

CCHS COVID-19 Response – Incident Objectives

September 14, 2020 – 1600 hours

1. Incident Name: COVID-19	2. Operational Period: #34 09/14/2020 @ 0800 Hrs to 09/21/20 @ 0800 Hrs
3. Objective(s): A. <u>Primary Objectives</u> <ol style="list-style-type: none">1. Reduce the morbidity and mortality of COVID-192. Facilitate a safe reopening if possible and appropriate B. <u>Management Objectives</u> <ol style="list-style-type: none">1. Enforcement – continue to work with County Administrator’s Office (CAO), County departments and cities to understand enforcement options for Health Officer orders2. Resources – work with CAO to continue to request resources for the County’s COVID-19 response Strategic Policy Group (SPG) <p>Chris Farnitano, MD - Health Officer of the County of Contra Costa</p> <ol style="list-style-type: none">1. Assess future changes to Shelter-in-Place orders2. Assess and update Guidance for COVID-19 Testing to correspond with the current testing capacity and methods as well as State metrics3. Assess if existing Health Orders are consistent with state guidance Continuity of Service/Operations <p>Randy Sawyer – Deputy Director, Contra Costa Health Services (CCHS)</p> <ol style="list-style-type: none">1. Continuity of Operations Plans (COOP)<ol style="list-style-type: none">a. Confirm which CCHS services are essential and will continue and which services have been suspended2. Assess the return of CCHS workforce3. Maintain awareness and prepare for concurrent health emergencies during the COVID-19 response4. Develop and distribute guidance for performing remote visits and inspections5. Work with Risk Management performing site assessments on safe guards to prevent the spread of COVID-19, such as sneeze guards. Safety Officer <p>Sylvia Elizarraraz - Safety Services Manager, CCHS</p> <ol style="list-style-type: none">1. Ensure CCHS divisions update their Injury Illness Prevention Plan (IIPP) to address COVID-192. Develop a process to support the well-being of DSWs periodically throughout deployment3. Collect social distancing protocols from CCHS locations Public Information Officer (PIO) <p>Kim McCarl – Communications Officer, CCHS</p> <ol style="list-style-type: none">1. Remain Proactive with Media Communication Efforts (led by Public Information Officers)<ol style="list-style-type: none">a. Review existing data and determine what to add or remove from the public dashboard on coronavirus.cchealth.org (COVID-19 Data Group)b. Reinforce and emphasize the importance of physical distancing and the importance of face coveringc. Share positive and uplifting storiesd. Quickly identify and control rumorse. Regularly review and update CCHS website to remove outdated informationf. Coordinate with the Call Center	

- g. Coordinate with State regarding their campaign around Contact Tracing
 - h. Promote testing to county residents
2. Work with the community to craft messages around COVID-19 including testing and physical distancing/face covering and identify community spokespeople
 3. Identify opportunities to get the census messages out and coordinate with COVID-19 messaging
 4. Develop and maintain list of public presentations/town halls

Community Engagement

Shannon Ladner-Beasley

1. Continue coordinating with Communications to develop community-specific COVID-19 messaging
2. Continue implementing youth ambassador program and develop adult ambassador program
3. Work with community to identify supplies needed including masks for distribution

C. Operations Section Objectives

Ori Tzvieli (Section Chief), Matt Kaufmann (Deputy Section Chief), Kristian Lucas (Deputy Section Chief)

1. Work with all Branches to identify needs for ongoing operations including staffing plans

Laboratory Branch

Melody Hung-Fan (Branch Director) and Sergio Urcuyo (Technical Specialist), Adam Springer (Branch Coordinator)

1. Continue training of staff for PCR testing. We currently hired 1 registry cytotech and 3 CLS for COVID-19 PCR testing. 1 more CLS undergoing pre-employment process.
2. Expand training to regular staff CLS for COVID-19 PCR.
3. Work on offering rapid Flu testing for tent sites. Still need to update CLIA and CDPH licenses.
4. Work on getting more Abbott ID analyzers for Flu and COVID-19 testing.
5. **New:** Hire and train PHM trainees to work on weekends until the end of their training in September.
6. After freeze approval, hire temp lab tech to work weekdays to assist with specimen processing.
7. Continue to work on COVID-19 lab conversion
8. Continue to validate Perkin Elmer PCR for COVID-19
9. Continue to work on CDC SARS-CoV2/Flu multiplex assay
10. Work with personnel to convert 2 PHM trainees to lab technicians and get freeze approval to hire new staff into PHM trainee position.
11. Acquire refrigerator for PCR sample and reagent storage.
12. Acquire more permanent solution to increase room temperature COVID-19 reagent storage (purchase temperature controlled storage pod)
13. Acquire Cepheid or other platform to increase capacity for rapid COVID-19 testing.

Testing Branch

Sue Crosby (Branch Director) and Gabriela Sullivan (Technical Specialist), Nicole Heath (Branch Coordinator)

1. Continue surveillance testing of custody and probation staff
2. Work with PIO and Community Engagement group to develop joint path forward to meet testing needs of community
3. Work with PIO to dispel misinformation about testing positive for COVID-19 including implementing communications plan.
4. Continue to work with Lab Branch to integrate new labs
5. Complete 1,500 test per day (i.e. 1/3 of 4500 county goal)
6. Evaluate testing work flows to meet testing goal this can include: changes in hours/days in operation, complete targeted outreach, optimize ability to do walk up testing
7. **New:** Work on moving test sites indoors due to air quality
8. **New:** Work on establishing new site at Baypoint Health Center

Appointments and Screening Unit

Aimee Cortada (Unit Leader)

1. Evaluate and Monitor the newly implemented Open Scheduling platform to understand impact on testing volume and identify any issues/errors with appointment booking. Optimize system as needed.

