-687-1340	(Port Conval)	administrator@twinoaks.com	Yes
WESTGATE GARDENS CARE CENTER	CARTER	BENJAMIN	ADMINISTRATOR	858-342-4998	559-733-0902	bcarter@plum.com	Yes



County of Tulare

May 22, 2020

Governor Gavin Newsom
State of California
1303 10th Street, Suite 1173
Sacramento, CA 95814

BOARD OF SUPERVISORS

Kuyler Crocker
District One

Pete Vander Poel
District Two

Amy Shuklian
District Three

Eddie Valero
District Four

Dennis Townsend
District Five



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Tammie Weyker-Adkins, Chief of Staff

Samantha Ferrero
Alicia Balderas



CLERK OF THE BOARD

Melinda Benton
Chief Clerk



Administration Bldg.
2800 West Burrel
Visalia, CA 93291

TEL: (559) 636-5000
FAX: (559) 733-6898

Dr. Sonia Y. Angell
State Public Health Officer and
Director California Department of Public Health
P.O. Box 997377, MS 0500
Sacramento, CA 95899-7377

Re: Tulare County: Support of State 2 Variance

Dear Governor Newsom and Dr. Angell:

The Tulare County Board of Supervisors are committed to ensuring the safety of our public health and balancing the needs of our business community, which continues to suffer under the current conditions, by advocating for a swift, reasonable, and achievable path to reopen through Phase 3 of the Governor's Roadmap.

We have met to discuss Tulare County pursuing a variance to Stage 2 of California's Roadmap to Modify the Stay-at-Home Order, which would allow Tulare County to advance through State 2 of the Roadmap at a more advanced pace, though it has been stated in the media that Tulare County would not be considered. Our Board strongly supports proceeding with all aspects of Stage 2, and even through Phase 3 as soon as businesses have finalized developing and implementing their site-specific protection plans in accordance with State and County guidelines for their respective sectors. Our Board further intends to rescind the Tulare County Public Health Officer's local order, to align more closely with the State Order, including halting all local civil enforcement related to the stay at home orders.

Timothy Lutz, Director of County Health & Human Services Agency presented at this week's Board meeting about Tulare County's readiness to move fully into Stage 2 by meeting the metrics we are able to control and heard public comment on the presentation. Our Board intends to direct staff to shift all resources to assisting with problem areas in the community such as the elderly, vulnerable, businesses that have outbreaks, and hospitals, which our public health staff already focus heavily on. We have reviewed letters of support written by our three area hospital systems, Kaweah Delta Medical Center, Sierra View Medical Center, and Adventist Health Tulare.

All evidence supports that Tulare County has taken the precautions necessary to be ready to undertake businesses and activities in the Stage 2 plan. We are fully prepared to address any increase in infection or hospitalization rates.

Our board determines that Tulare County meets the minimum readiness standards and supports the Public Health Officer's Variance Attestation.

Sincerely,

A handwritten signature in black ink, appearing to read "Pete Vander Poel".

Pete Vander Poel, Chairman
Tulare County Supervisor, District 2

cc: Tulare County Board of Supervisors

Jason T. Britt, Tulare County Administrative Officer

Deanne Peterson, Tulare County Counsel

Dr. Karen Haught, Tulare County Public Health Officer

Tim Lutz, Director, Tulare County Health & Human Services Agency



Adventist Health Hanford
115 Mall Drive
Hanford, CA 93230
559-582-9000

May 18, 2020

Tulare County Department of Public Health
Karen Elliott, Public Health Director
5957 S. Mooney Blvd.
Visalia, CA 93277

Dear community partner:

In response to your request, Adventist Health Tulare:

- Is prepared to accommodate a surge of 35% due to COVID-19 cases in addition to providing care to non COVID-19 patients; and
- Has adequate PPE to protect our associates and clinicians.

We understand Tulare County will use this letter to apply for a variance to move through the stages to lift certain California stay-at-home orders.

Sincerely,

Dr. Frank Gavini, medical officer

A handwritten signature in black ink that reads "Frank Gavini".

