

Public Health 101

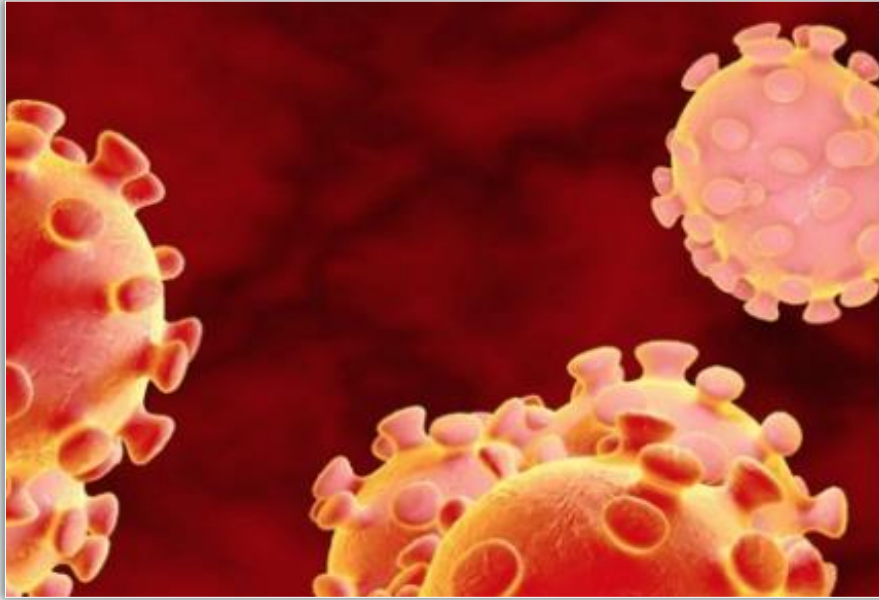
Housing for Health Training to Congregate Living Facilities

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Case Study

- Reggie is 62M with COPD is a live-in driver at a large shelter in LAC. He shares a dorm style bedroom with 2 men and a bathroom/common area with 38 other men. He spends a lot of time with his 'best friend' who also is a resident and staff member at this shelter. No one in this dorm has gotten sick in the last 2 weeks.
- On Friday 3/27/2020 while making several deliveries and pick-ups to local stores and businesses, Reggie starts to feel "funny." He feels tired, weak, and possibly feverish. He has a sore throat. He returns to his dormitory to rest.
- On Saturday 3/28/2020, Reggie develops shortness of breath and looks like he is having trouble breathing. He calls 911.



Coronavirus Information for Healthcare Pro

What do you do next?

<http://publichealth.lacounty.gov/acd/ncorona2019/>

Let's review what we know about COVID-19

- COVID-19 is a novel coronavirus that infects humans and causes an **acute febrile respiratory illness**. Think cold, flu, or pneumonia.
- It usually takes 4 - 5 days from being exposed to COVID-19 to get symptoms. Sometimes it can take up to 14 days or longer. This is called the **incubation period**.
- People with COVID-19 are usually **contagious** 1-2 days before they get symptoms and about 3 days after their symptoms go away.

How do you get exposed to COVID-19?

- COVID-19 is spread through **respiratory droplets** (from sneezing, coughing, and touching your mucus membranes, like your eyes, nose, or mouth). Bits of virus (called **fomites**) can live on surfaces too.
- So an **newly infected person** either has to come into close contact (to be exposed to respiratory droplets) or touch a surface covered in fomites and then introduce the virus to their mucus membranes (by breathing in or touching their eyes or lips).
- About **10 - 15% of household contacts** will become infected with COVID-19 (so if you have COVID-19 and you live with 10 other people, about 1-2 people will get COVID-19 from you).

What are the symptoms of COVID-19?

- The CDC says this is the **trifecta**
 - New fever (Temperature > 100.4 F)
 - Cough
 - Shortness of breath
- But COVID-19 can look like many different types of illness.
- **Mild COVID-19** looks like a **cold**, at least early in course. Ask about sore throat, runny nose, mild cough, fatigue, weakness. Sometimes people have diarrhea too.
- **Moderate COVID-19** looks like the **flu or walking pneumonia**. Ask about fevers, chills, night sweats, muscle aches, new cough, sputum production, chest discomfort with breathing, mild shortness of breath (like you get winded more easily walking up stairs).
- **Severe COVID-19** looks like **pneumonia or worse respiratory failure**. These patients have difficulty breathing when talking, have bluish lips or fingers, have seizures from high fevers, are confused or can't wake up completely.

Pre-Test Probability

- **Pre-test probability** is... your **clinical guess** that a person will have the disease before getting a confirmatory test.
 - High pre-test probability COVID-19
 - Intermediate pre-test probability COVID-19
 - Low pre-test probability COVID-19
- Factor in clinical presentation and exposures to your decision making process.

Back to our case...

- What is your pre-test probability that Reggie has COVID-19?
 - High, Intermediate, Low

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 - **High**, Intermediate, Low
- What **category** is Reggie in?
 - COVID-19 suspects (or people you think have COVID-19 can be categorized as...)
 - Symptomatic, untested
 - AKA most of your clients with mild symptoms at home
 - Symptomatic, pending test results
 - AKA person under investigation (PUI)
 - Symptomatic, confirmed
 - AKA been tested for COVID-19 and tests positive

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Reggie is hospitalized.
He tests positive for COVID-19.