State, PH, Health Center Testing Units

Andrea Sandler (Unit Leader)

1. Continue work towards increasing CCHP members receiving tests (this can include online registration options, avenues for direct PCP, RN, HCW scheduling, etc.)
2. Continue targeted serology testing.
3. Continue self-swabbing for MHC pre-operative patients, explore potential expansion
4. Continue work on two testing sites in Richmond:
 - a. NRHC (opened 08/11): Monitor site utilization and make adjustments to advertising and appointment strategy as necessary.
 - b. High Throughput testing site in Richmond (400 test/day) target date 08/26 for walk up has opened, drive up targeted to open 09/16.

Mobile Testing Unit

Daniella Poy-Wing (Unit Leader)

1. Outline both the scope (numbers of staff/residents/locations) and tactical processes needed to rollout universal testing at Congregate Facilities, every 30 days.
 - a. Continue to work with logistics to provision supplies

Admin Triage Unit

Rachael Birch (Unit Leader)

1. Continue hiring of staff dedicated to admin triage 100%, including filling vacancies left by DSW returning to home program
2. Work with BI unit to notify labs of regulatory requirements to report to CalREDIE electronically within 30 days of coming online and ensure compliance through the following measures
 - a. Ongoing identification and tracking of labs not live on ELR.
 - b. Issuing official warning/health officer letters to labs not reporting through ELR.
 - c. Providing congregate facilities list of CDPH approved labs to encourage contracting with labs already live on ELR.
 - d. Identify top sending sources and assist them in transitioning from fax to eCMR or CSV templates.
 - e. Implement OCR technology to sort remaining faxes to support identification of high priority cases.
 - f. Implement alternative workflows for case entry during ELR outages.
 - g. Manual data entry of results received via fax.
3. Work with BI unit to compile reports with cases from known lab sources not in CalREDIE.

Auxiliary Care & Treatment Branch

Maria Fairbanks (Branch Director)/Linae Altman (Alternate), David Goldstein (Technical Specialist), Veronica Burrell (Branch Coordinator)

1. Identify future Branch/Unit personnel needs
2. Identify current or potential Unit/Branch metrics and develop branch dashboard
3. Continue surge planning, identification of County resources for surge, and development of COVID-19 Surge Plan

Hotels Unit

Jenny Robbins (Unit Leader), Michael Fisher (Assistant Leader)

1. Continue to identify and move high risk individuals and families experiencing homelessness into motels until full occupancy is maintained
2. Continue to monitor PUI occupancy rates with the expansion of populations served.
3. Enhance behavioral health staffing pattern across all hotel sites and create standardized workflows to establish roles and responsibilities of clinical staff.
4. Complete job safety analysis specific to homeless service providers to determine tasks performed, level of risk and identify recommendations.

Alternative Care Sites (ACS) Unit

Lisa Vajgrt-Smith (Unit Leader), Ellen Dempsey (Technical Specialist)

1. Maintain Craneway site, preparing to shift to support operations and patient and staff support once occupied
2. Continue to plan and coordinate wrap around services for the Concord Arnold ACS
3. Continue to monitor progress for the Concord Arnold Industrial Site construction
4. Begin planning discussion of demobilization of ACS sites (long term plans). This is currently on hold.
5. Continue to transition duties and orient new Tech Specialist to sites and current planning and operational objectives
6. **New:** Transition duties and orient new ACS Unit Lead to sites and current planning and operational objectives
7. **New:** Schedule punch walk of Concord Arnold Industrial site with Public Works for the week of September 28th

Emergency Medical Services (EMS) Unit

EMS Unit Leader (rotating)

1. **New:** Assist the Regional Disaster Medical Health Specialist and impacted counties with bed polling and transfers as needed.
2. Continue to evaluate EMS Unit ICS structure and workflows occurring in the EMS Unit as it pertains to COVID-19
3. Support and supply Congregate Care Unit data from State SNF poll
4. Continue to coordinate with Region and State partners through operationalization of MHOAC program

Outreach and Preparedness Support for Congregate Living Unit

Sara Levin (Unit Leader), Karen Jovin (Co-Leader), Laura Figueroa (Assistant Leader)

1. Efficiently support SNF that report 'red' status for staffing or PPE needs on the Situation Status Report from the State (<14 days of PPE). This includes education on burn rate, supply chains and possible MRC support for short term/urgent staffing needs
2. CCHS and its partners, including local skilled nursing and assisted living facilities with firsthand experience fighting COVID-19, are developing a pandemic COVID-19 "playbook" that promotes infection control best practices, facilitates proactive training and standardizes tactics for high-risk situations, such as a patient or staff member testing positive. Contra Costa Regional Health Foundation funding and IHI consulting.
3. The Congregate Care Team, in coordination with our Hospital Systems' Partners and Communicable Disease at Public Health, will conduct Strike Team visits to SNFs, 8+bed RCFE and smaller facilities with active outbreaks and establish immediate plan of action for red, yellow and green zones, use of PPE and infection control practices.
4. Extend the work of the Congregate Care Team to coordinate and support Strike Team visits for Residential Facilities for People (all ages) with Disabilities and Recovery Homes & Other AOD Facilities.
5. Identify content for education modules and move training to an in-service model given short staffing status at facilities. Coordinate with MCR staff to deliver Don/Doff and Swab Training. Record session on zoon related to infection control and expand the number of RNs from 3 to 5 who can visit facilities to conduct N95 testing for various models of masks and now that facilities are receiving their test kits which were back ordered.
6. Hold monthly town hall meeting to share current CDC, State and PH recommendations related to care, visitation and coordination between Hospital Systems and SNFs and RCFEs. Invite participation from community partners such as Ombudsman.
7. Work in collaboration with other Hospital Systems who were awarded NACHO grant to support integrating family members into the plan of care and social wellbeing of residents.
8. Collaborate with community partner to develop training that supports Congregate Branch Members, Facility Staff on behavioral alternatives for Memory Care Units related to COVID-19 Infection Control Practices and stages of Dementia.
9. Establish metrics to track impact and volume of activities conducted by this team and outcomes

