

Emergency Operations Center

5/1/2020

Jake Hanson, MPH
Executive Director
California Conference of Local Health Officers

Dear Mr. Hanson,

Dr. Thomas Boo, as part of our Unified Command for the Mono County/Town of Mammoth Lakes EOC, has asked me (EOC Director), to submit for you consideration, an executive summary of our readiness to enter Stage II Modifications of Governor Newsom's Stay-At-Home Order.

This executive summary will follow California's 6 Key Indicators for Modifying Stay-at-Home Order, providing appendices to demonstrate existing capacity to respond to the COVID-19 public health emergency within Mono County presently, and in the future.

On March 15, 2020, Mono County and the Town of Mammoth Lakes established a joint Emergency Operations Center (EOC) to support the COVID-19 public health emergency within Mono County to support the Governor's four pre-immunity management objectives:

- Ensure our ability to care for the sick within our hospitals;
- Prevent infection in people who are at high risk for severe disease;
- Build the capacity to protect the health and well-being of the public; and
- Reduce social, emotional and economic disruptions

Consideration of local factors further refined these objectives through five standing strategic goals of the EOC:

- 1. Provide for Public and Response workforce safety.
- 2. Mitigate the speed of COVID-19 spread (flatten the curve)
- 3. Deliver timely, accurate, and transparent information about COVID-19 spread and how it is being managed.
- 4. Mitigate phobia with facts.

5. Conduct economic recovery based on epidemiologic risk such that future infection rates do not require public health mitigations which would halt or reverse economic recovery.

Our sustainable capacity for intentionally managing to outcomes is accomplished through an interagency Type III All- Hazards Incident Management Team (IMT) made up of local government personnel. The IMT has been trained through CalOES using SEMS and NIMS standards.

We have flattened our infection rate and built exemplary capacity in community support, public health contact tracing & testing, hospital surge capacity, pre/post hospital patient support, non-congregate facility capacity, emergency services support, and ample PPE reserves. We know our capacity limits and trigger points using a fully integrated case management database. To this we have now developed a clinically defined set of business sector-specific mitigations that are implementable through extensive collaboration with our business owners and associations.

When the Governor is ready, we have waiting an online portal for business owners to self-report compliance with public health mitigations, and we'll use that platform for quality assurance and control of any sector-specific infection hot-spots. To the extant we can be ready for Stage II, we are ready. Following are the Governor's six-key indicators and our evidence of readiness.

At the conclusion of our appendix-supported overview in the 6 Key Indicators, please find the clinically based "Guidelines for Business Reopening." This draft document (Appendix 5c) from Dr. Boo represents our intent to advance behind Governor Newsom's modification of the Stay-At-Home Order.

Respectfully submitted,

Frank Friends

Frank L. Frievalt

EOC Director

Fire Chief

Mammoth Lakes Fire

Protection District

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Mono County Evidence of Readiness for Reopening

California's Modifying Stay-at-Home Order Key Indicator 1:

The ability to monitor and protect our communities through testing, contact tracing, isolating, and supporting those who are positive or exposed.

Key Questions:

How prepared is our state (Mono County) to test everyone who is symptomatic?

Mono County EOC, Mono County Public Health Department (MCPHD) and Mammoth Hospital have worked diligently to increase COVID-19 testing capacity in order to test everyone who is symptomatic. Currently, 244 tests have been completed with 26 positive and 1 death. In an effort to increase COVID-19 testing, the EOC and MCPHD established a 211 Nurse Hotline for testing referrals, and Mammoth Hospital has worked tirelessly to ramp up their local lab capabilities to provide same day COVID-19 test results. The EOC is working to increase COVID-19 testing material inventory to support our ongoing COVID-19 countywide testing referrals. MCPHD in conjunction with our EOC field support teams, are in position to assist Mammoth Hospital with a surge in testing or to deploy field COVID-19 testing missions.

Do we (does Mono County) have the ability to identify contacts of those who are positive to reduce further transmission?

MCPHD is in a position to meet Mono County's contact tracing demand to reduce further COVID-19 transmission and spread. Under the direction of Mono County's Health Officer, MCPHD has increased their contact tracing capacity by 300 to 400 percent, allowing MCPHD to readily respond in a timely way to track and trace contacts of those who are positive. MCPHD has an established COVID-19 contact tracing protocol and an assigned lead case investigator to oversee local contact tracing efforts. Lastly, an important tool in this effort includes a locally developed database, Mono County Care and Case Management Database, that links the Nurse 211 Hotline, Mammoth Hospital and MCPHD to epidemiological contact tracing findings and CalREDIE results.

The EOC has secured lodging for persons requiring housing while under quarantine or isolation. This lodging also serves as a resource for at-risk individuals who require alternate housing as a result of COVID-19. MCPHD monitors persons placed in quarantine and isolation, including those staying at the alternative lodging locations. Each person will be evaluated for additional wraparound services to include patient monitoring and meal delivery.

California's Modifying Stay-at-Home Order Key Indicator 2:

The ability to prevent infection in people who are at risk for more severe COVID-19.

Key Questions:

Are older Californian's (Mono County residents) and the medically vulnerable living in their own homes supported so they can continue appropriate physical distancing?

The EOC established a Community Support Branch designed to support those who are older and/or are medically vulnerable while they practice physical distancing. The Community Support Branch includes the cooperation of local non-profits and social services to deliver a wide scope of wraparound services that address the varying complexity of needs. This collaboration provides case management, meal delivery, food distribution, rent subsidy, prescription medication delivery, face-covering distribution, and COVID-19 education. Over 4,000 households and 15,000 persons have received food security assistance through the Community Support Branch, and close to 600 cloth face coverings have been distributed countywide. In addition, all residents over the age of 65, along with those who have identified as having access and functional needs or comorbidity concerns, have been proactively contacted to identify any additional support requirements.

The EOC has secured alternative lodging for those persons displaced due to COVID-19, and also provides lodging for those requiring alternative care, isolation, and/or quarantine. With this lodging arrangement, meals will be delivered and daily contact with a Public Health Nurse will be provided. The field support teams are in position to provide additional medical evaluation, patient monitoring and follow-up as directed. Moreover, the Care and Case Management Database was designed to include questions that identify needs like food, medication and other supports. Once identified, the database then links the patient to the Community Support and Public Health Branches ensuring continuity of care.

Have we (has Mono County) developed a plan to quickly identify and contain outbreaks in facilities housing older Californians, those living with disabilities, those currently incarcerated, and those with co-morbidities?

Mono County does not have skilled nursing facilities or senior living communities. Those who are living with disabilities and/or co-morbidities will have the full support of the Community Support Branch to address their needs while adhering to the stay-at-home order. Those who have been identified through the access and functional needs database are checked on through community efforts such as Community Emergency Response Team (CERT), senior meal delivery program, Neighbor to Neighbor program, and through established case management services like Kern Regional Center. Mono County Sheriffs Department has a COVID-19 protocol to prevent, identify and address COVID-19 outbreaks.

California's Modifying Stay-at-Home Order Key Indicator 3:

The ability of the hospital and health system to handle surges.

Key Questions:

Do we have adequate bed capacity, staff and supplies such as ventilators and masks?

The EOC continues to work in coordination with Mammoth Hospital to monitor their daily capacity to treat patients; including those being treated for COVID-19 or COVID-19 suspected illness. Mammoth Hospital has established surge overflow care sites that would increase the hospital's capacity by 157 percent. The hospital has increased their ventilator capacity by 33 percent and their Personal Protective Equipment (PPE) inventory can sustain a surge level for over 75 days. The EOC and Medical Health Operational Area Coordinator (MHOAC) has additional PPE inventory that can support the hospital's PPE needs if patient surge exceeded the hospital's current inventory. Both the hospital and EOC have ordered oxygen concentrators that would allow patients to be supported at home with medical monitoring and case management. Moreover, the EOC has purchased pulse oximeters, thermometers and other medical consumables to support field assessment teams and offsite patient monitoring. EOC Unified Command, Health Officer and Mammoth Hospital continue to assess capacity and supply needs daily.

Can our healthcare system adequately address COVID-19 and other critical healthcare needs?

Mammoth Hospital has a detailed Hospital Reopening plan that has key indicators that support a phased reopening. Their plan also provides key indicators that would trigger a reinstatement of a more restrictive phase to support patient care. Mammoth Hospital has advised the EOC that they are in a position to support a phased reopening of their hospital beginning May 4, 2020 that allows for elective surgeries and other important non-COVID related medical care. The hospital's decision was based on the above key considerations in combination with other identified key indicators that support reopening the hospital. The hospital is involved in the EOC as a branch under Operations and has daily contact and reporting to the EOC. This allows for quick support in the event of a COVID-19 patient surge. The link between MCPHD, Community Support and the hospital is strengthened through the shared Care and Case Management database that provides wraparound patient care and monitoring.

California's Modifying Stay-at-Home Order Key Indicator 4:

The ability to develop therapeutics to meet the demand.

Key Questions:

Have we built a coalition of private, public and academic partners to accelerate the development of therapeutics?

This important indicator is addressed at the State level and Mono County will support this effort as directed by the State.

Have we identified potential therapeutics that have shown promise?

This important indicator is addressed at the State level and Mono County will support this effort as directed by the State.

California's Modifying Stay-at-Home Order Key Indicator 5:

The ability for businesses, schools and childcare facilities to support physical distancing.

Key Questions:

Have we (Has Mono County) worked with businesses to support physical distancing practices and introduced guidelines to provide health checks when employees or the general public enter the premises?

The Town of Mammoth Lakes and Mono County are prepared to work with, and support, physical distancing practices and provide guidelines that support a safe reopening. The EOC established an Economic Recovery Branch that has worked with local businesses, Chamber, MCPHD and Mammoth Hospital to develop local guidelines that support mitigation efforts to reduce the transmission and spread of COVID-19.

MCPHD is working with First 5 to help support childcare providers with COVID-19 mitigations and best practices. Guidelines are being developed in coordination with local childcare providers and MCPHD and the Health Officer are working closely with school superintendents to identify mitigations for the 2020/21 school year.

Do we have supplies and equipment to keep the workforce and customers safe?

The EOC is ordering supplies to help keep our workforce and customers safe. Supplies include hand sanitizer, disposable masks, cloth face coverings, and gloves. The Mono County Health Officer has issued a facial covering order that requires all persons, including essential workers, to wear face coverings with a few exceptions. The EOC Logistics Section is planning for the countywide distribution of the above-mentioned supplies and the Joint Information Center is working on communication and signage for businesses that supports new guidelines to reopening. The EOC will continue to monitor and adjust its response to support mitigation efforts.

California's Modifying Stay-at-Home Order Key Indicator 6:

The ability to determine when to reinstate certain measure, such as the stay-at-home orders, if necessary.

Key Questions:

Are we (Mono County) tracking the right data to provide us an early warning system?

Early warning is incredibly important to the successful and safe reopening of Mono County. The EOC, Health Officer, MCPHD and Mammoth Hospital have developed local key indicators that support a phased reopening that will also indicate when previous mitigation efforts need to be reinstated. Key indicators are currently being tracked and monitored between MCPHD and Mammoth Hospital. Mammoth Hospital has defined their surge capacity as 1 patient vented and unable to transfer, with 5 positive admissions. In addition, the EOC is tracking transfer hospital capacity and neighboring counties' and states' positive COVID-19 cases and hospital capacity.

Do we have the ability to quickly communicate the need to reinstate these measures?

Mono County has the ability to rapidly communicate the reinstatement of mitigation efforts through the EOC structure.

Additional references for Mono County's response to COVID-19

https://coronavirus.monocounty.ca.gov/

https://monocounty.quickbase.com/db/bqe3sh4ds?a=showpage&pageid=3&ifv=1

https://coronavirus.monocounty.ca.gov/pages/briefing

https://coronavirus.monocounty.ca.gov/pages/directives

https://coronavirus.monocounty.ca.gov/pages/businesses

https://coronavirus.monocounty.ca.gov/pages/residents

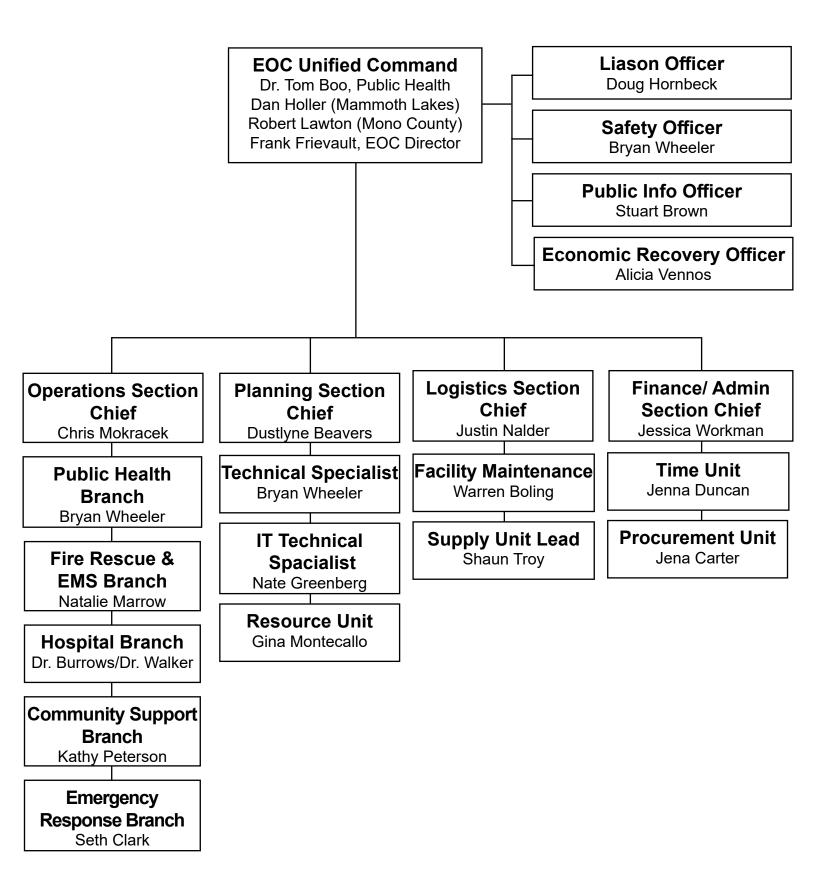
Key Indicator 1 Appendix

Appendix 1a - EOC Organization Chart

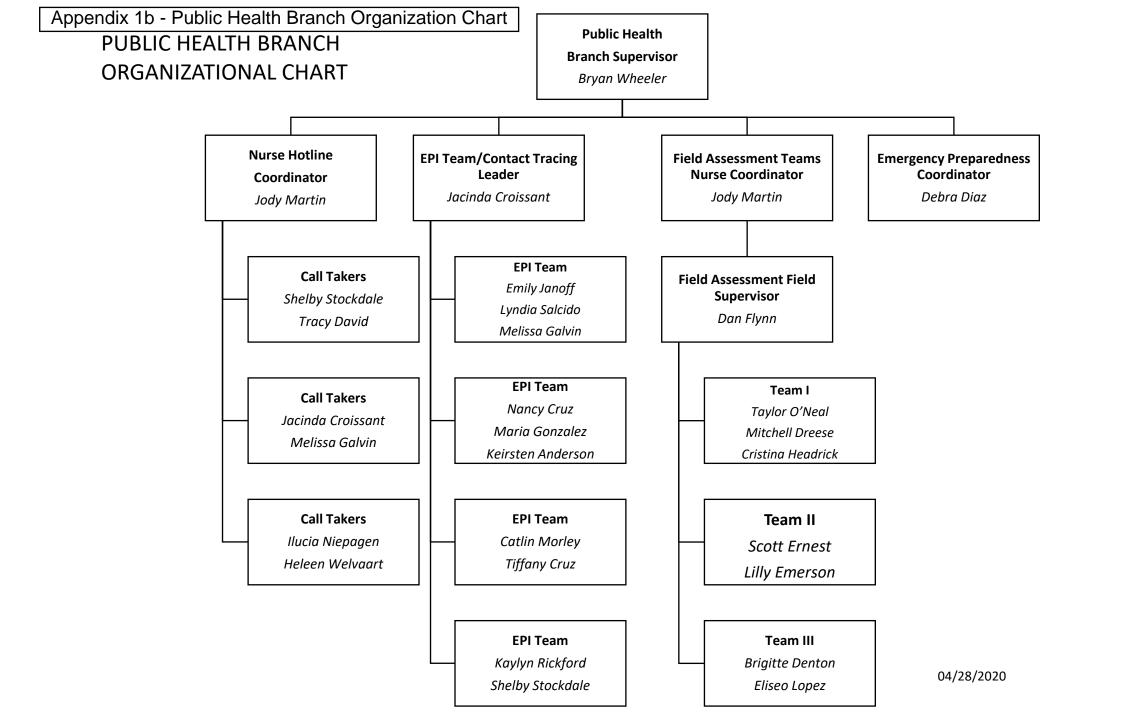
Emergency Operations Center Organization Chart

