COVID-19 PUBLIC HEALTH GUIDANCE
FOR INDIVIDUALS WITH ACCESS AND FUNCTIONAL NEEDS
March 9, 2020

This guidance is based on what is currently known about the transmission and severity of coronavirus disease 2019 (COVID-19). The California Department of Public Health (CDPH), will update this guidance as needed and as additional information becomes available.

This document is intended to be statewide guidance to help both individuals and caregivers inform their decision making. Decisions by individuals and caregivers should be determined by the specific circumstances in local jurisdictions.

Background
COVID-19 is a respiratory illness caused by a novel virus that has been spreading worldwide. Community-acquired cases have now been confirmed in California. We are gaining more understanding of COVID-19’s epidemiology, clinical course, immunogenicity, and other factors as time progresses, and the situation is changing daily. CDPH is in the process of monitoring COVID-19, conducting testing with local and federal partners, and providing guidance and resources to prevent, detect and respond to the occurrence of COVID-19 cases in California.

At this time, community transmission of COVID-19 has occurred in California. Individuals with Access and Functional Needs should prepare for possible impacts of COVID-19 and take precautions to prevent the spread of COVID-19 as well as other infectious diseases, including influenza and gastroenteritis.

Illness Severity
The complete clinical picture with regard to COVID-19 is not fully understood. Reported illnesses have ranged from asymptomatic to severe, including illness resulting in death. Older people and people with certain underlying health conditions including heart disease, lung disease, and diabetes, for example, seem to be at greater risk of serious illness.
INDIVIDUAL & CAREGIVER PREVENTION MEASURES

Individuals and caregivers can take steps now to slow the spread of respiratory infectious diseases, including COVID-19. CDPH recommends implementing the following steps:


- Stay home when sick.
  - If you have an elevated temperature, remain at home until fever has been gone for at least 24 hours without the use of fever-reducing medicines such as acetaminophen.
  - Seek immediate medical care if symptoms become more severe, e.g., high fever or difficulty breathing.

- Use “respiratory/cough etiquette”.
  - Cover cough with a tissue or sleeve. See CDC’s Cover Your Cough page for multilingual posters and flyers, posted at the bottom of the webpage.
  - Provide adequate supplies within easy reach, including tissues and no-touch trash cans.
  - Wear a facemask if you are sick and when you are around other people (e.g., sharing a room or vehicle) and before you enter a healthcare provider’s office.

- Wash hands frequently for at least 20 seconds.
  - Encourage hand washing by individual, caregivers, family, and friends.
  - Provide hand sanitizers containing at least 60% alcohol to supplement hand washing.
  - Routinely clean frequently touched surfaces.

- Maintenance of Durable Medical Equipment.
  - Make sure to clean medical supplies and equipment frequently and in accordance with product manufacturer guidance.

- Routine cleaning of high-touch surfaces.
  - Examples: tables, doorknobs, light switches, handles, desks, toilets, faucets, sinks.
Clean with household cleaners and EPA-registered disinfectants that are appropriate for the surface, following label instructions. Labels contain instructions for safe and effective use of the cleaning product including precautions you should take when applying the product, such as wearing gloves and making sure you have good ventilation during use of the product.

- Environmental Cleaning and Disinfection recommendations can be found on CDC’s website.

- See CDC’s web page on Preventing the Spread of Coronavirus Disease 2019 for more guidance regarding the prevention of disease in an individual’s home, residential communities and adult day centers.

- Make sure you have access to the following entities:
  - Any 24/7 health lines provided by your health providers and health plans.
  - Specialty health care providers if needed.
  - Community-based organizations, transportation providers, health plans, care coordinators, nurse hotlines, telehealth services, etc. should you need assistance.
  - Necessary food and supplies delivery.

- Develop plans with service providers who make regular home visits to minimize exposure (personal assistant, attendant services, home health, hospice, independent living counselors, etc.).

- Consider the use of phone check-ins, video chat check-ins, use of neighbors for health and safety checks to minimize exposure.

- Understand the emergency plans of facilities visited on a daily or regular basis, such as dialysis centers, blood treatment centers, or chemo and other infusion therapy sites.

**INDIVIDUALS AND CAREGIVERS WITH STAFF**

Ensure your employees are prepared and are taking all necessary precautions. This includes American Sign Language (ASL) interpreters, personal care assistants, and anyone else regularly providing assistance to an individual. Resources are available

- Employees with a fever should not work.

- Facility employees who are ill should be excluded from work for at least 24 hours after a fever is resolved without antipyretics and follow federal Centers for Disease Control and Prevention (CDC) and/or local health
department guidelines for returning to work.

• Once facility employees return to work, reinforce the importance of performing frequent hand hygiene as a standard precaution.

• Recommend excluding employees, students, and volunteers who are not critical to providing care from working in areas experiencing outbreaks of COVID-19.

The comprehensive guidance from the CDC, *Preventing the Spread of Coronavirus Disease 2019 in Homes and Residential Communities*, applies to all who anticipate close contact with persons with possible or confirmed COVID-19 in the course of their work. This guidance discusses prevention steps for:

1) People with confirmed or suspected COVID-19 (including persons under investigation) who do not need to be hospitalized.

2) People with confirmed COVID-19 who were hospitalized and determined to be medically stable to go home.

3) Recommended precautions for household members, intimate partners, and caregivers in a nonhealthcare setting.

**ADULT DAY PROGRAMS AND ADULT DAY HEALTH PROGRAMS**

The California Department of Public Health and the Department of Social Services have issued this guidance related to Adult and Senior Care Programs.

**Prevent the introduction of respiratory germs INTO facilities.**

• Limit visitors to the facility by not allowing those with symptoms of fever and/or respiratory infection.

• Limit visitors to the facility by not allowing those who have a travel history over the course of the last 14 days to an area identified by the CDC as Level 3 Travel Health Notice (see *Evaluating and Reporting Persons Under Investigation* for an updated list of areas).

• Recommend excluding those who have been in close contact with someone diagnosed with COVID-19 from the facility for 14 days from the day of their last exposure.

• Ensure sick leave policies allow employees to stay home if they have symptoms of respiratory infection.

• Employees with any fever and/or respiratory infection symptoms should not be at work.
• Consider screening employees for respiratory infection symptoms before they start their shift.

**Prevent the spread of respiratory germs WITHIN facilities.**

• Keep clients and employees informed.
  o Describe what actions the facility is taking to protect them, including answering their questions and explaining what they can do to protect themselves and their fellow residents.

• Designate a time to meet with your staff to educate them on COVID-19 and what they may need to do to prepare. The following may be useful resources to share information about COVID-19:
  o [How COVID-19 Spreads](#)
  o [Clinical management of COVID-19 patients](#)
  o [Infection prevention and control recommendations for COVID-19](#)

• Minimize congregate living activities and outside programming.
  o Ensure that residents are eating their meals in their rooms instead of in congregate settings.
  o Minimize the number of congregate activities especially if your county has community-transmission cases.