Vulnerable Individuals Unit

Steve McNutt (Unit Leader)

• Support and Social Needs Group

1. Identified two Social Workers to pilot social services coordination team to support Contact Tracing & Investigation
2. Social Workers to be trained on CalREDIE on 9/17, will begin providing services after that date

- Outreach/Case Management for Individuals Living at Home Group
 1. Continue working on updated needs assessment to determine needs for high COVID-19 risk individuals
 2. Continue working on connecting vulnerable individuals to resources including food
 3. Pilot will run Monday thru Friday with intention to expand 7 days per weeks once DSWs are onboarded
 4. Community Connect expansion to outreach vulnerable residents using CVI v.2 still pending awaiting approval for additional DSWs
 5. **New:** Explore using HealthLeads student workforce for connecting to vulnerable individuals

Case & Contact Tracing Branch

Marissa Elliott (Branch Director) and Sofé Mekuria (Technical Specialist), Devra Lewis (Branch Coordinator), Tim Kraus (Branch Coordinator)

1. Continue evaluation of workflows
2. Maintain infrastructure to support the community partnership bi-monthly meetings to help address staff mental health and provide a community of support
3. Continue training staff to do both case investigation and contact tracing work

Data, Technology, and Reporting Unit

Elizabeth Hernandez (Unit Leader)

1. Continue Salesforce Implementation
 - a. Provide feedback to CDPH on platform fixes and future enhancements
 - b. Continue to explore interoperability issues with CalREDIE data
 - c. Develop standard reporting template from Salesforce data
2. Develop quality assurance standards and operational oversight
3. Complete transition of Outbreak team to CalConnect
4. Continue pilot of Social Resource Support referrals within CalConnect
5. Continue onboarding new Project Manager
6. Continue implementing CalConnect staff and supervisor dashboards
7. Continue program metric dashboard design with BI/Data Team

Case Investigation – Care Facilities

Danyale Parrish (Unit Leader)

1. **New:** Develop procedures/expectations for documenting Outbreak-Care Facilities case investigation in CalConnect
2. **New:** Continue conversation about receiving additional staff from CI unit into Outbreak-Care Facilities unit
3. Continue to coordinate with facilities to provide line lists electronically
4. Continue evaluating workflows to improve staff efficiency
5. Continue to coordinate documentation of COVID-19 lab results (outside labs and within Public Health System) with Outbreak Triage and Admin Triage

Case Investigation - Intake Unit

Brenda Fields (Unit Leader)

1. Monitor workflows in CoCoHelp and on clerical phone tree line calls for efficiency
2. Continue to work with IT on Heat App to create more efficient transfer of information for consistent tracking of phone calls
3. Continue piloting the new workflow for hospital discharges, SNF transfers in CoCoHelp and phone tree calls
4. Continue to assess options for one more lead staff
5. Continue to train new lead in CI with existing staff

Case Investigation – Non-Outbreak

Cheryl Ford (Unit Leader)

1. Continue to improve CI workflow
2. Continue review closed cases for QI (quality improvement)
3. Continue developing process for CIs to keep cases through isolation period

Case Investigations – Schools

Heather Cedermaz (Unit Leader)

1. Continue to provide clear and concise support for case investigation and contact tracing concerns from schools, school districts, technical schools, and colleges.
2. Continue to provide clear and consistent guideline interpretations regarding waivers, Health Officer orders that affect school reopenings, camps, and other activities that include pods of children.
3. Continue to review website and resource materials and work with PIO to improve the user experience and decrease the need for incoming questions.
4. Continue to support the Communicable Disease program and the Health Officers as requested regarding school waiver and reopening policies.

Case Investigation – Work Locations

Debbie Patterson (Unit Leader)

1. Complete CalConnect entry of backlogged exposure events – enter notes from excel file and resolve duplicates of exposure events
2. Additions to county website for Businesses and COVID-19: Business Guidance for suspected/confirmed COVID-19 cases in the workplace, Intake form and roster for business reporting of COVID-19 cases
3. Submit for PIO approval email/letter communication to businesses from Location Investigators
4. Train new staff in Workplace Location work
5. Continue to create and refine Location Investigation workflows

Contact Tracing Unit

Michelle Williams (Unit Leader)

1. Continue hiring new PHPS1
2. Continue monitoring workflow of State and County Contact Tracers (CTs)
3. Continue to determine appropriate data to send to State CT Supervisors
4. **New:** Begin training one CT Lead with one CI SME to learn and understand the role of CI
5. **New:** One CT Lead, 3 State CTs, and 7 County CTs will take VTA (Virtual Training Academy) to become CI/CT

Contra Costa Regional Medical Center/Health Centers/Detention Branch

Samir Shah (Branch Director), Shannon Dickerson (Branch Coordinator), Leah Carlon (Branch Coordinator)

1. Re-opening ambulatory care services.
 - a. In collaboration with Risk Management, identify PPE and physical distancing methods needed to safely re-open clinics and increase ambulatory encounters.
2. Prepare for upcoming cold and flu season
 - a. Review surge plan and re-evaluate needs based on lessons learned
 - b. Consider expanding point of care testing
 - c. Opening “Short Notice Respiratory Clinics” at all ambulatory sites to help with cold and flu season. Anticipated start date is 9/14/2020. Timeline for flu vaccinations and testing to be provided in these clinics.
 - i. October: Flu vaccinations
 - ii. November: Flu testing – obtaining testing supplies is In Process.
 - d. **New:** Procuring Abbott COVID-19 and Flu testing supplies, contract pending.
3. Test all asymptomatic Psychiatric Emergency Services (PES) patients. Testing piloted using CCRMC lab machine.
 - a. **New:** Now requiring any transfers to PES to have resulted COVID-19 test
4. **Update:** Task force created to re-open 4D for additional psych capacity to increase social distancing and safety in the unit for patients and staff.
5. In Detention maintain:
 - a. Testing all new bookings for COVID-19
 - b. Medically vulnerable individuals have been medically isolated at WCDF
 - c. Routine testing offered to all staff as of 8/27/20, it is voluntary, and occurs twice monthly.
 - d. Custody, Detention Health leadership and Infection Control will revisit Surge Planning at Detention; next