Adventist Health in the Central Valley



SIERRA VIEW MEDICAL CENTER

May 18, 2020

Annette Burgos
Public Health Emergency Manager
Tulare County HHSA

Dear Ms. Burgos,

As one of three local hospitals in Tulare County, Sierra View Local Healthcare District & Medical Center understands the County Public Health Officer, Karen Haught, is affirming the County has met the California Department of Public Health's readiness criteria designed to mitigate the spread of Covid-19. All three of the acute care hospitals work closely together and are involved in the local healthcare coalition initiated in joint agreement of all partners.

Dr. Haught and/or her leaders meet regularly with the hospitals and healthcare systems to coordinate surge planning and obtain our feedback and participation in planning. We strongly agree with Dr. Haught's assessment that Tulare County is actively monitoring infection rates, recovery rates, and rates of death with epidemiological monitoring to implement containment measures as needed. She has offered public health sponsored testing, and the monitoring of hospital capacity and plans for surge seeking to protect vulnerable populations such as congregate living facilities.

As the Chief Nurse Executive, I support the need to have ongoing protection measures for vulnerable populations, continue social and physical distancing, and the monitoring for signs of decreasing new cases and deaths. There must be clear and present signs for opening the community that meet the criteria identified by the Governor, as well as meeting CDC guidelines for protecting the community from future spread of the virus.

Sierra View Medical Center supports the attestation by Dr. Haught that criteria established by the Governor must be used to implement responsible business reopening with guidelines. The pace of opening through Stage 2 of the Governor's Pandemic Roadmap should be guided by and should be met by science attestation, established criteria, and with the utmost attention to public safety.

Sincerely,

Jeffery Hudson-Covolo, DNP, RN, NEA-BC
Vice President for Patient Care Services & Chief Nurse Executive

Cc: Donna Hefner



May 18, 2020

Tulare County Board of Supervisors
2800 W. Burrel Avenue
Visalia, CA 93291

As one of three local hospitals in Tulare County, Kaweah Delta Medical Center understands that the County Health Officer Dr. Karen Haught is affirming that Tulare County has met the California Department of Public Health's readiness criteria to mitigate the spread of COVID-19. All three Tulare County Hospitals and the respective healthcare clinics are working closely together to address the demands on the healthcare systems. Kaweah Delta Medical Center has collaborated with Tulare County Emergency Management and Tulare County Public Health to mitigate operational as well as patient care issues, sharing staffing resources, providing education and as needed personal protective equipment to our many local nursing homes. Kaweah Delta Health Care District has worked with Tulare Public Health Department developing a high volume COVID-19 collection sight to meet the demands of the communities.

Dr. Haught and her public health team members meet with the hospital teams to coordinate surge planning and obtain our feedback. We strongly agree with Dr. Haught's assessment that Tulare County is actively monitoring infection through epidemiology, implementing containment measures when needed, supporting the development of a high volume collection site along with streamlining the Person Under Investigation number assignment process. We continue to work closely with Tulare Public Health Department staff through monitoring our hospital's capacity and plans for surge, and protecting our vulnerable populations.

As CEO of Kaweah Delta Medical Center, I support the need to protect vulnerable populations, continue social distancing and look for signs we may need to implement stricter measures to protect our patients, staff and community. A healthy business community and a healthy community are one in the same. Tulare County's plan for reopening is good for health, good for business and good for our community. Kaweah Delta Medical Center supports the attestation by Dr. Haught that Tulare County is meeting the readiness criteria outlined by the California Department of Public Health to progress through Stage 2 of the Governor's Pandemic Roadmap.

Sincerely,

A handwritten signature in dark ink, appearing to read 'Gary Herbst', is written in a cursive style.

Gary Herbst
Chief Executive Officer



COVID-19 CONTAINMENT PLAN

Tulare County Health & Human Services Agency

**PANDEMIC RESPONSE FOR TULARE COUNTY
DRAFT 5/27/2020**



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About Tulare County and COVID-19 Response

According to the 2020 California Department of Finance estimate, Tulare County's population is just under 480,000. The county has 8 incorporated cities ranging in size from Woodlake with a population of 7,691 to Visalia with a population of 137,696. However, nearly a third of Tulare County residents reside in unincorporated communities.