Incident Name: Mono COVID-19

Date From: 04/15/2020 Date To: 04/16/2020



Prepared By: Dustlyne Beavers Position/Title: Planning



Appendix 1c - Continuum of Care Workflow

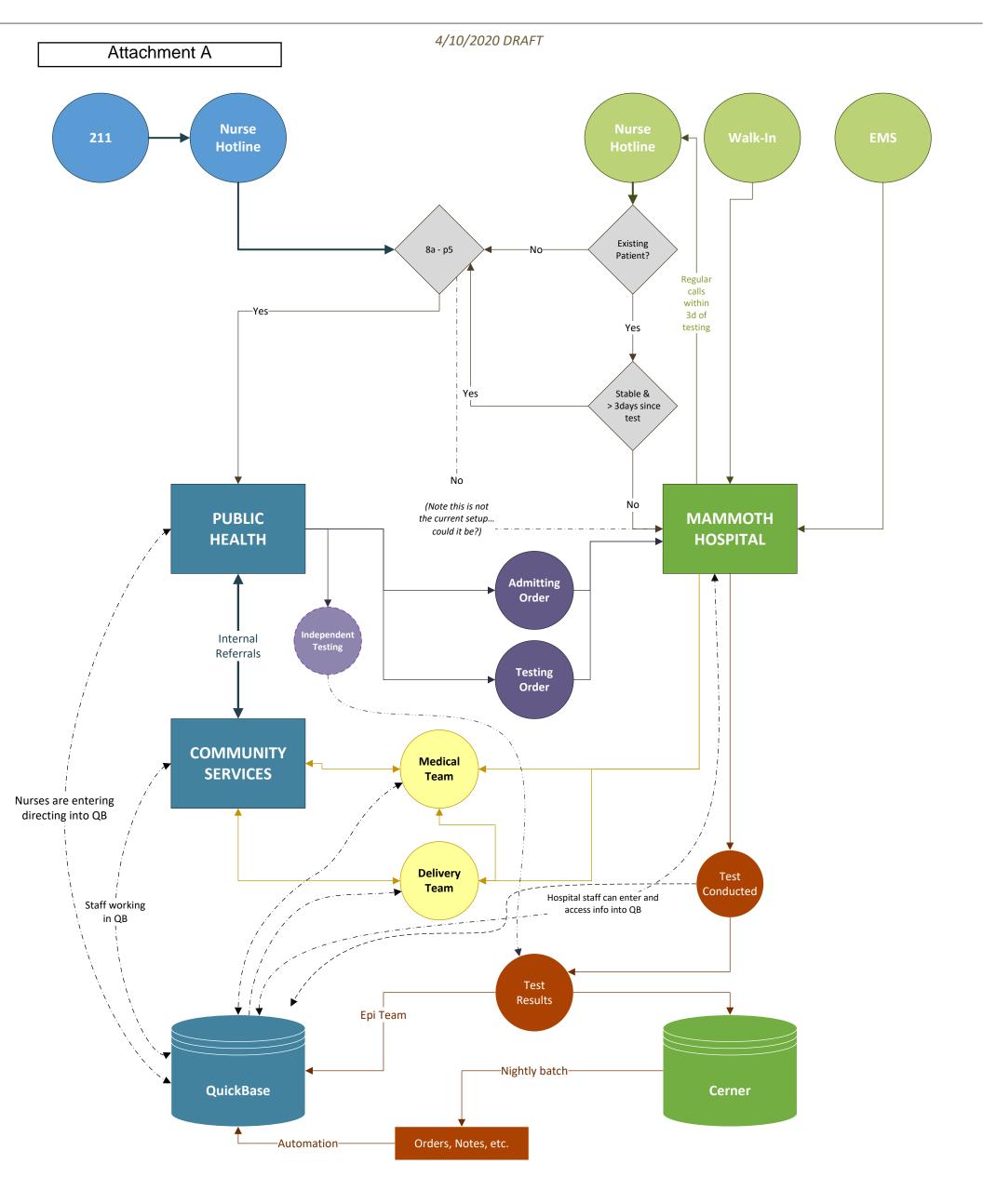
COVID CONTINUUM OF CARE

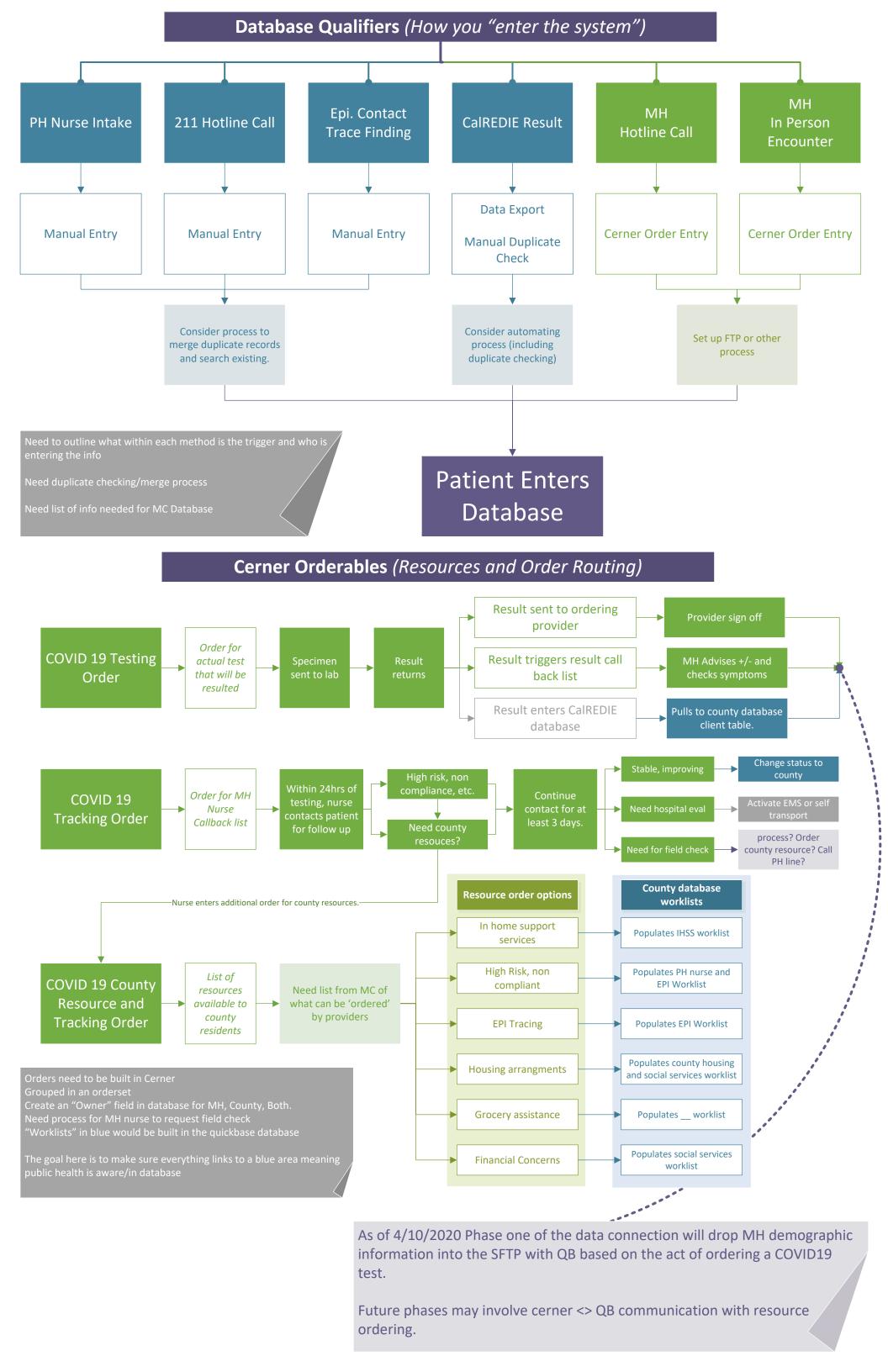
Conceptual Workflow

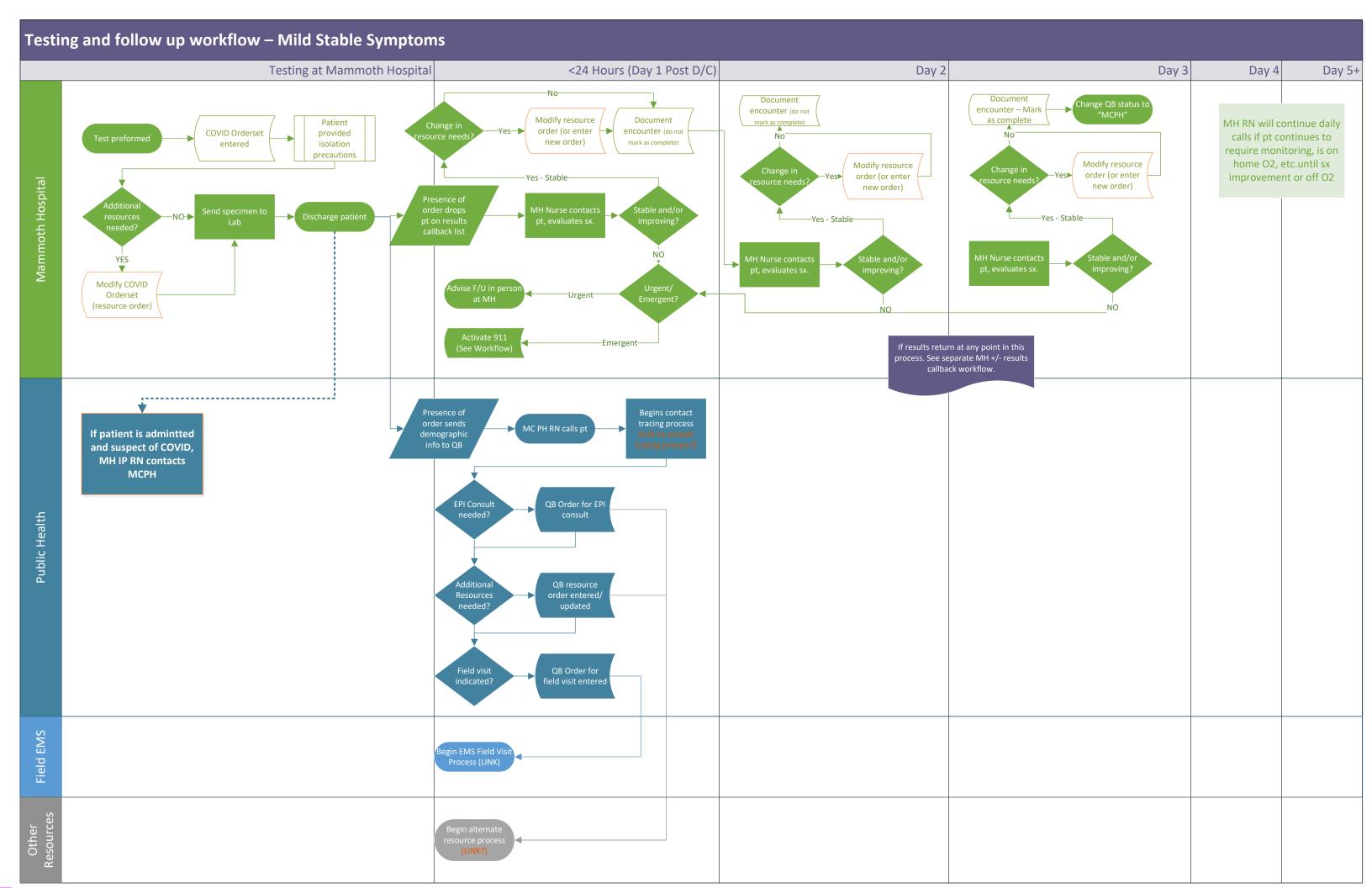


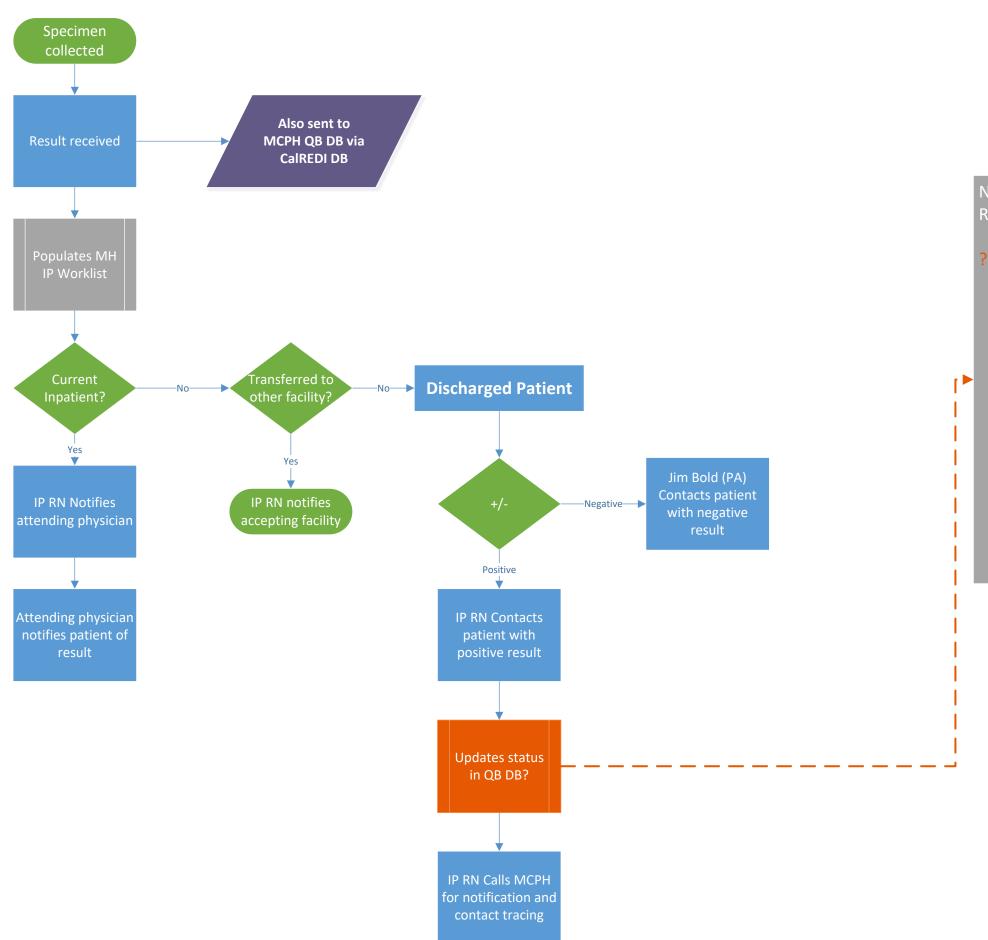












Need to confirm with MCPH and Staci Brock – Infection prevention RN at MH

?? Will Staci be updating the QB DB as well?

Appendix 1d - Case and Contact Investigations Health Department: 760-924-1830 **EOC** ER: (760)924-4076 Dr. Tom Boo Nurse Line: 211 Bryan Wheeler **DOC Unified Command** Portal: https:// Dr. Tom Boo Bryan Wheeler coronavirus.monocounty.ca.gov/ Sandra Pearce **Nurse Triage Line** Jody Martin (RN) **EOC Special Projects** Lisa Wray (RN) Jack Huang **PIO/Safety Officer** Heleen Welvaart (RN) Dr. Rick Johnson Lucia Niepagen (RN-FNP)(s) Tracy David (RN) Logistics/ **Finance Operations** Communications Kim Bunn Bryan Wheeler Sandra Pearce Shannon LeGrand **Case Invesigation & Contacts Nurse Triage Line** Website **Jacinda Croissant PHN Sit Reps Backup Social Media** Back Up (eff. 4/19) **Nate Greenberg Emily Janoff MPH** Keirsten Anderson Jeff Simpson Melissa Galvan (RN)(s) Oliva Hollenhorst Lynda Salcido (RN) Shelby Stockdale PHN Melissa Galvan (RN)(s) Jacinda Croissant PHN Nancy Cruz (s) Maria Gonzalez (s) **Translation Services** Supplies (PPE) Backup **Public Health Messaging/JIC** Keirsten Anderson Leah Roman Leah Roman Sandra Pearce Zoe Anderson Nancy Cruz Shannon LeGrand Lauren Kemmeter Caitlin Morley (s) Maria Gonzalez Tiffany Cruz (MA) Olivia Wilson Kaylyn Rickford (MA) Shelby Stockdale (back up)

Businesses and Restaurants
Louis Molina
Chris Babula

Case and Contact Investigations

We advise all contact investigators to conduct interviews over the phone if possible. If it is necessary to conduct the interview in person, please let one of the PHN's know if this situation and Review CDC's interim guidelines for in person investigations for PUI's (Person under investigation) and for contacts at https://www.cdc.gov/coronavirus/2019-ncov/php/guidance-evaluating-pui.html

Review case and CalREDIE incident if applicable		
Review dates of exposure and determine approximate incubation		
Incubation period dates (2-14days after last exposure):to		
Have Mono COVID-19 Case & Contact Investigations Chart available to fill in during or after		
interview.		
IF interpretation is needed, set up a time for you and the interpreter to call the contact.		

Follow this document for script reference and process and procedures.

Step 1: Cold Call Intro

Step 2: Response if Asymptomatic or Symptomatic

Step 3: Precautions Education

Step 4: Follow up: Asymptomatic and Symptomatic

Call PHN's if you have any questions or concerns:

Jacinda Croissant: 720-220-2124 or jcroissant@mono.ca.gov

Shelby Stockdale: 775-233-3835 or sstockdale@mono.ca.gov

Always Document

- 1) All Case or Contact investigations and any interaction thereafter, complete an encounter for that client in the Portal/Quickbase system either during your call/visit or after speaking with client.
- 2) All Investigation complete Investigation Chart (pg.8/9) and email Jacinda chart, Send email secure by ending the email subject with "secure".
- 3) If you have CalREDIE, please assign the case to yourself if not already assigned and complete CalREDIE fields if investigating a positive COVID case. If you do not have CalREDIE and you were assigned a positive COVID case, please email Jacinda Croissant (jcroissant@mono.ca.gov) completed investigation charts and she will enter them into CalREDIE. Send email secure by ending the email subject with "secure".

If unable to reach any contacts or cases, just indicate what date phone calls were attempted.

STEP 1:

• Introduce self and title, calling on behalf of Mono County Health Department. Is this a good time to talk?

Confirm identifying information:

- I would just like to make sure I am speaking to the right person; can you confirm your full name and date of birth (if provided before call).
- In case we get disconnected and/or I need to reach you again in the future this this phone number the best number to reach you at? Do you have a preference as to what time of the day to reach you?
- The reason for my call is that there is a possibility that you were exposed to someone who [had or may have] Coronavirus/COVID 19 and you were identified as someone who may have had exposure to this person (name must remain confidential). To minimize the spread of the virus, I need to gather some information from you which will assist us in protecting the community and know how we can better support you and your wellbeing. Your detailed information will remain confidential and only utilized for the health departments' investigations. Non-identifying information will be utilized for data purposes. I appreciate your time to speak with me, the information you share with me is very valuable and with assist us in minimizing possible spread of Coronavirus/COVID 19.

• General information about COVID19 and how its spread:

- o There is currently no vaccine to prevent Coronavirus disease 2019 (COVID-19).
- The best way to prevent illness is to avoid being exposed to this virus.
- The virus is thought to spread mainly from person-to-person.
- Between people who are in close contact with one another (within about 6 feet).
- o Through respiratory droplets produced when an infected person coughs or sneezes.
- These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.

Conduct Investigation (refer to pg.8/9)

- Obtain date of birth if none provided
- Where are your places of employment/school? Last date worked/attendance?
- Any other places that you frequent on a regular basis?
- When did you start self-quarantine or self-isolation?
- Names of household members and ages
 - We may or may not need to follow-up with your household contacts. If we do need to check in on the status of their health, can you provide phone numbers of your household contacts or tell us the best way for us to reach them if necessary?
 - Are you or anyone in your household:
 - Someone who has serious chronic medical conditions like:
 - Heart disease
 - Diabetes
 - Lung disease
 - An Immune compromised individual
 - (An Older adult- previously identified when confirmed age of contact and household members)

STEP 2: Do you or anyone in your household feel sick or have any symptoms?

YES

Are you experiencing any of the following	ng symptoms?
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- Fever: onset_____, recorded temperature(s)-
- Cough: onset
- Shortness of breath: onset

speak with an RN 8am-5pm for guidance.

Other symptoms:_____

We may need you to go into the hospital for testing but as the health department, we will coordinate when and where we will want to test you (at home versus hospital).

IF you have already been tested, when were you tested?