- review scheduled 9/3/2020. Tentative plan/updates TBD.
- e. **Update:** Monitor and assist exposure tracing in Juvenile Hall after first positive case. Exposure investigation complete, no known positive staff connected to this patient. Public Health conducted case contact tracing with patient's family.
6. Implement plan to test all asymptomatic patients coming to CCRMC including Labor and Delivery and Inpatient Admissions.
 - a. Pre-operative testing began 7/8 for all patients going to the OR or GI suite. Exceptions made for emergency cases.
 - b. Testing for all Labor and Delivery admissions started 7/23
 - c. Testing for all ED Admissions starting by 7/31. Delayed due to test turnaround times.
 - d. Purchasing Cepheid Lab Equipment to increase in-house testing capacity. In progress, working on purchase quote with vendor.
 7. Activate agency contracts to support COVID-19 activities in CCRMC Lab, DI, and materials management. Staff request submitted for Materials Management this week. Still pending.
 8. Continue to manage CCRMC staff COVID-19 outbreak and prevent any further spread.
 - a. Complete contact tracing of all positive staff
 - b. Offer testing to all staff on affected units
 - c. Offer testing to all patients on affected units
 9. Implement Operating Under Smoke Conditions – COMPLETE, re-implement as needed
 - a. Monitor Air Quality at all sites
 - b. Offer respirator masks following Risk Management guidelines
 - c. Cancel Tent Testing site clinics in accordance with Air Quality recommendations
 - d. Deploy Hepa filters to all sites per plan
 - e. Cancel Testing Tent schedules as needed per AQI ratings on www.airnow.gov.
 10. Staff Shortages – we continue to see staff shortages in critical areas for clinical care, including Nursing, Lab, Respiratory therapy, Materials Management, and Pharmacy.
 - a. In Process: Personnel request for Materials Management submitted to DOC Personnel 7/17/2020
 - i. As of 8/12/2020: Health Services Personnel working with DOC Logistics on a 'package' for CAO review
 - b. In Process: Personnel request for Nursing, and other support staff submitted to DOC Personnel
 - i. As of 8/18/2020: clarified that positions requested were temporary and related to COVID-19 response work.

Advice Nurse Unit

Charlis Salazar (Unit Leader)

1. Continue to assess work from home program to ensure 2-3 in-unit staff are always available, except during night shift
2. Continue to plan protocols for high-risk staff working from home, who may need to return to the unit in the event of a Public Safety Power Shutoff

Vaccine Procurement & Distribution Branch

Kristin Burnett (Branch Director), Meera Sreenivasan (Technical Specialist), Ruth Adams (Branch Coordinator)

- a. Continue to select Clinic sites and schedule date for flu clinic operations.
- b. Continue initial planning efforts for SARS-CoV-2 Vaccine Distribution simultaneous with flu season vaccine distribution. Participating in CDPH and CDC vaccine planning calls.
- c. **DELAYED:** Set up vaccine tracking system. Cannot complete until new staff member hired through Heluna Health.
- d. **DELAYED:** Begin cold chain storage and handling training. Cannot complete until staffing request filled for Cold-Chain Manager.
- e. Continue work with congregate care unit to schedule strike teams.
- f. Continue with COVID-19 testing sites to distribute flu vaccine.

D. Planning Section Objectives

Gerald Tamayo (Section Chief)

1. Develop the Incident Action Plan (ICS 202) for the next Operational Period
2. Document and distribute intelligence
3. Data and Business Intelligence Team - Continue to review data to model the surge, healthcare capacity, the impacts of physical distancing, and progress towards State Indicators
4. Advanced Planning Team – Continue to develop and support strategies to improve CCHS' long-term COVID-19 response.
5. Continue processing of ELC Cares Act funding application and complete application with Contracts & Grants.
6. Submit requested clarification and updates to ELC Enhancing Detection to CDPH

E. Logistics Section Objectives

Josh Sullivan (Section Chief)

1. Support the acquisition and strategic deployment of goods, services, property, and personnel in response to the county's COVID-19 activation

Supply and Procurement Unit

Noelia Gutierrez (Unit Leader)

1. Continue to support the county's MHOAC program in fully leveraging state and federal mutual aid
2. Continue to work with the Health Officer to strategically deploy, the Operational Area's weekly allocation of Remdesivir to our hospital systems with the county
3. Continue to work with leadership, CAO, various departments, and OES staff in developing and fully realizing a Logistics Sustainment and Surge build out
4. Continue to collaborate with external warehouse partner in efficiently receiving and deploying supplies to county departments and the greater community
5. Support Ops Section Branches and special projects as needed

Personnel Unit

Carmen Piggee (Unit Leader)

1. Work with HSD Personnel / County HR leadership to set framework for sustained personnel unit support within the activation
2. Continue to work with Branches to identify and fill staffing needs
3. Coordinate with branches and HSD Personnel to process and onboard individuals selected for COVID-19 Emergency Worker positions
4. Explore contract for ACS staffing
5. Continue to work with State staff in seeking clarity of scope for CA Health Corps deployments

Communication Unit

Jose Villegas (Unit Leader)