The majority of Tulare County residents are of Hispanic ethnicity (62.7%). The racial composition for non-Hispanics is 30.6% white, 3.2% Asian, 1.3% African American, 1.4% multi-race, and 0.8% Native American. The US Census reports Tulare County is home to over 16,000 veterans and the 2019 Point in Time Count identified 804 homeless individuals, half of whom are in Visalia. Approximately 22.8% of Tulare County's population is foreign-born and 50.3% of the population speaks a language other than English at home. Per 2015 Small Area Income and Poverty Estimates, 27.2% of the population lives in poverty.

The County is also home to the Tule River Tribe, a proud sovereign nation that strives to improve the livelihood of their members. Established in 1873, the Tule River Indian Reservation is estimated to cover almost 85 square miles of rugged foothill lands of the Sierra Nevada Mountains. The reservation is located in a remote rural area approximately 20 miles from Porterville, the nearest city.

Tulare County Health & Human Services Agency (HHS) has been preparing for COVID-19 since January 2020. Tulare County has a large agricultural community and work base and is home to the World Ag Expo (WAE), which is held in Tulare, this year February 11-13. TCHS worked collaboratively with the WAE and health care partners to ensure that travel restrictions were adhered to and provided messaging, education, and hand sanitizing stations for attendees. The Tulare County Public Health Laboratory attempted to bring on the CDC test for COVID-19 in time for the WAE and was prevented only due to the validation issues with the test. Tulare County's first confirmed case of COVID-19 was identified on March 11, 2020. We have worked collaboratively with numerous health care and community partners to ensure a comprehensive response to this pandemic. This containment plan lays out the foundation through which we will continue to provide the best possible outcomes for our community.

Testing

Testing for COVID-19 is available throughout Tulare County.

Hospitals and Acute Care Facilities

The following hospitals in Tulare County are doing testing for inpatients, emergency room patients, and in some cases outpatient clinic settings.

1. Kaweah Delta District Hospital
2. Adventist Medical Center- Tulare
3. Sierra View Medical Center

Community Clinics

The Following community clinics are conducting testing:

1. Altura Centers for Health – multiple locations
2. Advanced Medical Care Center - Visalia
3. Aria Community Health Center - Dinuba and Lindsay
4. Visalia Health Care Center
5. Family HealthCare Network-Downtown Porterville Location
6. Family HealthCare Network-Visalia Bridge Location
7. Kaweah Delta Outpatient COVID-19 Collection Center
8. Mountain view Medical Clinic - Dinuba
9. Omni Family Health - Visalia
10. Tipton and Pixley Medical Centers
11. Tule River Health Center INC
12. United Health Centers of the San Joaquin Valley - Earlimart
13. Valley Health Team - Dinuba Community Health Center

Optum Serve Locations

Working in partnership with the State Office of Emergency Services and the State Department of Public Health, Tulare County has placed two OptumServe testing sites – one at Dinuba Veterans Memorial Building and a second in Porterville Veterans Memorial Building. Together these sites have capacity to collect 264 specimens per day.

Test Plan Capacity

The entire public health system has been engaged in providing COVID-19 testing to our communities. Our hospitals, FQHC and rural health clinics, and Tule River Indian Health Center all provide specimen collection. Kaweah Delta Medical Center, Family HealthCare Network, as well as two State sponsored OptumServe sites provide high throughput collections for the public. Tulare County Public Health Laboratory (TCPHL) has capacity to test 120 specimens per day with a 24 hour turn around time, ensuring rapid results for our most vulnerable and high risk residents.

Current Testing Capacity

Optum Serve Sites - 264 per day
Dinuba & Porterville

Community Health Clinics - 367 per day
Locations throughout the county – from Dinuba (north) to Earlimart (south)

Hospitals – 235
All 3 hospitals (Visalia, Porterville, Tulare)

Tulare County Public Health Laboratory - 120

The total daily capacity then is 986, which equates to 2.05 tests per 1,000 residents per day. The average percentage of positive tests has fluctuated but is stable at about 8%. In addition to the current capacity of 120 tests per day, TCPHL has contracts in place with Quest, Bioreference, and LabCorp for surge capacity. TCPHL continues to bring on additional instrumentation to increase testing capacity and is utilizing 9th Civil Support Team assets to augment testing capacity.