Seek medical care right away if your illness is worsening (for example, if you have difficulty breathing) or call 211 to

Call 911 or if you plan on going to hospital, call before going to the doctor's office or emergency room (760)
 924-4076, let them know your symptoms and they will tell you what to do.

Wear a face mask/face covering: If you can't put on a mask/ covering, try to keep a safe distance from other people (at least 6 feet away). We will utilize the hospital drive through if we need testing completed at the hospital.

Isolation Order (Do not leave house):

Stay isolated in your home until you have met the following criteria:

- You have had no fever for at least 72 hours (that is three full days of no fever without the use medicine that reduces fevers) AND
- other symptoms have improved (for example, when your cough or shortness of breath have improved) AND
- at least 7 days have passed since your symptoms first appeared

Remember you may develop symptoms 2-14 days after exposure. Your last date of your incubation period (approximate last date that you may develop symptoms) is ______. It is important to stay home during this time. Not going out to get groceries or mail, do you have someone that can help with getting your essentials or would you like a referral?

Stay home if you develop any symptoms, isolate yourself from household contacts and call 211 to speak with a nurse. You can call the 211 nurse line to speak with a nurse any day of the week 8am-5pm. Or call your provider for clinical guidance.

If a close contact, can refer for testing, call ED to arrange testing/enter referral in portal

Call 911 or go to emergency room (have someone call ahead if possible) if you have the following symptoms:

- Difficulty breathing or shortness of breath
- Persistent pain or pressure in the chest
- New confusion or inability to arouse
- Bluish lips or face

Any Questions so far?

Step 3: Discuss with all Case Contacts

Steps you can take to reduce your risk of getting sick or spreading illness to others

- IF SICK: People who are mildly ill with COVID-19 are able to recover at home. Do not leave the home, except to get medical care. Do not visit public areas. Keep space between yourself and others (6ft if possible) in the home and wear a face mask if available. Get assistance from a family member or a friend to get you essential supplies (food, medicine, etc.). If you do not have anyone to help, we can look into community resources and get you the needed assistance. Have enough household items and groceries on hand so that you will be prepared to stay at home for an extended period of time. Be sure you have over-the-counter medicines and medical supplies (tissues, etc.) to treat fever and other symptoms. Most people will be able to recover from COVID-19 at home. Stay away from others: As much as possible, you should stay in a specific "sick room" and away from other people in your home. Use a separate bathroom, if available. Physical isolation if sick or at high risk, but maintain social connections through the phone or Facetime etc. Stay in touch with others by phone, email, or other on-line tools (like Skype and Facebook).
- **Do not share:** Do not share dishes, drinking glasses, cups, eating utensils, towels, or bedding with other people in your home.
- Wash thoroughly after use: After using these items, wash them thoroughly with soap and water or put in the dishwasher.
- **Limit contact with pets & animals:** You should restrict contact with pets and other animals, just like you would around other people.
 - Although there have not been reports of pets or other animals becoming sick with COVID-19, it is still recommended that people with the virus limit contact with animals until more information is known.
 - When possible, have another member of your household care for your animals while you are sick with COVID-19. If you must care for your pet or be around animals while you are sick, wash your hands before and after you interact with them.
- Wash hands: Wash your hands often with soap and water for at least 20 seconds. This is especially important after blowing your nose, coughing, or sneezing; going to the bathroom; and before eating or preparing food.
- **Hand sanitizer:** If soap and water are not available, use an alcohol-based hand sanitizer with at least 60% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry.
- Cover your coughs and sneezes. Cover your mouth and nose with a tissue when you cough or sneeze. Throw used tissues in a lined trash can. Immediately wash your hands with soap and water for at least 20 seconds. If soap and water are not available, clean your hands with an alcohol-based hand sanitizer that contains at least 60% alcohol.
- Clean and disinfect: Routinely clean high-touch surfaces in your "sick room" and bathroom. Let someone else clean and disinfect surfaces in common areas, but not your bedroom and bathroom. See Disinfectant options.
 - o If a caregiver or other person needs to clean and disinfect a sick person's bedroom or bathroom, they should do so on an as-needed basis. The caregiver/other person should wear a mask and wait as long as possible after the sick person has used the bathroom.
 - High-touch surfaces include phones, remote controls, counters, tabletops, doorknobs, bathroom fixtures, toilets, keyboards, tablets, and bedside tables.

- If not sick, avoid crowds by getting essentials in the morning or during times when there are less people. We recommend Self-Quarantine if a contact with no symptoms. If someone can get your essentials for you, that would be preferred but if that is not possible you can still go get essentials but minimize contact to other people, keep away from others who are sick. If outside of incubation period, it is still important to stay home as much as possible to further reduce your risk of being exposed During a COVID-19 outbreak in your community.
- To the extent possible, avoid touching high-touch surfaces in public places elevator buttons, door handles, handrails, handshaking with people, etc. Use a tissue or your sleeve to cover your hand or finger if you must touch something.
- Wash your hands often with soap and water for at least 20 seconds especially after you have been in a public place, or after blowing your nose, coughing, or sneezing. If soap and water are not readily available, use a hand sanitizer that contains at least 60% alcohol. Cover all surfaces of your hands and rub them together until they feel dry.
- Avoid touching your face, nose, eyes, etc.
- Clean and disinfect your home to remove germs: practice routine cleaning of frequently touched surfaces (for example: tables, doorknobs, light switches, handles, desks, toilets, faucets, sinks & cell phones)- Disinfectant solutions discussed below
- Avoid non-essential travel and public transportation: including ride-sharing, or taxis.
- Stay in touch with your doctor. Call before you get medical care. Be sure to get care if you feel
 worse or you think it is an emergency. Contact your healthcare provider to ask about obtaining
 extra necessary medications to have on hand in case there is an outbreak of COVID-19 in your
 community and you need to stay home for a prolonged period of time. If you cannot get extra
 medications, consider using mail-order for medications.
- Continue with outdoor activities. If you practice social distancing, we encourage you to continue your outdoor activities such as walks, runs, to the extent your health allows it.

Final Comments

- Do you have any questions?
- Thank you for taking the time to speak with me and helping us minimize the spread of COVID19 in our community.

Disinfectant Options:

EPA-registered household disinfectants Diluting your household bleach.

To make a bleach solution, mix:

5 tablespoons (1/3rd cup) bleach per gallon of water OR

4 teaspoons bleach per quart of water

Follow manufacturer's instructions for application and proper ventilation. Check to ensure the product is not past its expiration date. Never mix household bleach with ammonia or any other cleanser. Unexpired household bleach will be effective against coronaviruses when properly diluted.

Follow-up Procedures

Asymptomatic

Symptomatic

Important Notes:

If symptomatic, please still follow precautions as if you are positive even if you test negative. Testing accuracy is not reliable right now, there are many false negatives.

- 1) Document findings: Case: Portal and CalREDIE or chart (email J) Contact: Portal and Chart (email to Jacinda)
- 2) If close contact, refer for testing (Portal/call ED)
- 3) Issue Quarentine Order (14days)
- 4) Connect to resources if needed (portal or email kpeterson@mono.ca.gov
- 5) Follow up with contact once incubation period is completed (14days post exposure)
- 6) Remind patient that there is still community spread of the virus and re-educate client about precautions and hygiene (STEP 3).
- 7) If not compliant with Quarantine, call Jacinda to issue a legal Quarantine order.
- 8) If they need to not go to work or school due to quarantine, provide work or school information to Jacinda to f/u with location
- 1) Document findings:

Case: Portal and CalREDIE or chart (email J) Contact: Portal and Chart (email to Jacinda)

- 2) Coordinate testing if not tested, in portal and/or call ED
- 3) Issue home isolation, if well enough to stay home, until criteria are met (pg4). Other's in home shall be separated from ill contact, space/bathroom if possible. If high risk house mates, consider alternative housing. If contact is not compliant with isolation, contact Jacinda to issue isolation order.
- 4) Follow up with case/contact after 7day isolation period, if symptoms not resolved extend isolation period until criteria is met.
- 5) Instruct contact/case to call 211 or speak with provider if they need clinical guidance or if any of their contacts become ill.
- 6) If an ill contact or case needs to go to hospital, critically ill should call 911 or if planning on driving to ED, assist with calling the ED to inform of individual coming in and provide info about COVID status, exposure to confirmed or suspect case to ED staff. Wear a face mask/covering.
- 7) f they need to not go to work or school due to quarantine, provide work or school information to Jacinda to f/u with location exposure.

Case/Contact Investigation Chart

Name	
Primary Language	
Date	
Phone Number	
Address (delivery of resources if	
needed)- Not a PO box	
Age	
DOB	
Sex	
Females, Pregnant or breastfeeding?	
Race/Ethnicity	
Marital Status	
Primary Place of Work or School, last	
date of attendance?	
Other Known places that case	
frequently visits	
Currently Hospitalized (Y/N)	
If no, Current Location	
Symptoms, onset, resolved (date)?	
Risk Status, health conditions?	
Smoke or used to smoke?	
Isolation Start Date	
Isolation End Date	
COVID Testing (Y/N); +/-	
Test Result/Date	
Info on Contacts: friends, family, close	
co-workers/classmates/teachers?	
High risk contacts?	
Anyone sick?	

Travel during or 2wks prior illness? If yes, where? Fly while infectious?	
Contact to a confirmed case? (name)	
Need resources?	Delivery of Groceries Y/N Food Assistance Y/N Laundry Services Y/N Mask/Face covering Y/N Housing Assistance or separate space to isolate/quarantine Y/N Safety concerns, do you feel safe in your home to isolate/quarantine Y/N Medication Delivery Y/N Elder Care Y/N Child Care Y/N Misc. Resources: Free Condom bags Y/N Tobacco Quit Kits Y/N Narcan overdose prevention resource bag. Y/N Other identified resource needs:
Quarantine Orders for contacts if not sick	
or	
Isolation Orders for contacts that are	
sick and being referred for testing	
Health Department Contact	

Notes:

Case Definitions

SUSPECTED: Patient presenting with acute respiratory illness (fever and at least one sign/symptom of respiratory disease, e.g., cough, shortness of breath)

PROBABLE: Patient presenting with acute respiratory illness (fever and at least one sign/symptom of respiratory disease, e.g., cough, shortness of breath) <u>AND</u> close* exposure to confirmed case(s) in the last 14 days prior to onset of symptoms.

CONFIRMED: Patient with confirmed COVID-19 laboratory testing results

NOT A CASE: Patient cleared by laboratory testing results.

*close exposure per CDC is defined as:

- a) being within approximately 6 feet (2 meters) of a COVID-19 case for a prolonged period of time; close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with a COVID-19 case
- or -
- b) having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on)

MONO COUNTY COVID-19 RESOURCE GUIDE

Grocery Stores

Mammoth Lakes Area

- Mammoth Grocery Outlet is delivering food to "at-risk" community members through volunteers; call (760) 934-1510 for more information
- Mammoth Vons: Open 7:00am 9:00pm 7 days a week; 7:00am 9:00am Monday-Friday is set aside for seniors, pregnant women, anyone with a disability, and/or anyone particularly vulnerable to COVID-19
- 2 fee-based delivery services available:
 - o Mountains of Groceries: (760) 475-0612
 - O Doorstep Deliveries: Cathleen Calderon @ 760-914-3122 or doorstepdeliveriesmammoth@gmail.com (will also delivery to Crowley and June Lake)

South County

- Crowley General Store will bring your hot food and grocery order directly to your car: (760) 935-4666
- Bishop Grocery Outlet will deliver to the Chalfant area: (760) 872-1505
- Seniors in Benton and Hammil Valley who need help with grocery shopping may call Pedro at Social Services (760) 924-1794; he can help to coordinate deliveries from Bishop Grocery Outlet

North County

- The June Lake Loop Chamber of Commerce offers a grocery assistance program for those June Lake community members in need; apply via their website
- Bridgeport General Store & Deli is offering free delivery to seniors: (760) 932-7224
- The Twin Lakes Resort Store is offering free delivery to anyone in the Bridgeport area: (310) 809-4003
- Mono Market is offering free grocery delivery to Lee Vining and Mono City on Monday,
 Wednesday, and Friday order before noon to receive by 6:00pm. Contact Chris Lizza @ (760) 647-1010
- The Antelope Valley Cert and the Walker General Store are providing food and prescription delivery. Call the Walker General Store for more information: 530-495-2911

Additional Food Assistance Resources

- Food bank at Promenade on Main Street in Mammoth (next to Black Velvet Coffee and Sun and Ski Sports) on Mondays, Wednesdays and Fridays from 10:00am – 12:00 pm and 3:00pm– 5:00pm
- The Bishop Salvation Army food pantry is open Monday Friday from 10:00am to 3:00pm at 621 W Line Street: (760) 872-2124 with questions. In Lee Vining, call (760) 937-0809 arrange a pick up

- The CalFresh Program issues monthly electronic benefits that can be used at many grocery stores throughout Mono County. To apply, call Mono County Social Services (760) 924-1770 or apply on-line
- Mammoth Unified School District volunteer staff are serving grab-and-go lunches 12:00pm-1:00pm Monday - Friday at the Mammoth High School MPR and Crowley Lake Community Center for all kids 18 and under
- Mammoth Christian Fellowship is offering free lunches Monday Friday @ 1:00pm at 549 Old Mammoth Road
- IMACA has the following food home delivery schedule; call (760) 279-4350 for more information and/or to enroll
 - o May 13th and 27th: Benton
 - o May 14th and 28th: Walker, Bridgeport, Lee Vining, and Mammoth Lakes

Pharmacies

- Mammoth Vons Pharmacy will deliver medications directly to your car in the parking lot if prearranged: (760) 934-4337
- Mammoth Rite Aid Pharmacy: hours are 9:00am until 6:00pm; the Monday-Friday 9:00 10:00am slot is reserved for seniors only: (760) 934-8561

Masks

- Mammoth Community Foundation passes out masks at the Village every Monday, Wednesday, and Friday between 10:00am and 2:00pm
- Essential businesses can call the Emergency Operations Center at (760) 932-5650 to request face coverings/masks for essential workers
- The Bridgeport Chamber of Commerce (760) 932-7500 and Antelope Valley CERT antelopevalleycert@yahoo.com are both working on grassroots mask distribution

Transportation

- ESTA is running the following (reduced) services:
 - o The 395 North route from Lone Pine to Reno and back: Mondays and Thursdays only; the 395 South route from Mammoth to Lancaster and back: Tuesdays and Fridays only
 - o The MMX Northbound from Bishop @ 7:25am will run on Mondays and Thursdays only; the MMX Southbound from Mammoth at 5:15pm from Mammoth will run on Tuesdays and Fridays only; all other MMX routes remain on their regular schedule
 - O New COVID-19 trolley schedule: 7:00am 9:00pm with trollies running every half hour. Final trolley departs from Snow Creek at 8:30pm
 - o Dial-a-ride is still operating as normal
 - o (760) 924-3184 x111 for more information

Laundromats

• Aloha Suds: open for seniors from 7:00am-9:00am; open to the general public 9:00am-9:00pm

• Mammoth Lakes Laundromat: will be offering local pick-up and delivery services starting in early May.

Housing and Energy Resources

- The Mammoth City Council approved a rental assistance program on April 22 that allows renters living in Mammoth Lakes who are economically impacted by COVID-19 to apply for assistance of up to \$500 dollars twice, to be paid directly to landlords. More details TBD
- The High Sierra Energy Foundation and Southern California Edison are offering a one-time assistance of up to \$200 to people who are having trouble paying their electric bill due to COVID-19. You must meet criteria to apply; more info @ (760) 934-4650 or info@highsierraenergy.org

24-HOUR HOTLINES

California Youth Crisis Line 800-843-5200

Child Abuse Hotline 800-422-4453

Child Abuse – To Report Local 800-340-5411/760-932-7755

Mono County Behavioral Health Access Line 800-687-1101

National Domestic Violence Hotline 800-799-7233

National Drug & Alcohol Treatment 800-622-2255

National Parent Support Line 855-427-2736

National Sexual Assault Hotline 800-656-4673

Suicide Prevention Lifeline 800-273-8255

Wild Iris Crisis Line 877-873-7384

Mono County Behavioral Health Warm Line (7am to 7pm every day) 760-924-1740

FINANCIAL, FOOD, AND CLOTHING

Antelope Valley Senior Center, Walker 530-495-2323

IMACA 760-279-4350

Mono County Department of Social Services 760-924-1770

Salvation Army Food Pantry 760-872-2124

Wild Iris 760-934-2491

COUNSELING

Mammoth Hospital Behavioral Health 760-924-4333

Mono County Behavioral Health 760-924-1740

Wild Iris 760-934-2491

HOUSING AND ENERGY ASSISTANCE

IMACA 760-934-3343

Mammoth Lakes Housing 760-934-4740

Mono County Department of Social Services 760-924-1770

Wild Iris 760-934-2491

JOB SERVICES

Mono County Department of Social Services 760-924-1770

DISABILITY ASSISTANCE

Community Services Solutions 530-495-2700 Disabled Sports of the Eastern Sierra 760-934-0791 Disability Rights – Advocacy 800-776-5746 Mono County Department of Social Services 760-924-1770

ELDERLY ASSISTANCE &/or SENIOR PROGRAMS

Antelope Valley Senior Center 530-495-2323 Community Services Solutions 530-495-2700 Eastern Sierra Area Agency on Aging 877-462-2298 Mono County Department of Social Services 760-924-1770

LEGAL SERVICES

Mono County Child Support Services 866-901-3212 Mono County District Attorney 760-932-5550 Mono County Probation, Bridgeport 760-932-5570 Mono County Probation, Mammoth Lakes 760-932-1730 Mono County Recorder 760-932-5530 Mono County Superior Court 760-924-5444 Self-Help & Family Law Assistance 760-258-7372

TRANSPORTATION

California DMV 800-777-0133 California Road Conditions 800-427-7623 Dial-a-Ride (Mammoth Lakes Only) 760-924-3184 Eastern Sierra Transit 760-872-1901

VETERAN SERVICES

County of Inyo-Mono Veteran Services 760-873-7850

Investigators/Contact Tracers (CT)

Keirsten Anderson (CT)

kanderson@mono.ca.gov, (760) 258-7122

Zoe Anderson

<u>zanderson@mono.ca.gov</u>, (760) 914-7051

Caitlin "Kate" Morley (s)

cmorley@mono.ca.gov, (760) 920-2684

Lisa Wray (RN)

lwray@mono.ca.gov, (323)434-0999

Heleen Welvaart (RN)

hwelvaart@mono.ca.gov, (760) 258-7020

Tiffany Cruz (MA) (s)

tcruz@mono.ca.gov, (760) 498-7248

Kaylyn Rickford (MA)

krickford@mono.ca.gov, (760) 937-0259

Back-up investigators

Lynda Salcido (RN)

lyndatommer@gmail.com

David Humes (RN)

davidhumes@netzero.net

Bilingual Investigators

Melissa Galvan (RN)- CalREDIE Access

•

Lucia Niepagen (RN-FNP)

 <u>lucianiepagen@gmail.com</u>, <u>lniepagen@mono.ca.gov</u>, (760) 614-5971

Maria Gonzales

Olivia Moreno

Nancy Cruz-Garcia

Surveillance/Collecting Medical Records

Emily Janoff

ejanoff@mono.ca.gov, (760) 914-2253

Bryan Wheeler

bwheeler@mono.ca.gov, 760-709-6741

School Contacts to report cases

Eastern Sierra Unified Superintendent Heidi Torix office - 760 - 932 - 7443 cell - 760 - 885 - 7056 email - htorix@esusd.org

Mammoth Unified - Superintendent Jennifer Wildman office - 760 - 934 - 6802, ext. 511 cell - 831 - 234 - 9787 email - jwildman@mammothusd.org

Stacey Adler
Mono County Superintendent of Schools
760 - 934 - 0031
cell - 760 - 709 - 6136
email - sadler@monocoe.org



Mono County Health Department and Mammoth Hospital

Tom Boo, MD, FAAFP, DTM&H Stuart Brown

5065 11: 1 6

Public Health Officer Phone: 760.924.1828 EOC Public Information Officer

Phone: 760.914.7110

tboo@mono.ca.gov sbrown@townofmammothlakes.ca.gov

www.monohealth.com/Coronavirus



MONO COUNTY HEALTH DEPARTMENT AND MAMMOTH HOSPITAL

Information on COVID-19 and management of illness

Last updated April 14, 2020

Criteria for Testing

COVID-19 testing is available. If you or a family member are sick, please call the **Mono County COVID-19 Nurse Hotline at 211** or **(760) 924-1830.** A Registered Nurse is available 7-days a week from 8:00 a.m. to 5:00 p.m. The nurse will advise you on if you are safe to stay home and isolate, or if you need to be seen by a healthcare professional at Mammoth Hospital. You will also be given resources on how to help keep you and your family safe.