1. Ensure sustainable staffing
2. Explore alternative methods for directly contacting managers for solutions and support to call center staff
3. Partner with Safety Officer and Behavioral Health in developing processes to support and promote wellness for call takers
4. Work with section chief and management to explore and develop deeper daily metrics to report out on (scope, nature of calls, etc.)
5. Streamline communication from public to the Office of Director and senior leadership
6. Provide in-person and virtual training to onboard 3 Temporary Emergency Workers on 7/13 and 3-4 TEWs on 7/20

Hotels (non-treatment) & Properties Unit

Adrian Briones (Unit Leader)

1. Continue to work with CAO, Finance, and Auditor Controller to ensure timely payment of contracted hotels
2. Develop solutions to address the disposal of sharps in sanitary stations
3. Work with Lavonna to determine support for application for funds to purchase hotel

Donations Unit

Trisha A. Johnson (Unit Leader)

1. Support the collection and distribution of donated goods
2. Coordinate with Health Officer, CCHS Leadership, PIO, and BOS Members as needed in receiving 250,000 PCR test kits

Information Technology Unit

Patrick Wilson (Unit Leader)

1. Continue to support IT needs inherent to the activation
2. Work with HSIT to prepare and deploy a new batch of mobile workstations (laptops, shell systems, cell phones, etc.)

F. Finance Section Objectives

Eric Pormento (Section Chief)

1. Collect completed ICS 214 forms, Emergency Time Logs and Emergency Mileage Logs
2. Submit Personnel Cost Tracking Report
3. Develop COVID-19 Expenditures Report
4. Process Emergency Mileage Logs submitted by DOC staff

4. Operational Period Command Emphasis: Highest Priority Objectives

1. Expand and improve Case and Contact Tracing efforts
2. Maintain and expand Capacity for COVID-19 Testing across the county, focusing on shortening turn around time for results
3. Continue efforts to prevent and control COVID-19 in congregate settings
4. Ensure Branches are fully staffed and moving towards identifying and accomplishing their goals
5. Assess progress of containing COVID-19 using the State's new four-tier, COVID-19 guidelines for counties to reopen:
 - Widespread (Purple): Many non-essential indoor business operations are closed. More than 7 daily new cases (per 100,000). More than 8% positive tests.
 - Substantial (Red): Some non-essential indoor business operations are closed. 4 to 7 daily new cases (per 100,000). 5% to 8% positive tests.
 - Moderate (Orange): Some indoor business operations are open with modifications. 1 to 3.9 daily new cases (per 100,000). 2% to 4.9% positive tests.
 - Minimal (Yellow): Most indoor business operations are open with modifications. Less than 1 daily new cases (per 100,000). Less than 2% positive tests.
6. Develop and disseminate messaging for disproportionately impacted communities including Latinx, African-American, Asian/Pacific Islander and senior communities
7. Remain proactive with media communication efforts and develop a communication plan that involves community spokespeople
8. Continue to communicate with health care providers about issues related to COVID-19

5. General Situational Awareness – As of September 14, 2020 @ 1445 hours

- **15,424** confirmed positive COVID-19 cases in the County.

Note: Previously, the numbers of positive COVID-19 cases in Contra Costa County were based on "County of Residence" as reported through CalREDIE. During Operational Period #13, Contra Costa Public Health began using a different field ("Jurisdiction") because the data is more reliable. The change resulted in an increase of 27 positive COVID-19 cases. On the "Total Cases Reported by Day" graph, this increase is spread out over the entire curve because the additional cases were not received at any one time.

- Total of **192** Contra Costa County resident COVID-19 deaths
- Non-essential CCHS services have been postponed/cancelled until further notice.
- As of April 14, 2020, Public Health is using a color-coding system for Outbreak Investigations

Note: As of May 11, 2020, the Case and Contact Investigations Branch is reporting on Outbreak investigations and is using an updated color-coding system. Updates to definitions of color system changed on July 26, 2020.

- As of **September 14, 2020**
 - Red Status: **18** facilities
 - Confirmed outbreak based on CDPH definitions for congregate settings
 - Skilled Nursing Facility: 1 or more lab-confirmed residents or 3 or more staff with at least 1 lab-confirmed case and 1 probable case
 - Residential Setting: 3 or more residents/staff with at least 1 lab-confirmed case and 2 probable cases (symptomatic)
 - Yellow Status: **17** facilities
 - Probable outbreak that Contra Costa Public Health Department is actively monitoring
 - Skilled Nursing Facility: 1-2 lab confirmed staff
 - Residential Setting: 1-2 lab confirmed residents/staff
 - Blue Status facilities: **0** facilities
 - Facility accepting positive patients. Facility cleared, no known transmission
- State enacted declared emergency on Wednesday, March 4, 2020 (result of first CA death from Placer County).
- Board of Supervisors declared emergency on Tuesday, March 10, 2020.
- Health Officers from 6 bay area counties (7 local health jurisdictions) issued Health Officer orders for Shelter-In-Residence on Monday, March 16, 2020. The Order is in effect from March 17, 2020 to April 7, 2020.
 - On March 31, 2020, Shelter-In-Residence order was extended until May 3, 2020
 - On April 29, 2020, Shelter-In-Residence order was extended until further notice, effective May 3, 2020 at 11:59 PM.
- Mobile, COVID-19 testing site opened on March 21, 2020, for First Responders and Health Care workers
- Expansion of COVID-19 testing sites for the public. Available at San Pablo, Martinez, Pittsburg, Concord, Antioch and San Ramon. Opened new test site at Monument Corridor in Concord on June, 15, 2020.
- State operated COVID-19 walk-in testing locations for the public which opened on May 6, 2020 in Pinole, Walnut Creek and Brentwood. Specimens sent to Quest, so turn-around time will likely be longer than the CCHS locations.
- On Wednesday, March 25, 2020, schools announce that closures will extend until May 4, 2020. Schools will continue to practice distance learning.
- First death due to COVID-19 reported in Contra Costa County on Friday, March 20, 2020.
- On April 3, 2020, Contra Costa County Health Officer issued mass isolation and quarantine orders for people with COVID-19 and their close contacts.
 - On May 13, 2020, Mass Isolation orders updates and extends the required isolation period to 10 days after the onset of symptoms, updates the definition of close contacts and redefines the infectious period for asymptomatic, COVID-positive people.
 - On May 13, 2020 Quarantine orders updates the description of close contacts to include anyone who has been within six feet of a person with COVID-19 for at least 15 minutes during the infectious period.
- On April 4, 2020, CCHS confirms COVID-19 outbreak at SNFs.
- On April 17, 2020, Contra Costa County Health Officer issued Health Order for Members of the Public and Workers to Wear Face Coverings. To go into effect on April 22, 2020.
- On May 7, 2020, Contra Costa offers COVID-19 Testing for all county residents. First County in Bay Area to offer testing to anyone even if they do not have symptoms.
- On May 11, 2020, Contra Costa released Interim Guidance for Graduation Ceremonies.
- On May 15, 2020, Contra Costa Health Order - Highly-Regulated Vehicle-Based Gatherings which takes effect May 19, provides new options for religious organizations that have been unable to hold services since COVID-19 began spreading in the county, and for schools planning graduation ceremonies.