Community Surveillance Testing Program

Tulare County Public Health is collaborating with the California Department of Public Health to implement sentinel surveillance for COVID-19 at two or more clinic sites. TCPH will follow the CDPH surveillance protocol and work with the providers to collect demographic and other information as well as specimens for testing. Specimens from non-hospitalized individuals will be tested for COVID-19 at Tulare County Public Health Laboratory. The state lab will then test for additional respiratory viruses. TCPH is in the process of recruiting providers with a goal to obtain 10-50 specimens per week. Another project entails testing homeless individuals through our hospital partner, Kaweah Delta, and conducts outreach to homeless individuals with their Street Medicine Team and a nurse from TCPH and collect specimens for testing anyone with symptoms.

Tulare HHSA in collaboration with the Tulare-Kings COVID-19 Coalition has distributed messaging urging residents to get tested through a variety of information dissemination channels to the general public including: press releases, website postings, social media outlets including Facebook and Twitter, traditional media outlets via press interviews including: newspaper, television and radio. The Agency has disseminated this messaging in both English and Spanish to multilingual media outlets. Tulare County maintains a map of collection sites on the website with hours and contact information so that residents can easily find a site to get tested:

<https://covid19.tularecounty.ca.gov/covid-19-testing-collection-sites/>

Contact Tracing

Currently, Tulare County has 59 employees trained and available to do contact tracing, which equates to 12.3 staff per 100,000. An additional 10 staff are currently enrolled in the virtual online training and are expected to complete training at the end of May. On May 19th the Board approved an MOU with Visalia Unified School District for use of the school nurses as additional contact tracers. Tulare County is expecting to bring on 10 additional nurses through this agreement, **which will allow the County to surpass the 72 FTE requirement for contact tracers by early June.** In addition, Tulare County has lined up another 32 staff by partnering with the local Workforce Investment Board to hire on as contact tracers. The recruitment process for the additional staff has already began. Tulare County anticipates that the additional staff from the WIB will begin to be hired within the first week of June. Thus, by mid-June, Tulare County will have 111 trained contact tracing staff which will accommodate a potential 3-fold increase in COVID-19 cases. Tulare County can draw upon TC-HHSA staff as well as staff from other partners, who will be trained and placed on reserve in the event of an even larger surge. Tulare County is developing a train the trainer strategy in order to rapidly respond to any surges and seamlessly bring on new employees to assist. Tulare County has been able to quickly mobilize resources to expand contact tracers and institute new contact tracing strategies and processes to keep up with any surge in cases.

The contact tracers are representative of the community in racial, ethnic, and linguist diversity. TC-HHSA provides wrap around services to support individuals during isolation and quarantine.

Living and Working in Congregate Settings

Skilled Nursing Facilities

Tulare County has 18 Skilled Nursing Facilities listed below. HHSA works very closely with each of the skilled nursing facilities (SNF's) to ensure they have the proper resources to care for their staff and residents. Regular weekly calls with Skilled Nursing Facilities are conducted to address any concerns or provide recommendations.

Skilled Nursing Facility Name
DELTA NURSING & REHABILITATION CENTER
DINUBA HEALTHCARE
GATEWAY POST ACUTE
KAWEAH DELTA MEDICAL CENTER D/P SNF
KAWEAH DELTA SKILLED NURSING CENTER
KAWEAH MANOR CONVALESCENT HOSPITAL
LINDSAY GARDENS
LINWOOD MEADOWS CARE CENTER
MERRITT MANOR CONVALESCENT HOSPITAL
PORTERVILLE CONVALESCENT HOSPITAL
PORTERVILLE DEVELOPMENTAL CENTER D/P SNF
REDWOOD SPRINGS HEALTHCARE CENTER
REDWOOD SPRINGS HEALTHCARE CENTER
SEQUOIA TRANSITIONAL CARE
SIERRA VALLEY REHABILITATION CENTER
SIERRA VIEW MEDICAL CENTER
TULARE NURSING & REHABILITATION CENTER
TWIN OAKS REHABILITATION & NURSING CENTER
WESTGATE GARDENS CARE CENTER

Correctional Facilities

The County of Tulare provides health care services through a comprehensive contract with WellPath health services. Accommodations have been made ensure physical distancing, hygiene, screening, and isolation of COVID positive patients.