1. Report to LAC DPH and to Housing for Health.

- If Reggie tests positive for COVID-19.
- If two or more people in your facility get COVID-19 symptoms within 72 hours.
- If any healthcare workers in your facility gets COVID-19 symptoms

To notify Housing for Health:

****Use COVID-19 Log****

To report to LAC DPH:

Call 213-240-7941 from 8:00am-5:00pm Monday to Friday and 213-974-1234 (After Hours Emergency Operator)

2. Identify close contacts

- Identify close contacts
 - For healthcare workers: **Close contact** is spending greater than 2 minutes at less than 6 feet of distance without appropriate PPE.
 - For non-healthcare workers: **Close contact** is spending greater than 10 minutes at less than 6 feet of distance without appropriate PPE.
- Who are **close contacts** at congregate facilities (like shelters or board and cares)?

Close Contacts

If implemented social distancing and other hygiene prevention measures 100% of the time, then essentially no one.

But that's really hard to do... So think about...

- **Roommates** (maybe those sharing a bathroom)
- **Close friends** or romantic partners
- Caregivers or staff members
- Nursing or medical staff
- Drivers or passengers of cars

Who are Reggie's Close
Contacts?

Reggie's Close Contacts

- Two roommates
- 1 best friend
- 38 other men in dormitory with shared bathroom/common areas
- All passengers in the van he drives
- *Probably more... But he lives in a shelter... its going to be hard.*

3. Place Close Contacts in Quarantine

- **Quarantine** is when you place asymptomatic, close contacts in isolation for **14 days** to monitor for COVID-19 symptoms.
- Monitor all residents in quarantine **two times a day** for COVID-19 symptoms.
- All residents in quarantine should **stay in quarantine area** and use quarantine bathroom.
- Meals and medications should be **delivered** to quarantine area.
- Designated COVID-19 staff people coming into quarantine area should wear eye protection, regular masks, gowns, and gloves (**Contact and respiratory droplet isolation**).
 - Every effort should be made to **keep staff consistent in these areas to reduce PPE use and exposure risk of staff/residents**.
- Bathrooms and common areas should be cleaned disinfected **3 times a day**. Cleaning staff should wear eye protection, N95 masks, gowns, and gloves (airborne, contact, and respiratory droplet isolation).
- All **staff should be notified about exposure**. Close contacts should “self quarantine” for 14 days (i.e. don’t come to work). Staff who get sick should be advised to “self isolate” at home for at least 7 days after symptoms start up to 3 days after symptoms end.
- **Limit or restrict new admissions** to facility if whole facility is under quarantine. Guidance provided by LAC DPH.

4. Place symptomatic people in isolation

- All **symptomatic residents** should be placed in an isolation area with isolation bathroom for at least 7 days after symptoms start or 3 days after symptoms end. **WHICHEVER IS LONGER.**
- Monitor high risk clients (age > 50 or chronic medical conditions) at least every 2 hours.
- Call residents' medical provider for treatment and testing recommendations or if symptoms get worse.
- Call 911 in an emergency.
- Meals and medications should be delivered to isolation area.
- Designated COVID-19 staff people coming into isolation area should wear eye protection, regular masks, gowns, and gloves (**Contact and respiratory droplet isolation**).
 - Every effort should be made to **keep staff consistent in these areas to reduce PPE use and exposure risk of staff/residents.**
- Reduce frequency of cleaning in isolation areas and bathrooms to minimize exposure to COVID-19. Cleaning staff should wear eye protection, N95 masks, gowns, and gloves (airborne, contact, and respiratory droplet isolation).
- All **staff should be notified about exposure risks.** Close contacts should “self quarantine” for 14 days (i.e. don't come to work). Staff who get sick should be advised to “self isolate” at home for at least 7 days after symptoms start up to 3 days after symptoms end.
- **Limit or restrict new admissions** to facility if whole facility is affected. Guidance provided by LAC DPH.

5. Cohorting

Its ok to isolate/quarantine groups (or cohorts) together. Think about creating different isolation and quarantine areas for:

- Symptomatic, untested → Social distancing +/- face masks for coughing patients
- Symptomatic, PUIs → Social distancing +/- face masks for coughing patients
- Symptomatic, COVID+ → No social distancing needed.
- Quarantine, asymptomatic → Social distancing, heightened cleaning and infection control

6. Staffing Issues

- Staff with close contact exposures should “home quarantine” for 14 days.
- Staff with COVID-19 symptoms should “home isolated” for at least 7 days after symptoms start up to 3 days after symptoms end.
 - Their household contacts should stay at home too.
- Assign staff for isolation and quarantine care (i.e. designated COVID-19 staff). Train these staff on infection control practices and best PPE practices.
- Expect about 30% of your workforce may be unable to come to work due to isolation, quarantine, and dependent care. Create alternate staffing plans with skeletal staff structure. Identify members of your workforce to cross train to support congregate facilities during staffing shortages.

Updates

- We are continuing to perform individualized Training/TA with our HFH-ODR facilities.
- Continue to update the COVID-19 Log with staff and/or residents in quarantine and isolation.
- Please contact Homeless Service Agencies Info Line for general questions! 323-274-3303 (M – F, 8 AM to 5 PM)
- IQ Sites (Isolation and Quarantine Sites) are available for clients who cannot or will not follow isolation or quarantine procedures.
 - To refer to these sites, call 833-596-1009 (7 days a week, 8 AM to 6 PM).

PPE UPDATES

- PPE distribution (CCL distributed N95s and surgical masks today, DPH survey monkey request link no longer operational)
- CONSERVE WHAT YOU HAVE ... LOOK FOR ALTERNATIVES

Telehealth Guide

See PDFs

Submit Daily COVID-19 Log

<https://forms.office.com/Pages/ResponsePage.aspx?id=SHJZBzjqG0WKvqY47dusgd5RFRoA2w9CueFEiltbqt1UNUNBTjFCMFAXMjFWM1JMNFRFR081UDI0Ui4u>

Link for In Stock Supplies!

https://docs.google.com/document/d/1tpPZuyXkrCoHyZa7GChKskqH7XTtD09J_LYUknc4nyM/edit?usp=sharing