- On, May 29, 2020, Contra Costa Health Order - Requiring Testing of Residents & Personnel at Residential Facilities
- On June 2, 2020, Contra Costa Health Order – Updates to Shelter in Place to allow a limited number of additional business and additional activities to resume operating, effective June 3, 2020.
- On June 5, 2020, Contra Costa Health Order – Updates to Shelter in Place to reopen outdoor dining, outdoor pools and religious services with limitations, effective June 5, 2020.
- On June 16, 2020, Contra Costa Health Order – Updates to Shelter in Place to allow the County to move more quickly through Stage 2 of the State of California’s COVID-19 roadmap to recovery, by allowing additional business to resume or begin operating (including outdoor recreation activities, childcare facilities, outdoor dining, campgrounds, and outdoor pools).
- On June 29, 2020, Contra Costa to Postpone COVID-19 Reopening Timeline. CCHS will delay the opening of businesses and activities previously planned for July 1 until the COVID-19 outbreak in Contra Costa is better contained. This includes bars, personal services not involving close contact with the face, indoor dining, gyms and fitness centers, limited indoor leisure activities and museums, and hotels for tourism and individual travel
- On July 2, 2020, Press Release - Bay Area Residents Urged to Stay Home, Stay Safe from COVID-19 on the Fourth of July.
- On July 7, 2020, Contra Costa Health Order – Update to the Mass Quarantine Order. This order supersedes HO-COVID19-12 (May 13). This order updates the description of close contacts to include anyone who has been within six feet of a person with COVID-19 for at least 15 minutes during the infectious period.
- On July 7, 2020, Contra Costa Health Order – Updated Public Guidance for Face Coverings to align with current State guidance.
- On July 11, 2020, Contra Costa Social Distancing Order Amendment – Experiencing a significant increase in community transmission and illness and has been steadily rising since early June. Gatherings where people are together for a prolonged period of time, especially indoors, and settings where people remove their masks to eat and drink, appear to pose the highest risk for transmission at this time. No indoor dining for restaurants, but outdoor dining still allowed. Indoor religious services are prohibited. Indoor protests are prohibited. Social Bubble gatherings face coverings required for persons over age 2, except when eating and drinking, and all gatherings must take place outdoors.
- On July 28, 2020, Contra Costa’s Board of Supervisors approved an ordinance allowing county agencies to cite and fine people and businesses that violate COVID-19 health orders, such as face covering requirements. Fines for noncommercial violations could range from \$100 to \$500, depending on prior violations. Businesses could be fined \$250 to \$1,000. The ordinance designates the county Sheriff, Health Services Director and Director of the Conservation and Development Department as enforcement officers. Enforcing agencies have discretion to issue warnings before fines.
- On August 4, 2020, State of California allows elementary schools in Contra Costa to apply for a waiver to conduct in-person classes. However, CCHS not supporting elementary school waiver applications. Will not review any waiver requests until daily case rates, percent positive rates and hospitalizations in the county are stable or declining for at least 2 weeks
- On August 5, 2020, Contra Costa Health Order – Updated Mass Isolation Order with new guidelines for when and for how long to isolate, as well as who needs to be contacted that also need to follow updated Isolation and Quarantine orders.
- On August 18, 2020, Contra Costa began accepting waiver applications to allow in-person classes at local public and private elementary schools. No waivers have been approved as of August 24, 2020.
- On August 26, 2020, Contra Costa Health Order – Updated Social Distancing Order given the improvement, small changes have been made to the social distancing health order to allow certain business sectors to begin operating again outdoors such as personal care services that do not involve close contact with the face, gyms and fitness

centers, and hotels and short-term rental for personal or recreational travel, not just for essential business purposes.

- On September 4, Contra Costa Health Order – Updated Social Distancing Order, additional small changes have been made to the social distancing health order to ease restrictions on gatherings and business activities due to stabilization and improvement in new cases of and hospitalizations for COVID-19. Allows for specified activities involving children and youth, allows mining and logging businesses to operate, and clarifies that vehicle gatherings are allowed.
- Preparing for a sustained response, including consideration of future measures to limit and slow the spread of the disease in the community.
- Prepare - everyone in the community plays a role. Individuals and families, neighborhoods, community organizations, businesses, schools and all sectors to take steps to be prepared.

6. Site Safety Plan Required? Yes No

Approved Site Safety Plan(s) Located at: The Incident Command Post – located at 1220 Morello Avenue, Martinez. The Safety Plan is also available on Microsoft Teams and is included with this Plan as Attachment 1.