Tulare County has a total of 5 correctional facilities with a total capacity of 2,058.

Juvenile Detention Facility - 210 capacity

Main Jail - 264 capacity

South County Detention Facility - 510 Capacity

Pre-Trial - 384 capacity

Bob Wiley Detention Facility - 690 capacity

Two correctional facilities in Tulare County can house and treat COVID+ individuals. The two facilities will provide support to the other facilities should they need to house a COVID+ individual. In addition, each correctional facility has their own health administrator to assist with test collections. The Tulare County Public Safety Liaison works with WellPath and the Public Health Lab to expedite lab results.

Tulare County has a total of 6 homeless shelters with a total capacity of 177. The shelters each have implemented a plan to work directly with the Tulare County Homeless Liaison.

Porterville Women's Shelter - Porterville - capacity 6

Porterville Women's Shelter - Porterville - capacity 32

Karens House - Visalia - capacity 33

Light House Rescue Mission - Tulare - capacity 16

VRM-ONG - Visalia - capacity 50

VRM-Shelter of Hope - Visalia - capacity 40

The Homeless Liaison has created a process to assist the homeless community with testing and sheltering using Project Room Key. Through this program, Tulare County contracts with 4 hotel facilities in 3 cities with a total bed capacity of 151.

Tulare County is working with its partners, including hospitals and the Continuum of Care, to identify and receive referrals for these beds, which will fall into three primary groups: i) COVID positive but not needing inpatient care; ii) Under investigation for COVID; and iii) COVID negative but at higher risk for complications related to COVID (e.g. medically fragile or elderly). Tulare County has and will continue to provide and track wraparound services - including case management, transportation, security, laundry, meals, and on-site management - for those being placed in these beds.

Protecting the Vulnerable

- Members of the workforce required to isolate are most commonly instructed to remain home for the duration of their isolation/quarantine. In some cases where home quarantine is not feasible hotels have been offered to workforce.
- We have focused a number of resources and interventions to address vulnerable populations within our county, which includes congregate settings, incarcerated populations, and elder populations in long term care facilities.
- Education: For all of these settings, we have educated the staff and administrators about COVID risks and prevention with weekly teleconferences, lecture programs, brief video messages, and technical assistance conversations as needed.
- Testing: We have initiated surveillance testing and continue to do symptomatic testing on all persons with COVID symptoms or close contacts who qualify for testing based on CDPH priorities for testing.
- Supplies and PPE: Our MHOAC continues to supply congregate settings and LTCFs with PPE and other supplies as requested. We have contacted, and remain in contact with all SNFs, and they report having >14 day supply of PPE. In addition, SNFs have established or are planning processes for procuring PPE through private vendors.
- Tulare County is currently working with its non-profit community partners and contracted providers to ensure that seniors, those with access and functional needs, home bound and medically fragile clients are receiving or have access to healthy well balanced meals (Meals on Wheels program). The county is ensuring that the local food bank has the resources needed in order to go out to rural communities and continue to distribute food with minimal risk to the resident and populations they serve - which includes many people who are identified in this category.
- Additionally, we are making available to these populations, services various programs that will ensure they do not become socially isolated by reaching out to them by phone and mail (Wellness Call Center and Mailers). Appropriate measures are taken so that person to person interaction is done meeting the recommendations made by state and local health officials to minimize client's exposure during the pandemic. Partners include Agency for Aging, Senior Centers, CSET, Meals on Wheels Program, MSSP, Senior Counseling Program, IHSS.
- Our Adult Protective Services team continues to offer immediate in-person visits for those cases that are determined to include imminent risk, as well as providing emergency food resources for referrals in need.
- The mental health branch offers a Senior Counseling Program to individuals age

60+, which does not require that they meet specialty mental health services criteria.

- The friendship line of California is a 24/7 hotline available to seniors in need of a friendly voice. In addition to services, we have established processes that minimize barriers and ensure easy access.
- Collaborative working relationships have been developed with community partners which allow us to better come together and respond quickly to meet the needs of older and disabled adults.