AT THIS TIME: we feel that the best course of action for anyone who has any of the following symptoms is to assume that they could have Coronavirus: fever, significant new fatigue, body aches, chills, sweats, runny nose, sinus symptoms, sore throat, cough, nausea, vomiting, or diarrhea. Fever and cough appear to be the most common symptoms of Coronavirus.

If you are sick, please isolate (not leave your house/apartment and separate yourself from others in the home) for at least 7 days. To come out of isolation, you MUST have at least 3 days without fever AND your symptoms are gone.

If you have been exposed someone that was sick or tested positive for COVID-19 but do not have symptoms, you need to quarantine (not leave your house/apartment) for 14days to monitor for symptoms and call the Nurse Hotline (211) if you develop symptoms.

If you need resources to isolate or quarantine, please see MonoHealth.com/Coronavirus for community resources or call 211.

<u>Information on Testing for COVID-19</u>

Nasal Swab Testing is looking for an active COVID-19 infection. The swab is inserted into the nose and is then sent to the lab to look for the presence of the virus. This is currently the only test available to identify people who have active infection and can spread it to others. It is not a perfect test, so if you have symptoms and the test is negative, you should still isolate at home for at least 7-days and have 3-days of no fever and no symptoms. Nasal swab testing is currently available at Mammoth Hospital by referral from the Public Health COVID-19 Nurse Hotline (211). It also may be available through Toiyabe Indian Health Project (Coleville/Walker and Bishop clinics) and at Northern Inyo Hospital in Bishop.

Management of Illness

Antibiotic medicines are not prescribed for viral infections. This is because antibiotics are designed to kill bacteria. They are not effective against viruses. **There are no currently known treatments for Coronavirus.**

Managing pain, fever, and other symptoms:

- Drink plenty of fluids and rest. Try to get extra sleep.
- There is some controversy about the use of medications for pain and fever (acetaminophen and/or ibuprofen). At this time, we feel it is best to avoid use
- Over the counter medications for cold/flu/sinus symptoms can provide some modest relief.

General instructions

- •Rest as much as possible.
- •Do not drink alcohol.
- •Do not use any products that contain nicotine or tobacco, such as cigarettes and e-cigarettes. If you need help quitting, ask your health care provider or call 1-800-NO-BUTTS or www.nobutts.org for free resources.

Get help right away if you have:

- Severe shortness of breath or trouble breathing
- any other severe symptoms that you feel need an emergent visit. If you are not sure whether your symptoms warrant a repeat visit, please call the **ER at (760) 924-4076.**

HOW TO PROTECT YOURSELF and OTHERS

There is currently no vaccine to prevent Coronavirus disease 2019 (COVID-19). The best way to prevent illness is to avoid being exposed to this virus. The virus is thought to spread mainly by droplets or vapor from person-to-person:

- Between people who are in close contact with one another (within about 6 feet).
- Through respiratory droplets produced when an infected person coughs or sneezes. These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.
- Wash your hands often with soap and water for at least 20 seconds especially after you have been in a public place, or after blowing your nose, coughing, or sneezing. If soap and water are not readily available, use a hand sanitizer that contains at least 60% alcohol.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Stay home if you are sick, except to get medical care.
- It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the main way the virus spreads.
- Wear a mask or cloth face covering if you have one when you have to go out for essential reasons.

Distance. Wash. Cover and #StayHomeMono!

Please utilize the resources below for local information about the coronavirus.

Call: 211 (English & Spanish) | Website: MonoHealth.com/Coronavirus Facebook.com/MonoHealthDepartment |

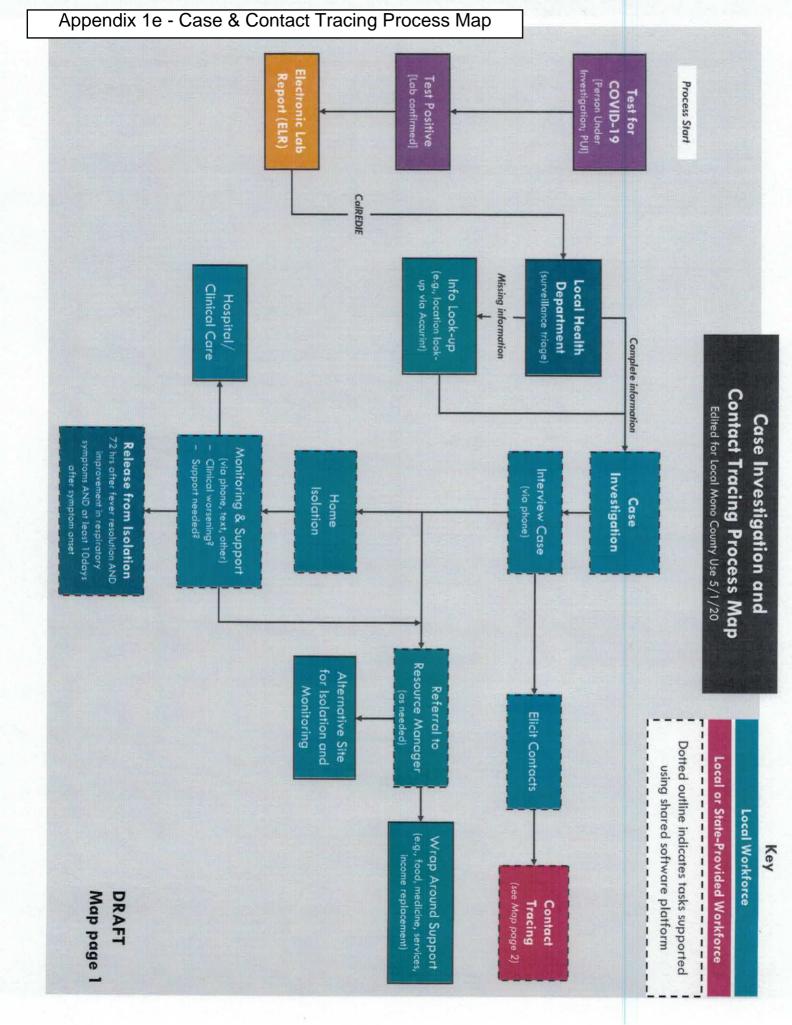
Instagram.com/MonoCountyHealthDepartment | Twitter.com/CountyMono

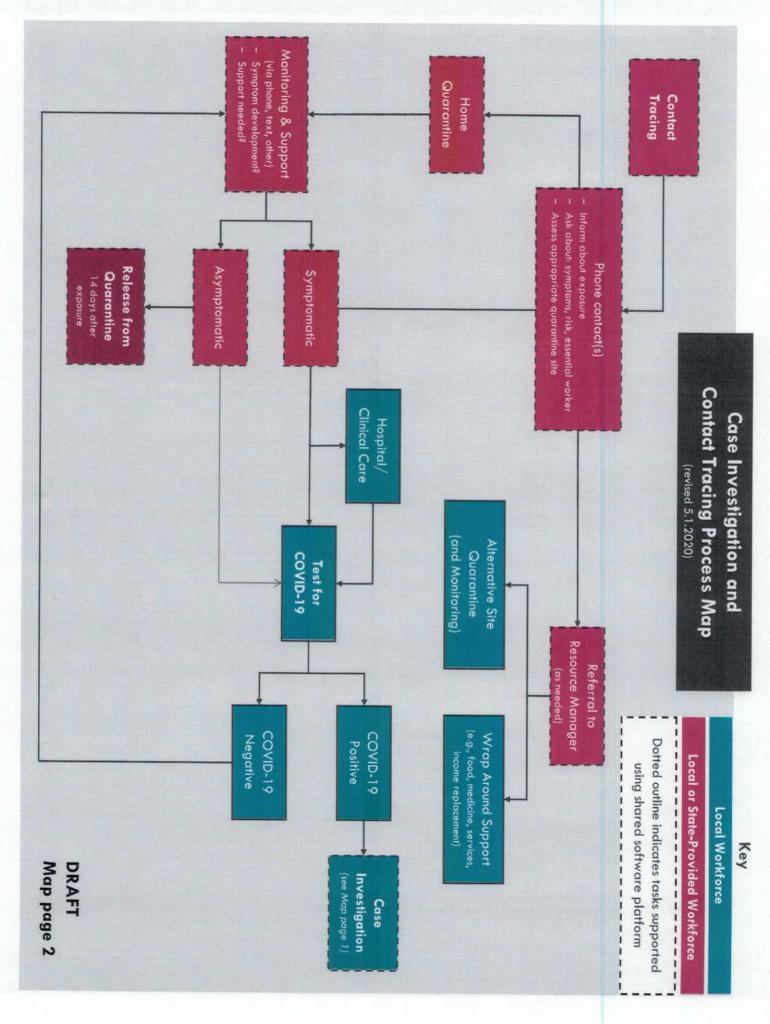
Mammoth Lakes Short-Term Rental Hotline (760) 965-3670 or TOT@townofmammothlakes.ca.gov

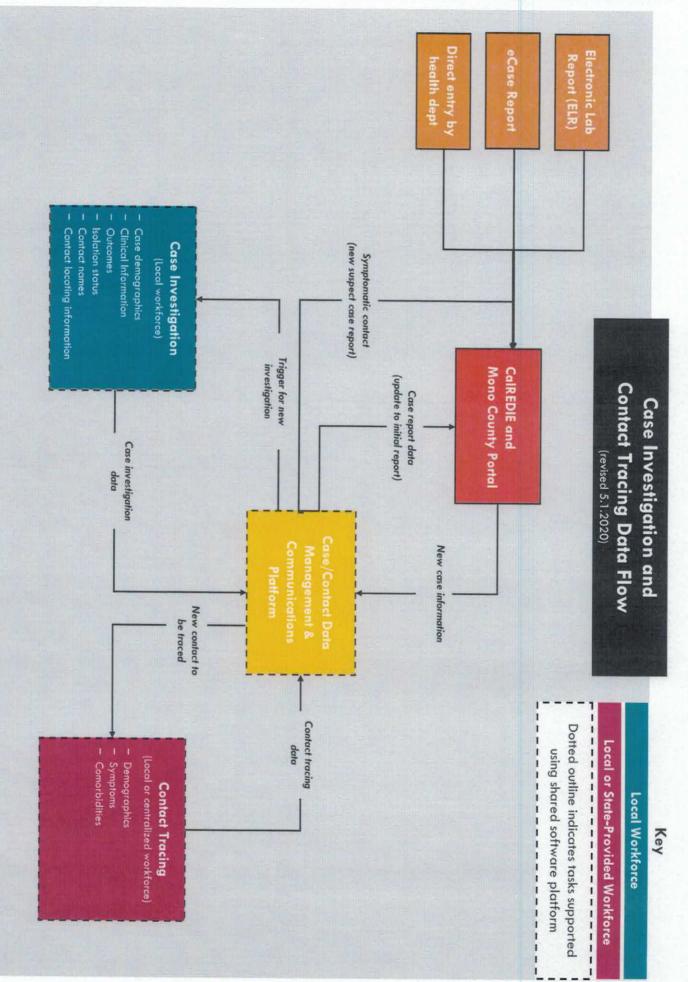
Mono County COVID-19 Violations: covid19violations@mono.ca.gov.

Emergency Operations Center (760) 932-5650

Mono County You Tube channel





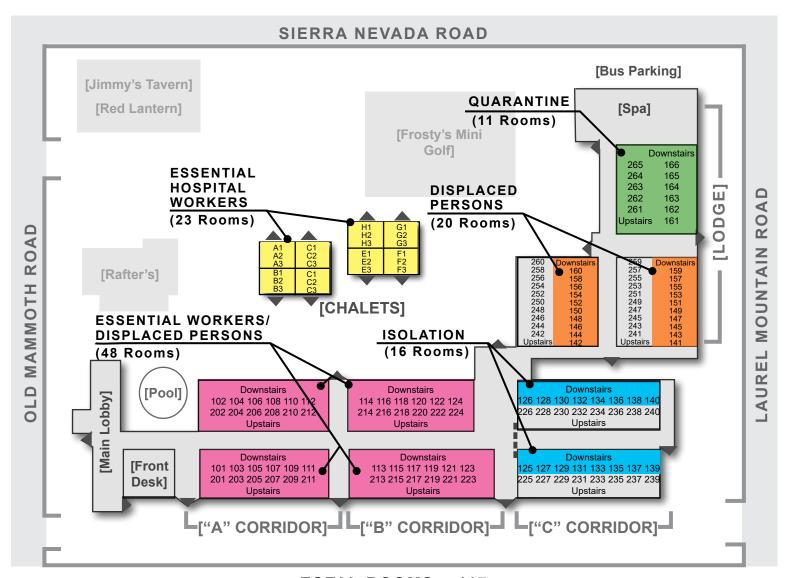


DRAFT Map page 3

SIERRA NEVADA RESORT LODGING PLANS

Incident Name: Mono COVID-19
Date From: 04/15/2020 Date To: 04/16/2020

Time From: 1700 Time To: 1700



TOTAL ROOMS = 117

LEGEND/DEFINITIONS

Entry

==== Door For Close-Off

Essential Hospital Workers = Hospital staff, public health staff

Essential Workers = Emergency service staff, staff for other essential functions Displaced Persons = Families of patients, anyone in need of housing, travelers

Isolation = People who have been diagnosed, are awaiting test results or are

experiencing symptoms.

Quarantine = People who are asymptomatic but need to be held for various reasons or

have potentially been exposed to the virus.

ON-SITE CONTACTS

Brent Truax, Managing Direct: 520-204-6832 / bt@thesierranevadaresort.com Jess Karell, Rooms Manager: 760-709-610 / jk@thesierranevadaresort.com

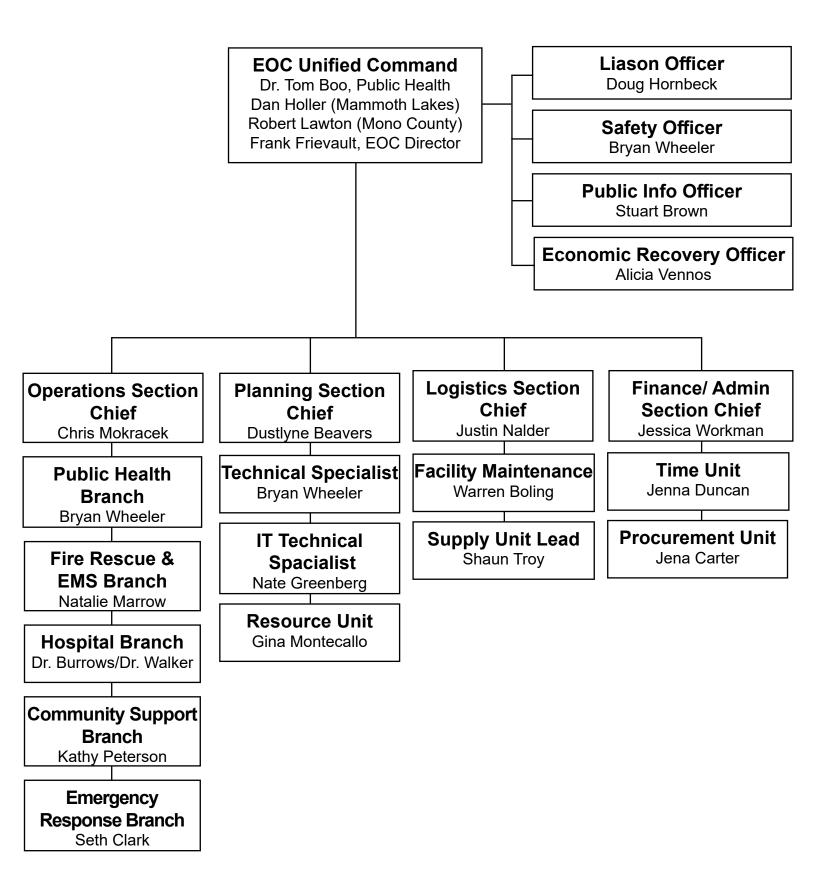
Prepared By: Dustlyne Beavers Position/Title: Planning