7. Incident Action Plan (the items checked below are included in this Incident Action Plan):

- | | | |
|---|--|--|
| <input checked="" type="checkbox"/> ICS 202 | <input type="checkbox"/> ICS 206 | <u>Other Attachments:</u>
<input checked="" type="checkbox"/> CCHS COVID-19 Response IAP and Supplementary Information OP#34 (9.14.20 to 9.21.20) |
| <input type="checkbox"/> ICS 203 | <input type="checkbox"/> ICS 207 | |
| <input type="checkbox"/> ICS 204 | <input type="checkbox"/> ICS 208 | |
| <input type="checkbox"/> ICS 205 | <input type="checkbox"/> Map/Chart | |
| <input type="checkbox"/> ICS 205A | <input type="checkbox"/> Weather Forecast/Tides/Currents | |
| | <input type="checkbox"/> | |

8. Prepared by:

Position/Title:

Gerald Tamayo

COVID Response Planning Section Chief
CCHS Emergency Preparedness Manager

Signature:

Gerald Tamayo

9. Approved by Incident Commander:

for Anna Roth

Anna M. Roth RN, MS, MPH

Erika Jensen

Health Director | Public Administrator | Public Guardian

Signature:

Operational Period: #34

09/14/2020 @ 0800 Hrs to 09/21/2020 @ 0800 Hrs

Date/Time: **September 14, 2020 / 1630 Hrs**

COVID-19 RESPONSE
INCIDENT ACTION PLAN (IAP) STAFFING & SUPPLEMENTARY INFORMATION
Operational Period #34
09.14.20 to 9.21.20



Contra Costa Health Services

Email questions to Covid.Operations@cchealth.org and Covid.Planning@cchealth.org.

The CCHS COVID-19 Incident Command Post (ICP) is located at 1220 Morello Avenue in Martinez

Attachment 1: Incident staffing for Operational Period #34, September 14, 2020 to September 21, 2020

Attachment 2: OES ICS 202 – ESF 5 (Emergency Management) for Operational Period #34, September 14, 2020 to September 21, 2020

Safety: Always provide for the health and safety of the COVID-19 ICP, field, and County Staff. Follow ICP registration, social distancing, masking, hygiene, and check-out protocols. Remain mindful of the weather conditions.

Date Created	09/14/20	WebEOC Event Name	2020-01-31 2019 Novel Coronavirus
Operational Period	#34 9/14/20 - 9/21/20	Prepared by	Gerald Tamayo / Steve Morioka
Event Start Date	3/16/20	Approved by	Incident Commander Anna Roth

ATTACHMENT 1 – INCIDENT STAFFING
Incident Staffing Operational Period #34, 09.14.20 to 09.21.20

All staff have the option to report in-person or virtual.

Section	Position	Name	Number
CCHS On-Call Staff			
Management	Incident Commander	Anna Roth	925-957-5403
Management	Deputy Incident Commander	Erika Jenssen	925-528-9086
Operations	Operations Section Chief	Ori Tzvieli	925-270-5895
Operations	Deputy Ops Section Chief	Matt Kauffman	925-250-4116
	Deputy Ops Section Chief	Kristian Lucas	925-383-3067
Management	PIO	Kim McCarl	925-723-2939
Management	PIO (Support Staff)	Karl Fischer	925-383-8845
		Will Harper	925-967-8125
Planning/Intelligence	Plans/Intel Section Chief	Gerald Tamayo	925 822-2547
	Plans/Intel Section Deputy Chief	Steve Morioka	925-250-8262
Logistics	Logistics Section Chief	Josh Sullivan	925-219-6847
Finance/Administration	Finance/Admin Section Chief	Eric Pormento	925-957-5562
OES Support oes-staff@so.cccounty.us	OES Duty Officer	Rotating	925-655-0100
			925-646-2441
CWS Support cws-staff@so.cccounty.us	CWS Duty Officer	Rotating	925-646-2441
Management COVID_Management@cchealth.org	Incident Commander	Anna Roth	925-957-5403
	Deputy Incident Commander	Erika Jenssen	925-528-9086
	Health Officer	Chris Farnitano	925-408-1547
	Public Information Officer	Kim McCarl	925-723-2939
			925-608-5463
	Safety Officer	Sylvia Elizarraraz	925-723-1681
	Strategic Policy Group	Chris Farnitano	925-408-1547
	Continuity of Services / Operations	Randy Sawyer	925-250-7905
	Community Engagement	Shannon Ladner-Beasley	925-957-2675
Operations COVID_Operations@cchealth.org	Operations Section Chief	Ori Tzvieli	925-270-5895
	Deputy Operations Section Chiefs	Matt Kauffman	925-250-4116
		Kristian Lucas	925-383-3067
	Administrative Technical Specialist	Hillary Wagner	925-655-3244
	Laboratory Branch Director	Melody Hung-Fan	925-370-5775
	Laboratory Branch Technical Specialist	Sergio Urcuyo	925-370-5866
	Laboratory Branch Coordinator	Adam Springer	925-335-3216
	Testing Branch Director	Sue Crosby	925-890-1708
	Testing Branch Technical Specialist	Gabriela Sullivan	925-370-5467
	Testing Branch Coordinator	Nicole Heath	510-393-2356
	Auxiliary Care & Treatment Branch Director	Maria Fairbanks	925-608-5441
	Auxiliary Care & Treatment Branch Technical Specialist	David Goldstein	925-608-5454
	Auxiliary Care & Treatment Branch Coordinator	Jenna Grossi	925-503-3073
CCRMC/Health Center/Detention Branch Director	Samir Shah	925-370-5475	