Acute Care Surge

- Hospital capacity tracking: there is daily tracking of hospital capacity including COVID-19 cases, hospital census, ICU census, ventilator availability, staffing and surge capacity.
- Supply chains: while hospitals have most of their needs met with their own supply chains, the MHOAC does continue to support the medical community relying on county MHOAC for PPE and will continue to do this until their independent supply chains are sufficient.
- Admission testing: while hospitals are testing with higher volumes after each week, not all patients are tested prior to admission to the hospital. Once we have more testing supplies/ capacity, this will be an expectation for all hospital admissions.
- All county hospitals have a plan for tracking and addressing occupational exposure, with contact tracing and isolation plans coordinated jointly with employee health, infection control, and public health teams.

Essential Workers

- There are numerous essential workplaces in the County including:
 - Local Governments
 - Food Growers, Processors, and Suppliers
 - Hospitals and Health Care
 - Water, Sewer, Telecommunication Agencies
- Since the start of our pandemic response TCPH has provided guidance to our essential workplaces to ensure employees and customers are safe in accordance with state/county guidance for modifications.
- Our business liaisons will continue working with employers who have positive cases. In the event they are interested in arranging for mass testing of their facility we are working with our health care centers who have agreed to make arrangements for mass testing. Depending on the size and location of the employer testing might be arranged on site via a mobile unit/POD setup or slots will be reserved for the employees to visit the health care center for specimen collection.
- The business liaison team has also written a guidance document for businesses that includes information from CDPH and CDC guidelines in regards to preparing the workplace in the age of COVID. It also has information regarding what to do if you have an employee with suspected or confirmed COVID and what to expect if you have an employee put in quarantine/isolation.
- The Business Liaisons and Clinical team also have conference calls with businesses to assist with any questions they may have about the process. The business playbook is available to the public on the Tulare County website.
- Tulare County HHSA provides wrap-around supportive services for all persons in quarantine.
- Essential workplaces have access to key supplies like hand sanitizer, disinfectant and cleaning supplies, as well as relevant protective equipment.

Special Considerations

- Tulare County has a large agricultural community and work base. The county has provided videos through social media to reach out to these workers for continued education and outreach. The county has representation from identified leaders in this community to establish the trust to encourage engagement and testing.
- The department has a business liaison team that works with the businesses within the county and has been crucial in engaging the business that have experienced outbreaks. The team has worked with food processing, warehouse, fruit packing, and manufacturing businesses to provide a direct line of communication, to answer questions regarding restrictions to their operations depending on the category type and to provide CDPH and CDC guidance.
- The Environmental Health Department has established strong relationships with the business community and this has been an asset in working with all companies during this pandemic. The Joint Information Center has established liaisons with several businesses within the community also to place out consistent messaging and communication. Telecommuting has been embraced by all businesses able to roll out these services and are encouraged.

Community Engagement

- The County and Agency holds weekly meetings with all City Managers and attends frequent City Council Meetings to provide updates and answer questions.
- The Agency has initiated a Community Care Coalition that includes a variety of departments and community based organizations that reflect the racial, ethnic, and linguistic diversity of the community. The partners are engaged in the providing input into the ongoing variance plan. Partners include: CSET, Family Services, United Way, The Source, Food Link, Kings View, Family Resource Centers, Rescue Mission, First 5, Turning Point, Homeless Alliance, Probation, Sheriff, Regular meetings are held with the group to share updates and solicit feedback

Relationship to Surrounding Counties

- Tulare County is an active member in the San Joaquin Valley Public Health Consortium that includes 10 counties in the surrounding area. Bi-weekly meetings have been held since March with this group. The department also holds close partner relationships with the Fresno, Kings and Madera County Public Health Departments. There has been engagement one to two times per week during this pandemic to coordinate services and plans. The EOC Managers through Region 5 are engaged and communicate frequently. The Fresno County Emergency Services Department coordinates the ambulance services in Tulare County and is in communication for assistance and support.
- Each surrounding county has submitted successful variance attestations to increase the pace through Stage 2 and have provided support to Tulare County to assist in also attaining this status. There have been meetings and conferences with shared elected officials to organize and support a regional approach in moving to the accelerated phase plan.
- Many community members cross county lines for services related to health and testing services. Tulare County Public Health Lab has provided support and guidance in providing the testing for the priority groups to the neighboring counties. The coordination of services and assistance will continue in all these areas while moving through the different stages of recovery.