Key Indicator 2 Appendix

Emergency Operations Center Organization Chart

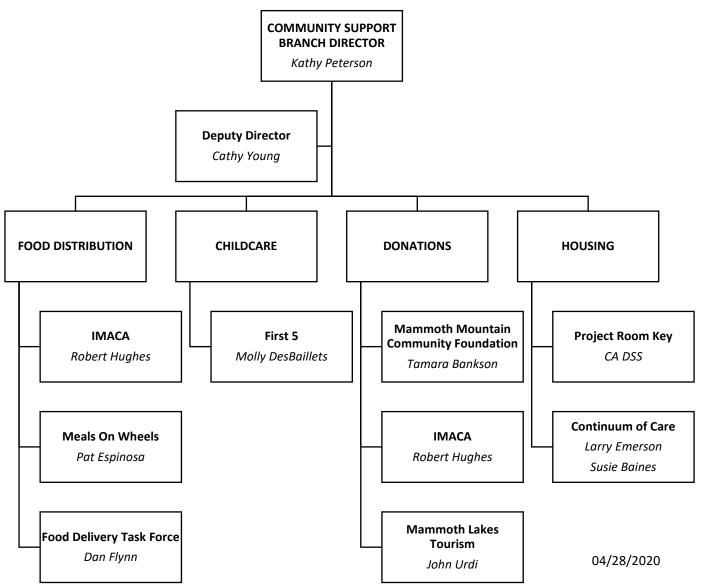
Incident Name: Mono COVID-19

Date From: 04/15/2020 Date To: 04/16/2020



Prepared By: Dustlyne Beavers Position/Title: Planning

Mono COVID-19 Community Support



Appendix 2c - Hospital Organization Chart

HICS 207 - HOSPITAL INCIDENT MANAGEMENT TEAM (HIMT) CHART

1. Incident Name		2. Operational Period	/# \	
		DATE: FROM:	(#) TO	
COVID-19		TIME: FROM:	то:	
4. Current Hospital Incident Management Tear Public Information Officer	Incide		Medical-Technical Specialists	Biologic/Infectious Disease Chemical Radiological Clinic Administration Hospital Administration
Liaison Officer Kathleen Alo Security & Safety Officer Mark Lind			Dr. Kyle Howell (ED Dr. Mike Karch (EOC/Ethics) Dr. Sarah Sindell, Situation Reporting	Legal Affairs Risk Management Medical Staff Pedlatric Care Medical Ethicist
	ng Section Chief	Logistics Section	1 1	Finance/Administration Section Chief
Or. Craig Burrows Lei	nna Monte	Sarah Vigi	lante	Melanie Van Winkle
Staci Brock				20.000
Staging Manager Personnel Staging Team Leader Vehicle Staging Team Leader Equipment/Supply Staging Team Leader Medication Staging Team Leader	Resources Unit Leader	Service Branch Dire		Time Unit Leader
Medical Care Branch Director Outpatient Unit Leader Casualty Care Unit Leader Behavioral Health Unit Leader Clinical Support Unit Leader Patient Registration Unit Leader	Personnel Tracking Manager Materiel Tracking Manager Situation Unit Leader	IT/IS Eq Food Ser Support Branch Dire		Procurement Unit Leader Andrew Crosby
Infrastructure Branch Director Water/Sewer Unit Leader HVAC Unit Leader Building/Grounds Unit Leader Medical Gases Unit Leader	Patient Tracking Manager Bed Tracking Manager Oocumentation Unit Leader	Employe: Supply U Transpo Labor Po	e Health & Well-Being Unit Leader nit Leader rtation Unit Leader iol & Credentialing Unit Leader e Family Care Unit Leader	Compensation/ Claims Unit Leader
Security Branch Director Search Unit Leader Traffic Control Unit Leader Search Unit Leader Law Enforcement Interface Unit Leader	Demobilization Unit Leader			Cost Unit Leader
HazMat Branch Director Branch Director Detection & Monitoring Unit Leader Spill Response Unit Leader Victim Decontamination Unit Leader Facility/Equipment Decontamination Unit Leader				
Business Continuity Branch Director Services Continuity Unit Leader Records Management Unit Leader				HOSPITAL INCIDENT
Branch Director	Purpose: Display positions as Origination: Incident Commande Command Staff, Set Command Center (H	ction Chiefs, Documentation Unit L		HICS 207 Page 1 of 1

Appendix 2d - Continuum of Care Workflow

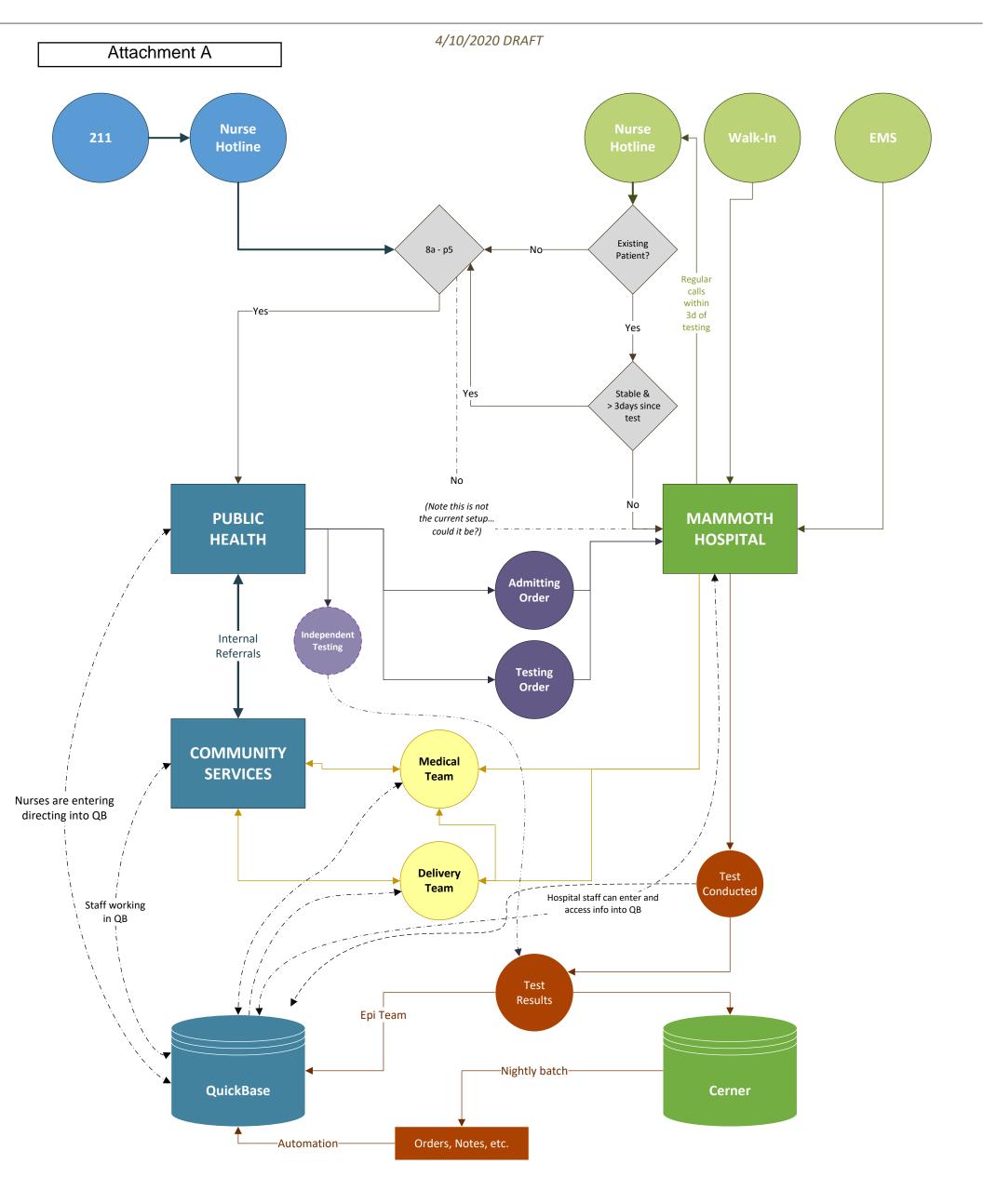
COVID CONTINUUM OF CARE

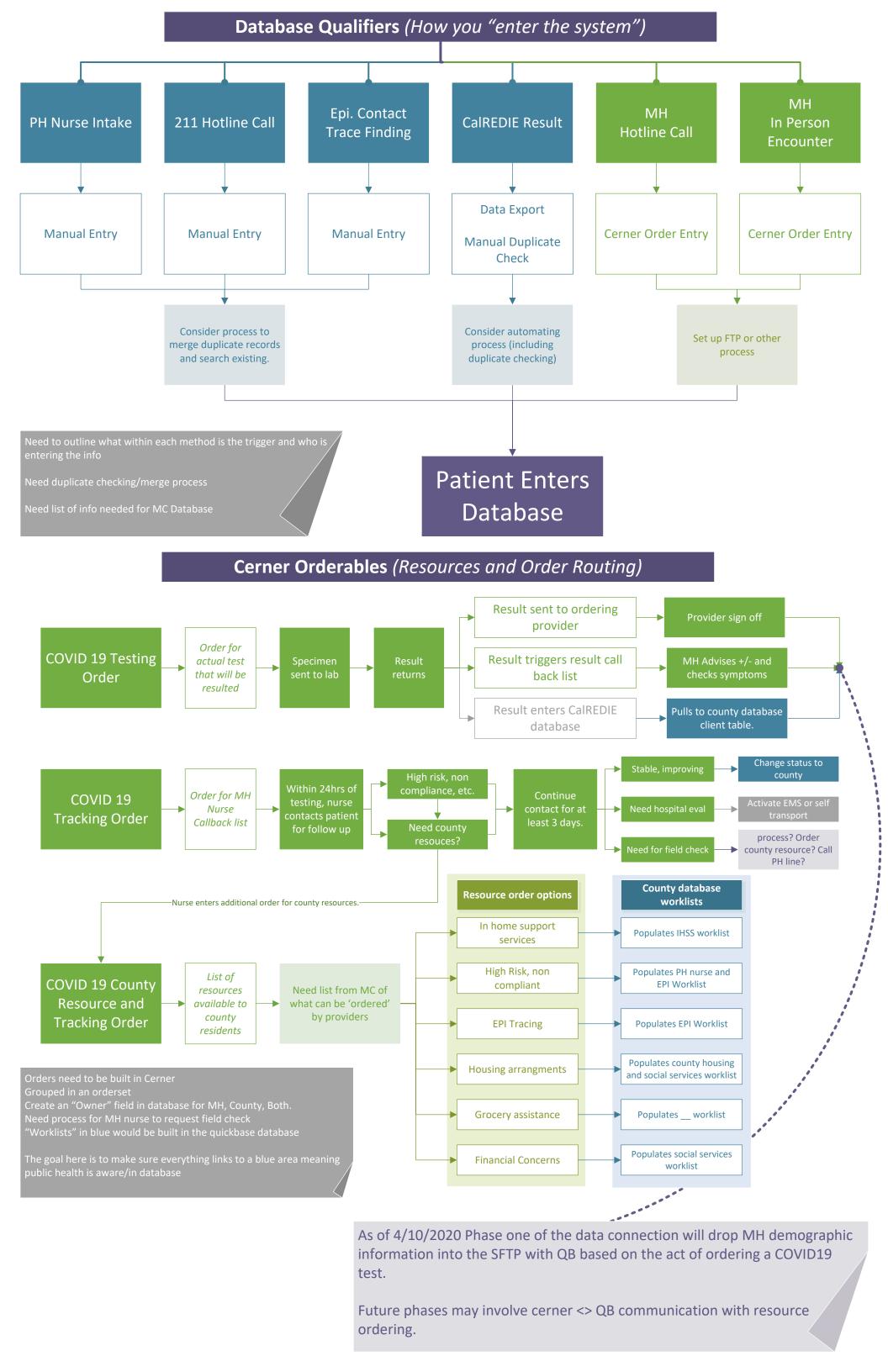
Conceptual Workflow

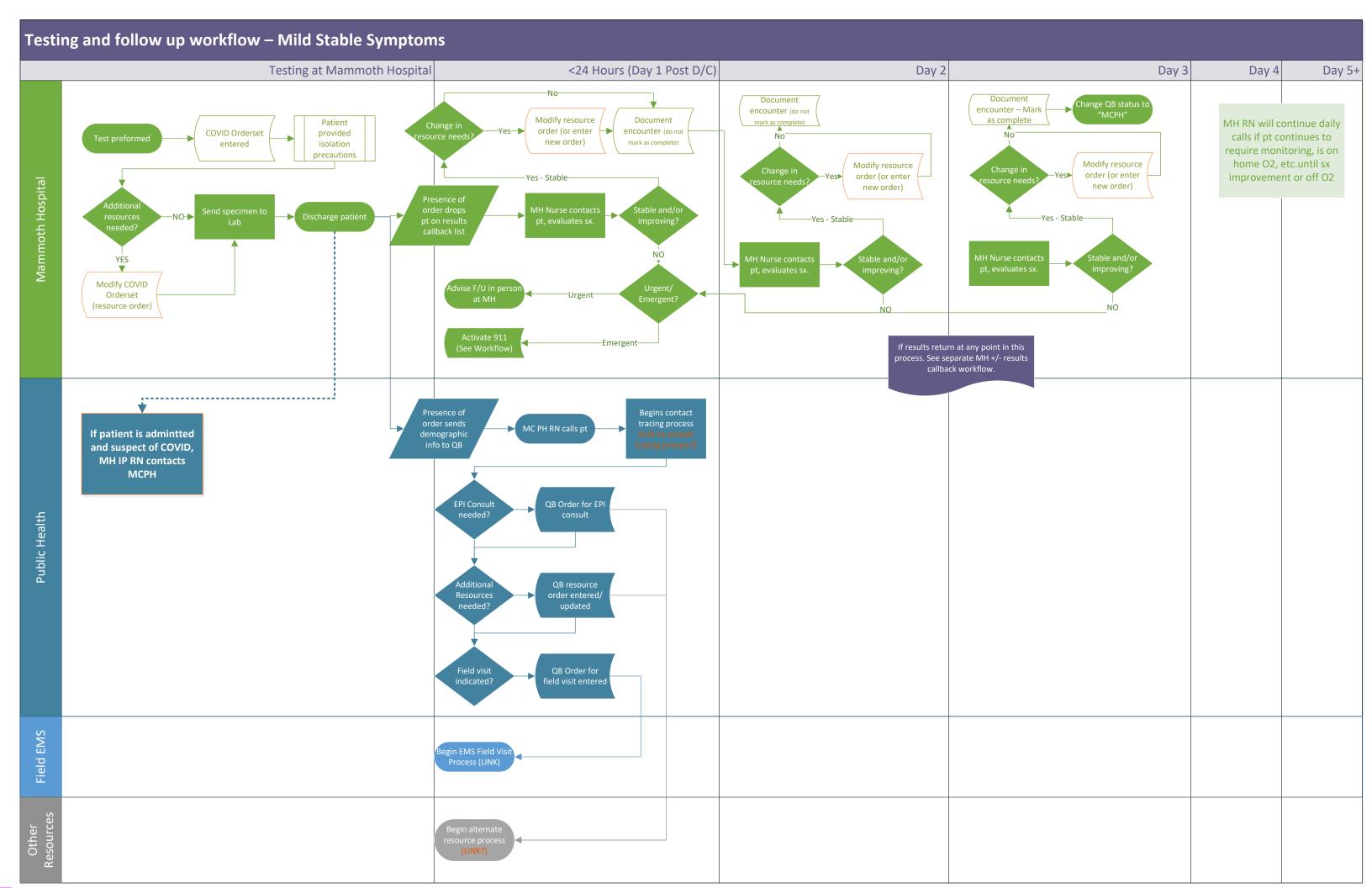


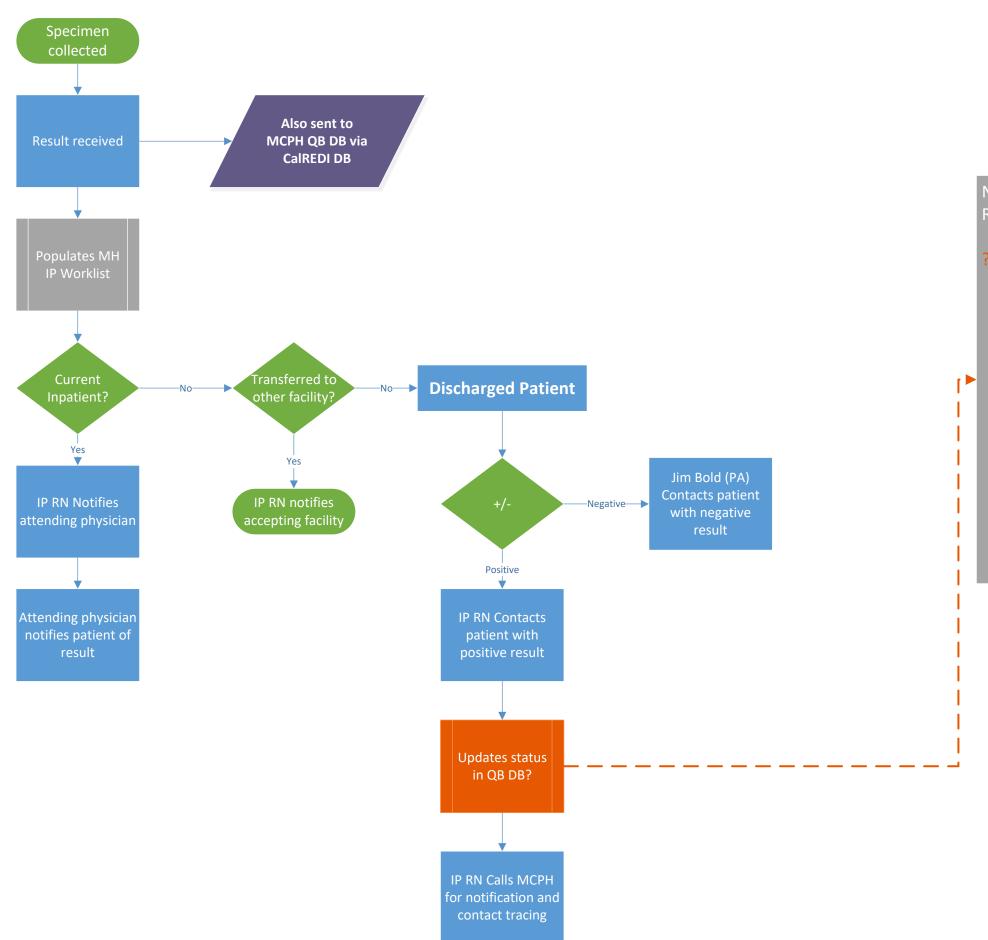












Need to confirm with MCPH and Staci Brock – Infection prevention RN at MH

?? Will Staci be updating the QB DB as well?

Mono Co. COVID-19 Home Assessment Algorithm

REQUEST FROM HOSPITAL or NURSE HOTLINE FOR HOME ASSESMENT

Dispatch Home Assessment Team from MLFD Station 2: 760-934-6567 or Lead EMT/Medic Cell Phone

PATIENT ASSESSMENT

- 1. Call pt. while en route. Ask them to come to the doorway when they hear a knock and to bring a chair and/or caregiver if necessary.
- 2. Knock on the door or ring doorbell and back away 6 feet
- 3. Perform assessment with patient in doorway. Do not enter home. Activate EMS if pt. is not ambulatory
- 4. Obtain pt. mental status
- 5. Have pt. apply pulse oximeter finger probe so as to obtain an accurate value
- 6. Document HR, RR, and Sp02
- 7. If assessing multiple patients in a single household, do so one at a time and have pt. disinfect finger probe between uses
- 8. Assess living situation for shared space, available caregivers, high risk occupants, and access to food

SpO2 < 80%, ALOC, OR Otherwise Critical?