	CCRMC/Health Center/Detention Branch Coordinator	Shannon Dickerson Leah Carlon	925-370-5854 925-266-0858
	Case & Contact Investigations Branch Director	Marissa Elliott	925-494-5060
	Case & Contact Investigations Branch Technical Specialist	Sofe Mekuria	925-499-5238
	Case & Contact Investigations Branch Coordinator	Devra Lewis	925-250-6470
	Vaccine Procurement & Distribution Branch Director	Kristin Burnett	925-313-6734
	Vaccine Procurement & Distribution Branch Technical Specialist	TBD	TBD
	Vaccine Procurement & Distribution Branch Coordinator	Ruth Adams	925-313-6859
Planning & Intelligence COVID.Planning@cchealth.org	Planning Section Chief	Gerald Tamayo	925-822-2547
	Deputy Planning Section Chief	Steve Morioka	925-250-8262
	Deputy Planning Section Chief	La Kisha Russell	925-957-5248
	Deputy Planning Section Chief Resource Status Unit	Ann Cao	925-672-4714
	Situation Status Unit Lead	S'deja Alfred	925-608-5231
	Advance Planning Unit Lead	Geraldine Martinez	925-266-1203
	Documentation Unit Lead	Peter Ordaz	925-681-8141
	Logistics DOC.logistics@cchealth.org	Logistics Section Chief	Josh Sullivan
Supply & Procurement Unit		Noelia Gutierrez	925-316-9709
Personnel Unit		Carmen Piggee	925-316-9710
Call Center Unit		Jose Villegas	925-608-5200
Donations Unit		Trisha A. Johnson	925-655-3247
Hotels (non-treatment) & Properties Unit		Adrien Briones Clayton Johnson	925-723-1199 925-381-9737
Information Technology Unit		Patrick Wilson	925-332-8383
Finance & Administration DOC.finance@cchealth.org	Finance/Admin Section Chief	Eric Pormento	925-957-5562
	Finance/Admin Section Support	Gennifer Mountain	925-957-5560

INCIDENT OBJECTIVES (ICS 202)

1. Incident Name: Novel Coronavirus (COVID-19)	2. Operations Period: 34	Date From: 9/14/20 Time From: 0800	Date To: 9/21/20 Time To: 0800
<u>ESF-5 Emergency Management (OES)</u>			
7-Day Objectives: <ol style="list-style-type: none"> 1. OES will submit an ESF-5 Emergency Management ICS 202 for inclusion in the weekly CCHS DOC IAP 			
Ongoing Objectives:			
ACTION <ol style="list-style-type: none"> 2. Continue to host monthly multiagency coordination calls. 3. Continue to familiarize OES staff with new EOC technology and prepare EOC for activation readiness. Begin to introduce EOC response staff to new EOC operational flow. 4. Continue to support WebEOC requests for assistance. 			
COORDINATION and PLANNING <ol style="list-style-type: none"> 5. Continue to develop OES planning activities during COVID 19 with fire season, heat planning, power outages and ESF planning, such as, Transportation and Care and Shelter. These efforts include CCHS Liaisons and will be briefed out in the Advanced Planning meetings. Respond to EMMA requests. 6. Monitor need for ASL interpreters on behalf of our hearing-impaired community members so they can access and learn from live online briefings (CAO / CCHS) 7. Support and coordinate on behalf of people with intellectual and developmental disabilities and others with access and functional needs with the OES/EOC AFN Staff through weekly Cal OES AFN call, CWS Next-door outreach campaigns, AFN Steering committee meetings and OES/EOC AFN Coordinator collaboration. 8. Continue coordination with overall response activities by meeting with CCHS DOC staff and participating in twice weekly COVID operations calls. 9. Continue to coordinate with Operational Area partners on COVID 19 inquiries and updates (i.e. cities, utilities, school districts, etc.) 10. Continue to support VOAD coordination of CBOs who are actively participating in COVID 19 response (i.e. White Pony Express, Meals on Wheels, etc.) to serve our community. 11. Monthly ESF #1 Transportation planning meetings with DCD, PW, OES, Transit Agencies, Fire, AFN, CCHS, Red Cross and EHSD. Next meeting is scheduled for September 24 at 1:00 PM. 12. Support CAO on Recovery efforts. 13. Coordinate with Cal EOS on state programs such as Great Plates, Testing Sites, Project Home Key, Workforce Development and Housing for the Harvest Program. 14. Continue to participate in elected official community-based calls. 			
30 Day Objectives: <ol style="list-style-type: none"> 15. Continue to participate in the UASI Regional DSW project. Document will be presented at the November EM workgroup. 16. Department wide monthly COVID 19 Hours Tracking Log. 			
3. Operational Period Command Emphasis: Contact OES 24/7 by calling 925-655-0100 or the Duty Officer at 925-646-2441 or emailing oesdutyofficer@so.cccounty.us or for day to day business use oes-staff@so.cccounty.us .			
General Situational Awareness: See weekly Medical Health Branch ICS 202 / IAP for updated overall incident activities along with branch and unit objectives. Follow CCHS website for the latest dashboard data and information at https://www.cchealth.org .			
4. Site Safety Plan Required? Yes No ✘ Approved COVID-19 Safety Message (ICS 208) can be found in the CCHS IAP			
5. Incident Action Plan (the items checked below are included in the Incident Action Plan):			
<input checked="" type="checkbox"/> ICS 202 <input type="checkbox"/> ICS 203 <input type="checkbox"/> ICS 204 <input type="checkbox"/> ICS 205 <input type="checkbox"/> ICS 205A	<input type="checkbox"/> ICS 206 <input type="checkbox"/> ICS 207 <input type="checkbox"/> ICS 208 <input type="checkbox"/> Map/Chart <input type="checkbox"/> Weather Forecast (in daily Sit. Stat. Report)	Other Attachments _____ _____ _____ _____	
6. Prepared by: Marcelle Indelicato 925-655-0118 Position/Title: Senior Planner			Signature: On File
7. Approved by: Incident Commander: Name: Health Officer			Signature: On File
ICS 202	IAP Page	Date/Time: 9/10/2020	