SpO2 80-88% AND Normal Mental Status?

DISPATCH INSTRUCTIONS

Give Home Assessment Team:

- Pt. name
- Age
- Sex
- Address
- Phone number
- Pertinent medical history
- Complete list of symptoms

HOME ASSESSMENT PPE

- 1. Don N95, goggles, work uniform and footwear at station.
- 2. Don gloves upon arrival at pt. residence.
- 3. Bring 2 face coverings (1st for patient, 2nd for caregiver if present)

SpO2 > 88%
AND Normal
Mental
Status?

Able to effectively self-isolate?

YES

- 1. Direct pt. to continue self-isolation
- 2. Give pt. recontact instructions

NO

Contact Social Services for lodging, meal delivery and other needs

911 ACTIVATION

- 1. Activate 911 response
- 2. Do not initiate BLS
- 3. Assist Medics upon arrival while maintaining 6 ft. distance from pt.

NON-EMERGENT ED VISIT

- 1. Tell pt. to go to the ED now
- 2. If pt. does not have a caregiver to drive, activate 911 response
- 3. If transporting via POV, call ED and advise of incoming COVID-19 pt.

AFTER CONTACT

- 1. Remove gloves
- 2. Immediate hand hygiene
 - 3. Return to station
- 4. Discard N95, remove and disinfect goggles
 - 5. Perform hand hygiene
 - 6. Contact Care Coordinator with pt. report
 - 7. Disinfect vehicle at end of shift

Draft, Flynn, 4/4/20

211 Covid 19 Field Assessment Protocol

- 211 Nurse Line notifies Field Assessment Nurse of patient via text and email: Name, DOB, Address, Telephone Number, Signs and Symptoms, Need for Testing, and any other concerns (translation?).
- Field Assessment Nurse calls patients, creates a schedule for the day, and emails schedule to Team Members working that day.
- Team Members gather equipment and PPE for the day: Nurse and Spanish Interpreter PPE (N95s, face shields, gowns, hair covers, shoe covers, gloves), Team Member PPE (surgical masks, gowns, gloves), equipment (thermometer, stethoscope, oxygen saturation monitor, trash bags, plastic basins X2, hand sanitizer, wipes for decontamination of equipment, and documentation sheets).
- Field Assessment Nurse gathers testing supplies, patient labels, and patient handouts for the day.
- Team meets at the MLFD and drives to patient's home, calls patient en route.
- Team arrives at patient's home, organizes PPE and equipment, places stethoscope, sat monitor, thermometer, testing materials, small plastic bag, handouts, documentation sheet, and pen in basin for Nurse, prepares PPE trash bag, and small plastic bag for specimen, has decontamination supplies and hand sanitizer ready.
- Team dons PPE, Nurse and Spanish Interpreter PPE (N95s, face shields, gowns, hair covers, shoe covers, gloves), Team PPE (surgical masks, gowns, gloves).

211 Covid 19 Field Assessment Protocol (cont.)

- Nurse and Spanish Interpreter knock on door Identify themselves.
- Nurse and Spanish Interpreter only enter house. Spanish Interpreter stands at the door.
- Nurse checks identity of patient: name, dob, address.
- Nurse assesses patient and documents: mental status, color, cap refill, temperature, heart rate, oxygen saturation, respiratory rate, lung sounds.
- Nurse assesses environment: # of bedrooms, # of bathrooms, # of people living in home, # at risk people living in home, adequate food and water, functioning kitchen, adequate medications, transportation, any other needs.
- Nurse has patient visually inspect and verify test labeling: name, dob, address.
- Nurse performs testing.
- Nurse places specimen in plastic bag.
- Nurse gathers equipment, specimen, and documentation and places it in basin.
- Nurse provides teaching and gives patient handouts.
- Nurse and Spanish Interpreter exit home.
- Team Member opens clean specimen bag, and nurse drops bagged specimen from patient into clean bag. Team Member places specimen in cooler.

211 Covid 19 Field Assessment Protocol (cont.)

- Nurse hands equipment basin to Team Member for decontamination with wipes (thermometer, oxygen saturation monitor, stethoscope, pen, and basin).
- Nurse reads documentation to Team Member for transcription.
- Team Member opens large trash bag and holds hand sanitizer for Nurse and Spanish Interpreter.
- Nurse and Spanish Interpreter doff PPE, dispose of PPE and paper documentation into trash bag, and hand sanitize.
- Team Member doffs PPE and hand sanitizes.
- Nurse enters assessment into Quickbase, sends follow up email to 211 Nurse Line, completes orders, and makes referrals if needed.

Jody Martin – created 4/30/2020

Appendix 2g - Home Assessment Report

Mono County COVID-19 Home Assessment Report

EMT/Medic	
Driver	
Other Team Members	
Date	
Dispatch Time	
Pt. Name	
DOB	
Age	
Sex	
Address	
Phone	
Pertinent Medical Hx.	
CONTROL OF THE CONTRO	
Allergies	
Medications Mantal Status	
Mental Status	
HR	
RR	
Sp02 %	
Skin CTM	
Cough? Trend?	
Pain (location, 0-10)? Trend?	
Chest Pain (location, 0-10)? Trend?	
Fever? Peak *F in Last 24? Trend?	
Diarrhea?	
Fluid Intake?	
SOB @ Rest? Trend?	
SOB w/ Activity? Trend? How far	
can you walk on level ground before	
needing to stop? Any new symptoms?	
Overall trend per patient?	
Caregiver Available Food Insecure	
Able to Self-Isolate	
# in Household (# III)	
Wearing Mask	
Last ED Visit Date/Time	
Re-contact Instructions	
Time Clear Name of Care Coordinator	
A 10 PARTICLE OF THE PARTICLE	
Date/Time of Report to CC	
Signature	

MCPH + Mammoth Hospital COVID Patient Follow-up Process:

- Mono County Resident contacting MH who is NOT an established patient will be referred to MCPH hotline 0800-1700 daily. When MCPH hotline is not running, MH Hotline will receive calls.
 - a. Between 1700-0800, if a Mono County resident calls the hotline who is not critically ill and does not need to be evaluated by ED (mild symptoms only), he/she will be referred to MCPH hotline during operating hours of 0800-1700 daily.
 - MCPH will capture patient data for Quickbase during patient call to their MCPH hotline.
 - ii. If patient chooses to be seen in ED, F/U call RN will ensure patient is in Quickbase.
- 2. Mono County Resident contacting MH Hotline who IS an established patient:
 - a. RN will address questions:
 - Recommend they try not to come to the hospital, unless they have a true medial emergency. This is important in order to help prevent spreading disease to themselves or others.
 - For patients with cough, runny nose, congestion, fever or body aches, it is recommended that they stay home and self-quarantine for 14 days and until NO symptoms for at least 3 days.
 - 1. Refer to the PH Hotline for further community service needs.
 - iii. If patients feel they are having a medical emergency, especially "trouble breathing" (short of breath walking to bathroom, cannot speak in full sentences, short of breath while eating), then inform them they are welcome to come to the ED. As always, explain to the patient that you cannot determine over the phone whether they SHOULD come to the ED.
 - iv. For patients that want to be seen by a doctor, but do not want to expose themselves or others and do not feel they are having a medical emergency, they can call Family Practice or Pediatrics to schedule an appointment through the care clinics. The HCP will take a history over the phone and then see the patient in the car to minimize potential exposure to other sick patients
 - v. IF patient is having increasing symptoms and NOT clear about calling 911 for the patient, Dispatch Home visit
 - Dispatch field team for home visit....???
 - 2. Field team would determine need for 911 transport
 - b. Document in Cerner patient update.
 - i. Symptoms: worsening or remaining the same
 - 1. Fever, congestion, runny nose, body aches
 - 2. Presence of SOB
 - Active SOB: Can't complete full sentence. Difficulty walking to bathroom.
 - i. Patient instructed to return to ED/field team dispatched, etc.
 - 3. Inquire about public health needs.
 - a. Need a place to stay for self-quarantine?
 - If yes or unsure or multiple people living in one household with high suspicion of spreading disease, contact PH Epi Team via the PH database system (exact process TBD).

- c. Document in MCPH Quickbase copy and paste same Note from Cerner.
 - i. Search patient name
 - ii. If name not in the database; add the patient information
- 3. COVID Patient Follow-up Process:
 - a. Review ED results call backs for any Positive patients who need to be called first
 - i. Run a DA2 report daily for COVID tested patients
 - ii. ADD new patients to patient list in Cerner
 - iii. Call patients back in patient list
 - Utilize MH interpreter services/Language Line as needed for Spanish speaking patients
 - 2. Document in Cerner patient update.
 - a. Symptoms: worsening or remaining the same
 - i. Fever, congestion, runny nose, body aches
 - ii. Presence of SOB
 - Active SOB: Cannot complete full sentence. Difficulty walking to bathroom.
 - 2. Patient instructed to return to ED POV
 - a. If difficult to determine SOB with high concern-, dispatch Field Team for home visit for further evaluation and determine need for 911.
 - iii. Inquire about public health needs.
 - 1. Need a place to stay for self-quarantine?
 - a. If yes or unsure/or multiple people living in one household with high suspicion of spreading disease, contact PH Epi Team via the PH database system (exact process TBD).
 - 3. Document in MCPH Quickbase-copy and paste same Note from cerner.
 - a. Search patient name
 - b. If name not in the database; add the patient information.
 - Patient will be called daily for at least 3 days
 - a. If patient states during the 3 days of daily calls that symptoms remain mild without shortness of breath, patient will be removed from patient list.
 - When patient is removed from list, RN to trigger flag in MCPH Quickbase for MCPH to continue to follow.
 - b. If patient states worsening symptoms (without presence of acute SOB that requires further evaluation) or is at home on a concentrator, the patient will continue to receive a daily call until symptoms improve and patient is off concentrator.

Appendix 2i - Shelter Physician Referral

DRAFT 4-29-20

COVID-19 PANDEMIC SHELTER: PHYSICIAN REFERRAL

During the COVID-19 pandemic emergency, the Mono County Unified Command has secured limited, temporary non-congregate shelter to mitigate the spread of Covid 19 for individuals who are referred by a physician/provider.

The purpose of this shelter is to provide a safe, isolated space for individuals who are homeless or those who would put a household member at risk for COVID-19 if they returned home. This is not a medical shelter and medical services will not be provided. Along with housing, food will be provided and personal care items, as needed.

To request intake to COVID-19 non-congregate shelter (hotel), please complete this form. Note that a referral from a physician/provider is **required**. Email completed form to **XXXX**. Questions: **XXX**

Ref	erred by Physician/Provider (Name):	Org	anization:
Phy	sician/Provider Phone:	Hos	spital/Clinic Case Manager Name:
Phy	sician/Provider Signature: REQUIRED	Dat	e:
Info	rmation on Person Being Referred:		
1.	First and Last Name:	2.	Year of Birth:
3.	Race:	4.	Ethnicity:
5.	Gender:	6.	Is the person homeless: ☐ Yes ☐ No
7.	Cell phone:	8.	English Spanish
9. Individual meets one or more of the following FEMA criteria (check all that apply): Tested positive for COVID-19 and does not require hospitalization, but is in need of isolation or quarantine (including those exiting from hospitals) Exposed to COVID-19 and does not require hospitalization but is in need of isolation or quarantine. Asymptomatic, but "high-risk," and requires emergency non-congregate shelter as a social distancing measure. Example: people over 65 or underlying health conditions. Please explain: Please explain:			
10. For those who do meet FEMA eligibility, has sufficient documentation been collected? ☐Yes ☐No ☐Pending, expected by:			
11. If any boxes are checked above, this individual meets FEMA eligibility. If the individual does not meet any of the criteria above, check the box below.			
	□Does not fall into the above cate		•

DRAFT 4-29-20 PHYSCIAN REFERRAL, CONT

12. Number of adults seeking shelter:	13. Number	of children seeking shelter:
14. Access/Functional needs identified: ☐Yes a. If yes, describe needs (e.g. oxygen):	□No	□Client Does not know
15. If not homeless, participant does not have t assistance □True or □False	he ability to se	elf-isolate or quarantine without
16. Name/phone/organization of case managers Mono County Behavioral Health, IMACA, etc		tions client works with (for example
17. Potential psychosocial risk factors: ☐ Yes [a. If yes, please explain:	□ No	
18. Is the person COVID-19 positive: ☐ Yes ☐ N a. If yes, date of first symptom:	lo	
19. Is this person a close contact of a COVID-19 a. If yes, date of contact:	9 positive case	e: □ Yes □ No
20. Would this person put a household membe ☐ Yes ☐ No	r at risk of CO	VID-19 if they returned home:
21. If yes, which of the following conditions do meet: ☐ Age 65 or older ☐ Are immunocom ☐ Have chronic lung disease or moderate to se ☐ Have severe obesity ☐ Have diabetes ☐ Have liver disease ☐ None of the above	promised (inclu evere asthma	des those undergoing cancer treatment)
22. Can the person independently carry out Activities of Daily Living (bathing, toileting, dressing, feeding, and moving independently)? ☐ Yes ☐ No a. If no, explain:		
23. Does the client have a service animal or pet a. If yes, explain:	that may also	need shelter? □ Yes □ No
24. Are there Food allergies: ☐ Yes ☐ No a. If yes, list allergies:		
25. Does the client need personal care items: ☐ Yes ☐ No a. If yes, describe need:		
26. Is the client a smoker or vaper: ☐ Yes ☐ No	•	
27. Does client have ability to pay for shelter stay? ☐ Yes ☐ No		
28. Additional information you would like to sha	are:	

Appendix 2j - Shelter Workflow

DRAFT 4-29-20 KP

COVID-19 PANDEMIC SHELTER: MONO COUNTY WORKFLOW

To access non-congregate shelter (hotel room), a referral form from a medical provider is **required**.

Providers <u>must</u> use the "COVID-19 Pandemic Shelter Physician Referral" form. No discharged patient will be accepted into the COVID-19 shelters without a completed and signed referral form.

Step 1: Hospital/Clinic

When the hospital or other provider has a patient that they would like to refer to shelter, they must:

- 1) Complete and sign the referral form;
- 2) Scan the form to xxxxxx@mono.ca.gov using encrypted email.
- Call the EOC contact. Unless there is crowding at the hospital that necessitates an immediate discharge, calling should be held until 7am or later 7 days per week.
 Contact is Name of EOC Contact, 760-xxx-xxxx

The EOC contact, Name here, will complete the following steps and call the hospital/provider contact back to let them know where to bring the patient.

Step 2: Determine Support Status

When EOC receives the call, the referral form is downloaded from email. If the client identifies as homeless, Susi Bains, Continuum of Care Wraparound Coordinator is contacted at 760-648-3075. Susi will contact the Nurse Care Coordinator, Jody Martin, 760-709-2177, to coordinate wraparound services for the client. Susi will also contact the client once they are settled into the shelter to assess and assist with needs.

Step 3: Prepare Room

The EOC will contact name xxx-xxxxx or name xxx-xxxx at the Sierra Nevada Resort (SNR) and ask them to prepare a room for a patient, detailing the type of room required (isolation; quarantine; displaced person; etc). Make sure to get the room number. To reduce interaction between SNR staff and COVID patients, SNR will identify the room, unlock the door, and leave the key inside, along with a "COVID prep bag."

The EOC will supply SNR with 20 "COVID prep bags" which include hygiene supplies, bottled water, snacks, and directions/isolation packet.

Step 4: Communicate with Hospital/Clinic

EOC calls hospital/clinic, confirms receipt of form, and lets hospital/clinic know where to drop off patient, including room number. Consider encouraging patient to drive themselves to the hotel, if possible, so that their car is not left in the hospital/clinic parking lot.

Step 5: Add to spreadsheet; alert supports

- 1. Add new patient into EOC tracking spreadsheet
- 2. Input into Quickbooks Database?
- 3. Alert food service/restaurant that a new client is placed at SNR

DRAFT 4-29-20 KP

- 4. Alert Nurse Care Coordinator, Jody Martin, 760-709-2177 or her back up
- 5. Alert daily meal delivery contact: (whoever will be delivering food to SNR, which may or may not be the restaurant that prepares the food)

Meals are arranged through name/restaurant the night before. If meals must be delivered the same day the patient arrives (if it's before dinnertime), call name at name at number and alert them that there will be an additional meal needed at each meal time for the remainder of the day.

EOC contact name will deliver meals up to 3x per day, as needed.

Meals for Homeless Clients are invoiced to and paid by the Continuum of Care.

Step 6: Daily Management

Once the patient is settled, a single point of contact case manager will check in with them 1x per day, and client should be able to get in touch with single point of contact. Single point of contact case manager should be in touch with public health daily or by arrangement to provide information on state of health and prepare for eventual discharge.

Non-Congregate Shelter FAQs For COVID 19 Positive Patients

You are being provided a place to stay in order to safely recover from your illness. It is important that you do not infect anyone else, so we require that you **stay inside your room** until you have recovered.

The Mono County Nurse Care Coordinator will determine when you are well enough to leave. The Care Coordinator and/or Public Health Nurses will work with your case manager to alert you when you are nearing your date of recovery and should prepare to discharge from shelter. Until that time, **do not leave your room.**

Recovery is defined as 3 days with no fever, without use of fever-reducing medications, improvement of respiratory symptoms, and at least 7 full days since symptoms first appeared.

Every day, you will be provided 3 meals – breakfast will be served between 8:30-9:30am, lunch from 11:30-12:30pm, and dinner from 6:30-7:30pm. The meals will be left in front of your room, and the delivery person will knock on your door to alert you that your food has been dropped off. Please wait a moment to ensure the delivery person has stepped away before opening your door.

Please place your trash into the trash bag that has been provided to you and keep it inside your room. Every 3 days your case manager will arrange to have your trash picked up. You will be instructed when to leave the bag outside your door. Your trash bag is considered contaminated and cannot be left outside until the trash collector is prepared to collect it. If you need additional trash bags, contact your case manager.

If you need more towels, soap, or other hygiene supplies, please contact your case manager. They can arrange for supplies to be dropped off with a meal delivery.

If you need something from home or the store, please contact your case manager and they will provide whatever services and supports are available. We may not be able to honor every request.

Your case manager is	and their phone number is	
	Your case manager will be in contact with you daily,	
however you may contact your case n	nanager if you need additional water or have other questions.	
Good luck in your recovery.		

Shelter FAQs



Stay in Your Room

You are being provided a place to stay in order to safely recover from your illness. It is important that you do not infect anyone else, so we require that you stay inside your room until you have recovered.



Inyo County Public Health Nurses will determine when you are well enough to leave. Public Health Nurses will work with your case manager to alert you when you are nearing your date of recovery and should prepare to discharge from shelter. Until that time, do not leave your room.



Meals

Every day, you will be provided 3 meals
– breakfast will be served between
8:30-9:30am, lunch from 11:30-12:30pm,
and dinner from 6:30-7:30pm. The meals
will be left in front of your room, and the
delivery person will knock on your door
to alert you that your food has been
dropped off. Please wait a moment to
ensure the delivery person has stepped
away before opening your door.



Please place your trash into the trash bag that has been provided to you and keep it inside your room. Every 3 days your case manager will arrange to have your trash picked up. You will be told when to leave the bag outside your door. Your trash bag is considered contaminated and cannot be put outside until the trash collector is ready to pick it up. If you need additional trash bags, contact your case manager.



Extras

If you need more towels, soap, or other hygiene supplies, please contact your case manager. They can arrange for supplies to be dropped off with a meal delivery.

If you need something from home or the store, please contact your case manager and they will provide whatever services and supports are available. We may not be able to honor every request.

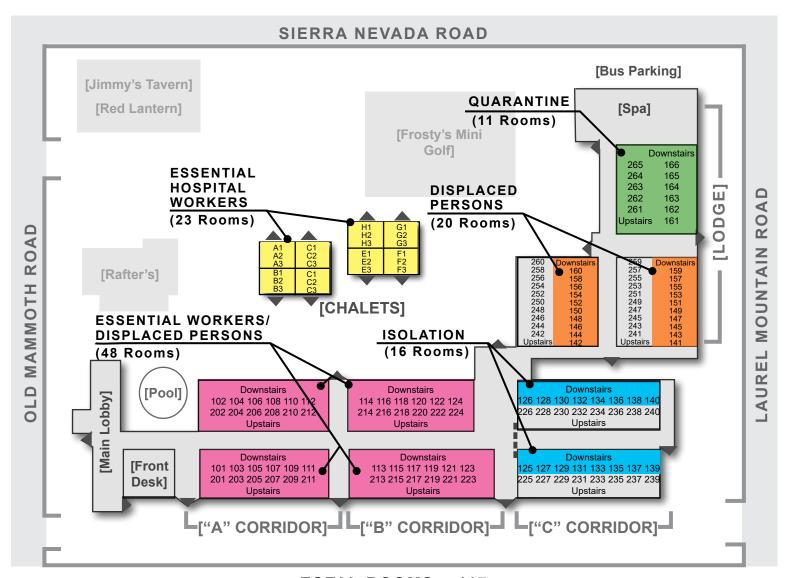
Your case manager is	and their phone number is	

Your case manager will be in contact with you daily, however you may contact your case manager if you need additional water or have other questions.

SIERRA NEVADA RESORT LODGING PLANS

Incident Name: Mono COVID-19
Date From: 04/15/2020 Date To: 04/16/2020

Time From: 1700 Time To: 1700



TOTAL ROOMS = 117

LEGEND/DEFINITIONS

Entry

--- Door For Close-Off

Essential Hospital Workers = Hospital staff, public health staff

Essential Workers = Emergency service staff, staff for other essential functions Displaced Persons = Families of patients, anyone in need of housing, travelers

Isolation = People who have been diagnosed, are awaiting test results or are

experiencing symptoms.

Quarantine = People who are asymptomatic but need to be held for various reasons or

have potentially been exposed to the virus.

ON-SITE CONTACTS

Brent Truax, Managing Direct: 520-204-6832 / bt@thesierranevadaresort.com Jess Karell, Rooms Manager: 760-709-610 / jk@thesierranevadaresort.com

Prepared By: Dustlyne Beavers Position/Title: Planning

Appendix 2m - Procedures for Senior Delivered Meals

Mono County Procedures for Senior Home Delivered Meals Preparation and Delivery to Prevent Covid 19 Infection

March 29, 2020

Congregate meal service will remain canceled until further notice in order to prevent the spread of Covid 19. Home Delivery Meals (HDM) are offered to all congregate meal participants, in lieu of congregate meals.

Daily General Procedure for Antelope Valley Senior Center: Clean all "high-touch" surfaces every day, such as counters, tabletops, doorknobs, fixtures, toilets, phones, etc. Use a regular household alcohol based cleaning spray or wipe according to the label instructions, which include precautions you should take when applying the product, such as wearing gloves and making sure to have good ventilation during use of the product.

Screen each HDM client before driving to home:

- Ask if they are sick with fever, cough, shortness of breath.
- If client cannot come to the door due to disability, driver may enter only if wearing N95 mask.

If confirmed COVID-19, driver may *not* enter or meet client at house. Refer to Public Health. (DF note: I think that at this stage we need to assume that anyone with fever, couch or shortness of breath is COVID positive. For such patients, untrained personnel should not enter the home at all. Either a caregiver who has accepted the risk or trained personnel in a full isolation kit should enter the home to deliver the meals)

Personal Protective Equipment Required:

- Supply of appropriately sized disposable gloves per vehicle
- Supply of pens (each pen to be used by only one individual)
- One hand sanitizer container per vehicle.
- Trash can, ziplock bag or trash bag for glove disposal

Procedures:

- 1. Only one person per vehicle, unless passengers share the same household as the driver
- 2. Maintain a minimum of 6 feet of space between individuals at all times
- 3. Wear gloves whenever handling food bags or boxes
- 4. Do not touch face without performing hand hygiene before and after
- 5. When coughing or sneezing cover face with bend in elbow. After cough or sneeze is relieved, remove gloves, perform hand hygiene, and apply a new pair of gloves.
- 6. Remove gloves before opening or entering vehicle and perform hand hygiene
- 7. Once at delivery destination open the necessary vehicle doors and apply a new set of gloves before handling food bags or boxes
- 8. Knock on door or ring doorbell and back away at least 6 feet while delivery is received. Do not enter a residence under any circumstance
- 9. After delivery is confirmed, remove gloves and perform hand hygiene

Note: While not mandatory, it is recommended to call food recipients ahead of time and inform them of this procedure, specifically for recipient to remain in the residence while food is being delivered.

Food Delivery Vehicles:

Materials:

- Approved disinfectant wipes or spray
- Gloves

Before and after vehicle use, wipe down all surfaces that are touched during operation with an approved disinfectant spray or wipe while wearing gloves:

- 1. gear shifter:
- 2. door handles:
- 3. steering wheel;
- (reusable?) delivery boxes, (DF note: if these boxes are cardboard and/or are being left with the
 recipient they do not need to be wiped down—they should be handled with a freshly gloved
 hand)
- 5. vehicle control knobs and buttons
- 6. any other surfaces touched during performance of the delivery

Clean your hands (with soap and water or alcohol-based hand sanitizer) immediately after handling these items. (DF note: I'm confused by this sentence. Personnel should wear gloves while cleaning and then perform hand hygiene after removing gloves)

NIHD Dietary Spreadsheet

Client #	Hotel	Room Number	Dietary Restrictions
1	Mountainview	201	Vegetarian; Client requested no breakfast
	Mountainview	112	
	Mountainview	202	
	Mountainview	204	
	Mountainview	205	

Appendix 2o - Outreach & Education Script for AFN

Outreach and Education Script for AFN Check-In Calls DRAFT #3

Edits: Needs review and sign off by PH

April 21 (KM) April 6, 2020 (KM) March 29, 2020 (KP)

INTRODUCTION + CORONA INFORMATION OVERVIEW

Hi! My name is Kate and I'm calling with the Mono County Health and Social Services Departments to check in on you, and make sure you're doing OK. Given the coronavirus pandemic, we want to make sure that your needs are being met. If you need help at any time, you can call the local 211 phone number, which can connect you to wide variety of resources and supports. Do you have a few minutes to talk with me today?

Question: Have you heard about coronavirus, or COVID-19?

Corona virus is a newly-identified virus that causes respiratory illness, often with fever, cough, and difficulty breathing. It is spread person-to-person, and seniors 65+ and those with chronic health conditions or disabilities are a high risk for being hospitalized if you catch it, so we want to sure you're aware and taking safety precautions.

Question: Are you aware of the best ways to prevent catching corona virus?

The best things you can to prevent catching corona virus are: washing your hands with soap and warm water often, especially after using the bathroom, coughing, or sneezing; cleaning all surfaces that are touched often, like tabletops, counters, doorknobs, and light switches; covering your coughs and sneezes, and throwing all used tissues in the trash immediately.

<u>Question</u>: Are you aware of the shelter-in-place order and ban on group meetings that have been issued by Governor Gavin Newsom and County Health Officer Dr. Tom Boo?

To prevent the spread of coronavirus, California is directing people to stay at home except to leave for outdoor exercise or for essential needs – like getting food, caring for a relative, getting healthcare, or working at an essential job. All non-essential public gatherings and group events have been cancelled until at least May 1, and probably longer.

Question: Have you heard the recommendation of Mammoth Hospital and the Mono County Health Department to wear a homemade face covering when you can't avoid being out in public? It is strongly recommended that anyone who must leave home to be in a public setting use a cloth face covering to protect against corona virus. This can include a scarf, bandana, or homemade mask. It's important to clean the mask washing it in soap and water, on a daily basis.

ASSESS FOR ILLNESS USING PH SCREENING TOOL (??)

ACCESS TO FOOD SECURITY

<u>Question</u>: Do you have food, water, pet food, and other necessary household supplies in your home, and a way to get more if needed?

- Contact-free grocery delivery (customize based on where resident lives)
- Home Delivered Meals Program through Social Services
- IMACA curbside delivery
- MLT food bank
- Mono County Social Services (CalFresh for seniors, etc.)

ACCESS TO MEDICAL NEEDS

<u>Question</u>: Do you have a way to meet all your healthcare needs and transportation to medical appointments?

- Connect to 211 hotline
- Community groups, like AV CERT team, and social services, can help with prescription pick up
- Encourage him/him to reach out to his/her health care provider, pharmacist, or insurance provider about keeping an emergency supply (of medications, specifically?) at home
- Keep a working thermometer and over-the-counter fever medication on hand
- Encourage them to create an emergency contact list of family members, friends, neighbors

HOUSING AND HOME-CARE NEEDS

Question: Do you have stable housing, and the financial resources to pay for your housing?

If live in Mammoth, talk about rental assistance program (assuming it passes . . .)

<u>Question</u>: Many people get help at home, but with the current situation, that help may not be available, particularly if your regular caregiver, helper, or a family member isn't working, or becomes ill. Are you getting all the help you need, or could you use some extra support right now?

- Refer to SS and HD resources
- Plan for what will happen if someone in the home becomes ill or tests positive for the virus: stay
 in a separate bedroom and use a separate bathroom if possible; clean all communal spaces and
 surfaces with disinfectant, concentrated alcohol cleaner, and or a bleach solution

IF APPROPRIATE/REVELENT - EDUCATION ON MENTAL WELLNESS, ABUSE PREVENTION, AND SELF CARE

- Info about Behavioral Health services and supports: warm line, including in Spanish, etc.
- Info about elder fraud, and abuse and neglect prevention (Social Services, APS)
- Provide domestic violence resources (Wild Iris)
- Importance of exercise, creative activities, managing stress, and self-care
- 24 Hour Friendship Line: 800-971-0016

CONCLUSION

Make sure they know about:

- **211**
- COVID-19 Portal for those with access/interest
- Thursday evening community zoom meetings English and Spanish
- WASH YOUR HANDS AND STAY INSIDE AS MUCH AS POSSIBLE

CORONAVIRUS- INTAKE QUESTIONNAIRE

	Date:
 In the past 14 days, have YES □ 	e you had close contact with anyone known to have Flu symptoms? NO□
2. Have you or anyone you incubation period is 2-1	have been in contact with had laboratory confirmed Coronavirus? (The 4 days)
YES□	NO □
3. Do you or have you had other symptoms of lower	a fever of 101.2 degrees or higher, severe cough, shortness of breath, or respiratory illness?
YES □	NO □
*For any Arrestee/Inmate answe	ering "YES" to any of the above questions:
CTOD IN	
<u> </u>	TAKE IMMEDIATELY
	LOW ARRESTEE TO ENTER THE FACILITY
DO NOT AL NOTIFY THE SER PROCEDURES REI	

The following are the procedures related to Coronavirus screening that are in effect at the Mono County Jail facility for receiving arrestees.

- All arrestees will be screened by Correctional Officers in the sallyport or in the case of a Court Commit/Forthwith, in the Jail Lobby, using the Coronavirus Intake Questionnaire.
- Prior to making contact with the arrestee, The Booking Officer is required to don a face shied and gloves.
- If there are "Yes" answers to the Coronavirus Intake Questionnaire:
 - A supervisor will be notified immediately.
 - Anyone present in the sallyport will immediately initiate universal precautions including the use of personal protective equipment including gloves and eye protection. This includes all persons in the area: Detention staff, arresting Officers and any arrestees.
 - o The arrestee in question will be issued a surgical mask.
 - The inmate <u>will not</u> be accepted into the Sheriff's Office custody until they have received a medical clearance from the hospital.
 - Contact the hospital to notify them of the circumstances before the arrestee is transported and remain in communication in the event the arrestee is cleared for booking.
 - The arresting Officer will be responsible for transporting arrestee for medical clearance.
 - o If the arrestee requires hospitalization, the arresting agency is responsible for providing the hospital guard until the arrestee has been booked.
 - Once the arrestee has left the facility, janitorial staff will be responsible for sanitizing any areas where the arrestee was held. Inmate workers will be provided with appropriate PPE prior to disinfecting exposed areas.
- In the event that a housed inmate shows signs of Coronavirus, the jail supervisors will work with County Public Health staff to develop contingency plans to quarantine that housing area as necessary.

Updated 3/11/2020

Individual Certification for High Risk for Complications

All individuals who are screened for high risk for complications if exposed to COVID should fill in the information below if self-determined as high risk based on <u>CDC list</u> of those at increased risk of complication.

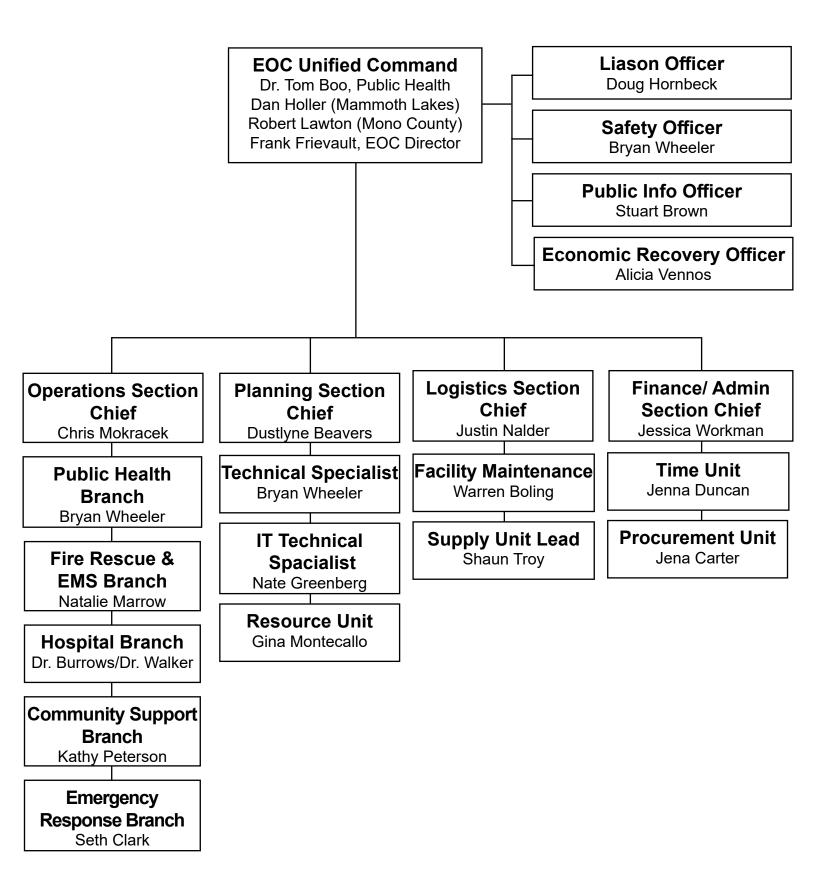
	Yes, I am higher risk of complications if exposed to COVID based on the list provided to me
	By signing here, I certify I have been provided the CDC list of
medica	al conditions identified as high risk and my response is accurate

Key Indicator 3 Appendix

Emergency Operations Center Organization Chart

Incident Name: Mono COVID-19

Date From: 04/15/2020 Date To: 04/16/2020



Prepared By: Dustlyne Beavers Position/Title: Planning

Appendix 3b - Continuum of Care Workflow

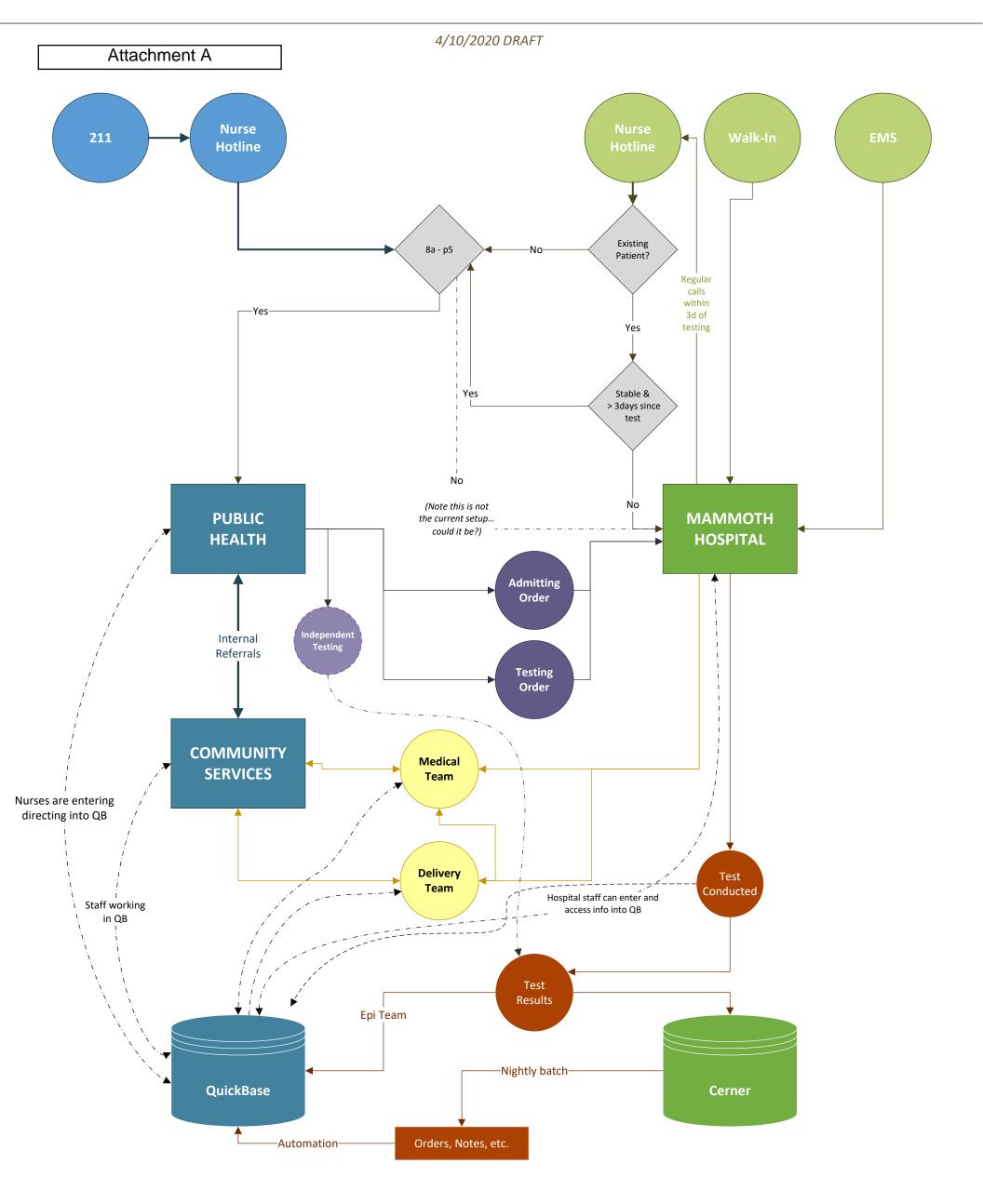
COVID CONTINUUM OF CARE

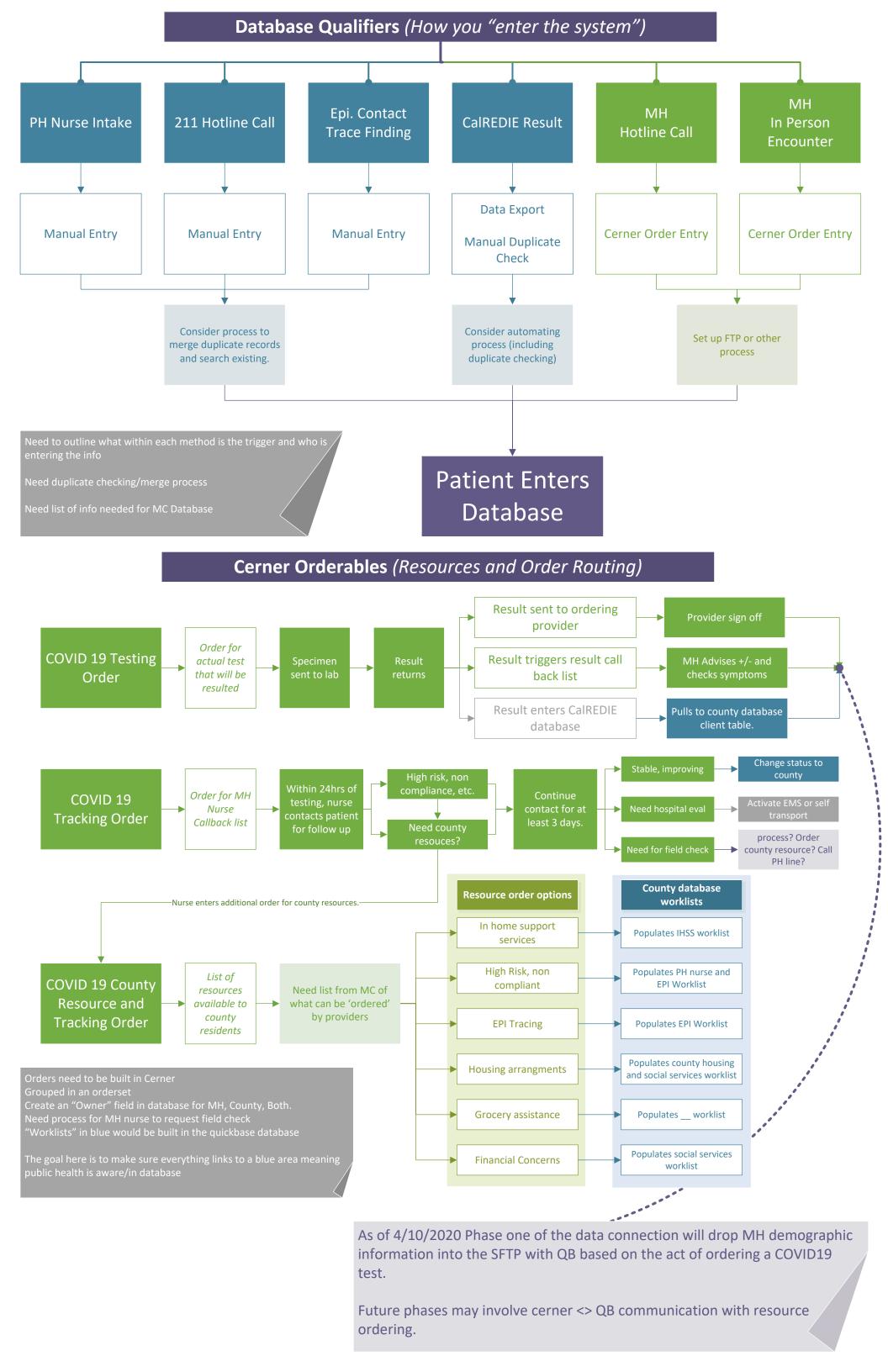
Conceptual Workflow

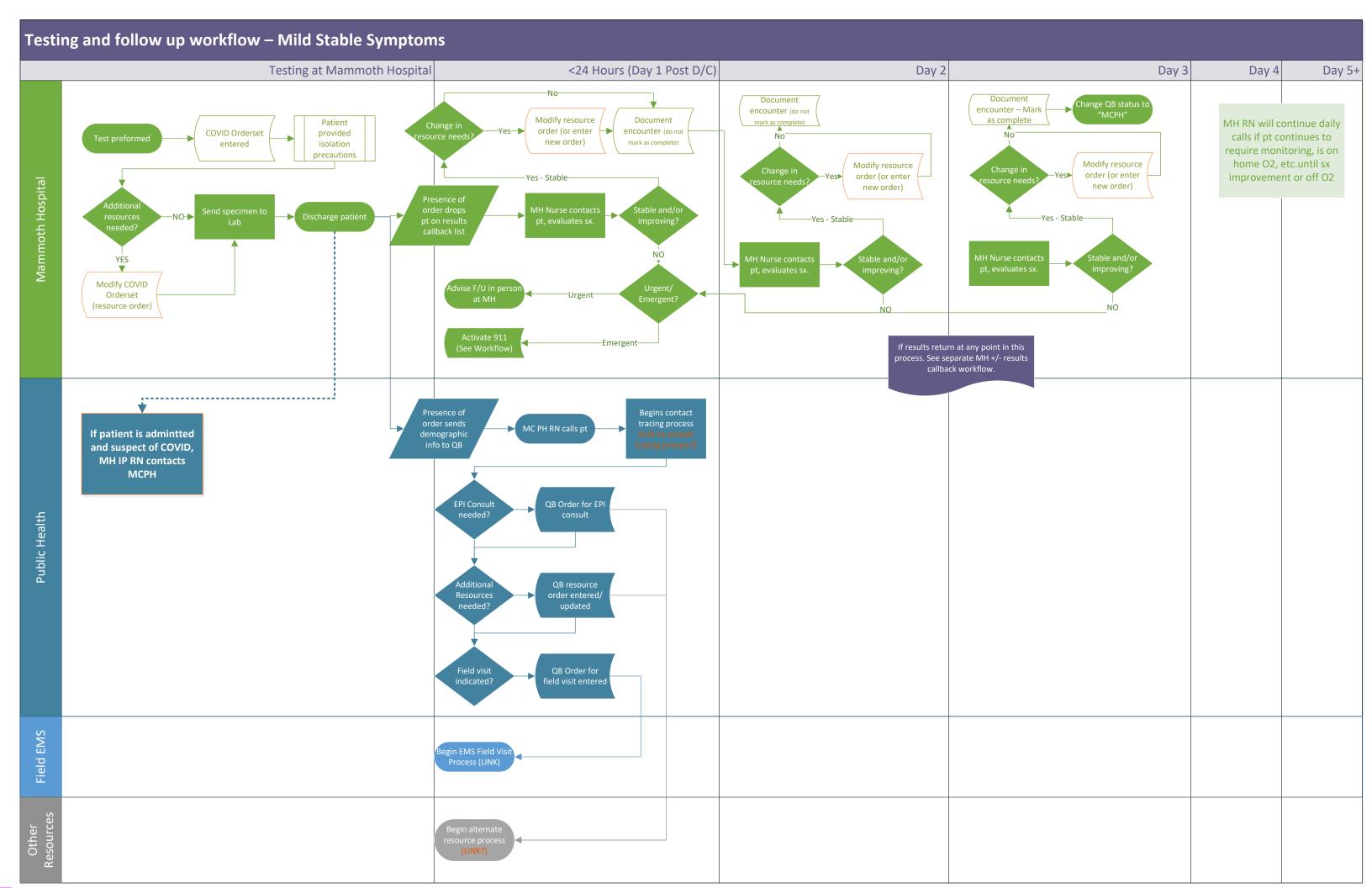


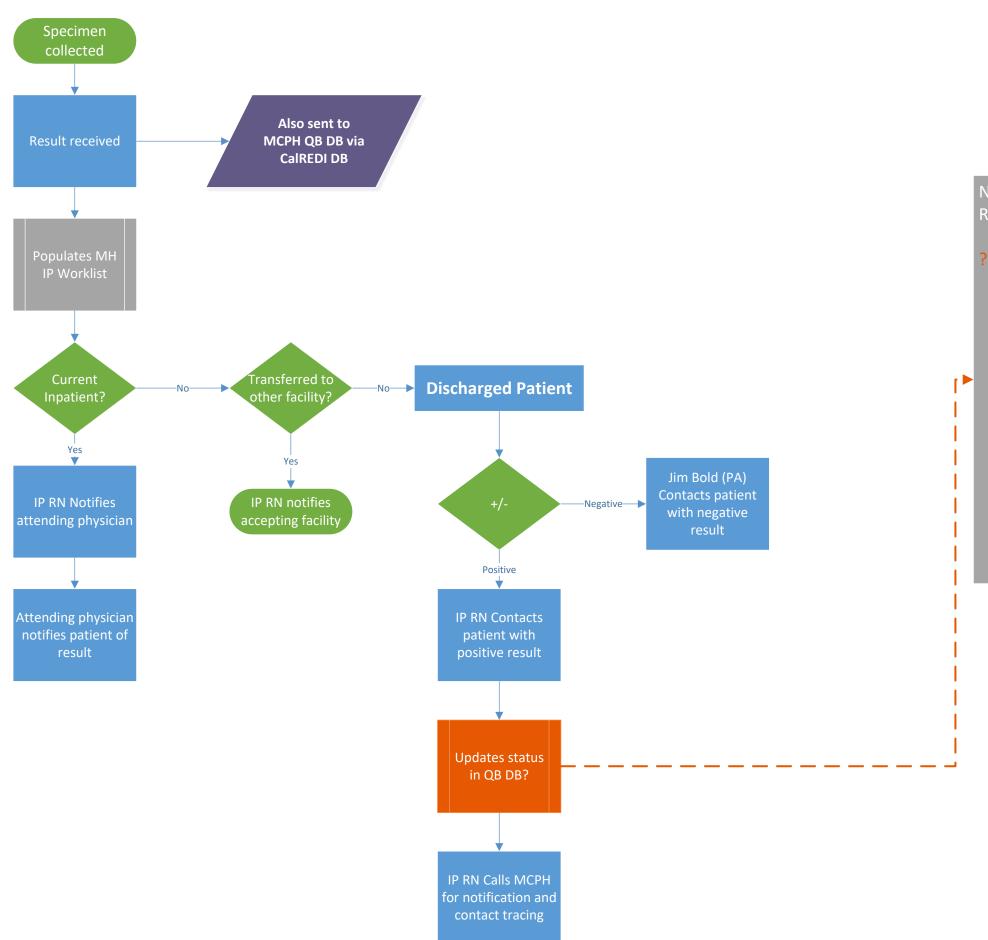












Need to confirm with MCPH and Staci Brock – Infection prevention RN at MH

?? Will Staci be updating the QB DB as well?

Mono Co. COVID-19 Home Assessment Algorithm

REQUEST FROM HOSPITAL or NURSE HOTLINE FOR HOME ASSESMENT

Dispatch Home Assessment Team from MLFD Station 2: 760-934-6567 or Lead EMT/Medic Cell Phone

PATIENT ASSESSMENT

- 1. Call pt. while en route. Ask them to come to the doorway when they hear a knock and to bring a chair and/or caregiver if necessary.
- 2. Knock on the door or ring doorbell and back away 6 feet
- 3. Perform assessment with patient in doorway. Do not enter home. Activate EMS if pt. is not ambulatory
- 4. Obtain pt. mental status
- 5. Have pt. apply pulse oximeter finger probe so as to obtain an accurate value
- 6. Document HR, RR, and Sp02
- 7. If assessing multiple patients in a single household, do so one at a time and have pt. disinfect finger probe between uses
- 8. Assess living situation for shared space, available caregivers, high risk occupants, and access to food

SpO2 < 80%, ALOC, OR Otherwise Critical?

SpO2 80-88% AND Normal Mental Status?

DISPATCH INSTRUCTIONS

Give Home Assessment Team:

- Pt. name
- Age
- Sex
- Address
- Phone number
- Pertinent medical history
- Complete list of symptoms

HOME ASSESSMENT PPE

- 1. Don N95, goggles, work uniform and footwear at station.
- 2. Don gloves upon arrival at pt. residence.
- 3. Bring 2 face coverings (1st for patient, 2nd for caregiver if present)

SpO2 > 88% AND Normal Mental Status? Able to effectively self-isolate?

YES

- 1. Direct pt. to continue self-isolation
- 2. Give pt. recontact instructions

NO

Contact Social Services for lodging, meal delivery and other needs

911 ACTIVATION

- 1. Activate 911 response
- 2. Do not initiate BLS
- 3. Assist Medics upon arrival while maintaining 6 ft. distance from pt.

NON-EMERGENT ED VISIT

- 1. Tell pt. to go to the ED now
- 2. If pt. does not have a caregiver to drive, activate 911 response
- 3. If transporting via POV, call ED and advise of incoming COVID-19 pt.

AFTER CONTACT

- 1. Remove gloves
- 2. Immediate hand hygiene
 - 3. Return to station
- 4. Discard N95, remove and disinfect goggles
 - 5. Perform hand hygiene
 - 6. Contact Care Coordinator with pt. report
 - 7. Disinfect vehicle at end of shift

Draft, Flynn, 4/4/20

FACILITIES USE AGREEMENT BETWEEN MAMMOTH UNIFIED SCHOOL DISTRICT AND MAMMOTH HOSPITAL

This Facilities Use Agreement ("Agreement") is entered into by and between Mammoth Unified School District, a public School district organized and existing under the laws of the State of California ("District"), and Mammoth Hospital, a non-profit hospital ("Hospital"). District and Hospital shall be referred to collectively as "Parties" and individually as a "Party") with reference to the following:

RECITALS

- A. District is the fee owner of real properties located at 365 Sierra Park Road and 1600 Meridian Boulevard, Mammoth Lakes, California, 93546, commonly known as Mammoth High School and Mammoth Middle School, respectively. Mammoth High School and Mammoth Middle School shall be referred to collectively as the "School facilities".
- B. Mammoth Hospital is a non-profit hospital providing emergency medical services to sick patients, including those infected with COVID-19.
- C. For the purposes of providing essential medical services due to COVID-19, the Hospital has an immediate need for a suitable space to locate and treat sick patients and has requested the use of the School facilities.
- D. The School facilities are located in an appropriate location for the staging area and the District is willing to permit use of the School facilities for a staging area under the terms and conditions of this Agreement.
- E. The Civic Center Act (Cal. Ed. Code §§ 38130 et seq.) authorizes District's governing board ("Board") or its designees to grant the use of the School facilities as a civic center upon the terms and conditions the Board deems proper.

AGREEMENT

NOW THEREFORE, in consideration of the mutual covenants and conditions contained herein, the Parties agree as follows:

- 1. <u>Purpose</u>. The purpose of this Agreement is to set out the terms and conditions under which the District will permit Hospital's use of the School facilities for providing essential medical services.
 - 2. <u>Term</u>.

- 2.1 <u>Commencement and Termination</u>. This Agreement is effective as of April 2, 2020 ("Commencement Date") and shall remain in effect until approximately June 30, 2020, ("Termination Date"), unless extended or sooner terminated as provided in this Agreement.
- 2.2 <u>Board Ratification</u>. Hospital acknowledges and agrees that, to be enforceable, this Agreement must be approved or ratified by the Board at a lawfully calendared meeting.
- 2.3 <u>Extension or Early Termination</u>. This Agreement may be extended or terminated at any time by the mutual written agreement of the Parties.
- 3. **Facilities.** For the purposes of this Agreement, District shall provide access to the School facilities specifically approved by District for Hospital use.

4. <u>Use</u>.

- 4.1 Hospital shall use the School facilities to administer essential medical services to patients and for no other purpose without the prior written consent of District.
- 4.2 Hospital agrees to use the School facilities in conformance with District's governing board policies and administrative regulations and all applicable local, state, and federal laws.
- 4.3 At all times during its scheduled use, Hospital shall provide adequate and appropriate supervision for all of its employees and/or volunteers, including the period of time immediately preceding and following scheduled meetings and/or activities on or around the parking lots or other areas of the School where employees and/or volunteers are present.

5. District's Obligations.

- 5.1 Access. The District shall provide Hospital with access to the School facilities during the term this Agreement to conduct its operations, as specified in this Agreement.
- 5.2 <u>Telephone Systems and Data Lines</u>. The District will not be able to provide its telephone systems, internet, and datalines at the School for Hospital's use during the term of this Agreement.

6. Hospital's Obligations.

- 6.1 <u>Direct Costs</u>. Hospitals agrees to pay the direct costs associated with its use of the District's utilities, supplies, janitorial services, services of any other District employees, and salaries paid District employees as specified in this Agreement. (Ed. Code § 38134(g).)
- 6.2 <u>Utilities Costs</u>. Hospital shall reimburse the District for Hospital's share of utilities costs used by the Hospital during the term of this Agreement, specifically the cost of

programming and use of the telephone systems and datalines at the School for Hospital's use during the term of this Agreement.

- 6.3 <u>Repair of School Facilities</u>. At its sole expense, Hospital shall repair, cause to be repaired, or reimburse District for damage to the School facilities that occurs as a result of Hospital's use.
- 6.4 <u>Cleaning of School Facilities</u>. At its sole expense, Hospital shall clean and disinfect, or reimburse District for cleaning, of the School facilities at the termination of the Hospital's use.
- Hospital Indemnification. Notwithstanding any insurance coverage which may 7. be in effect for the District, and in addition to any insurance carried by Hospital, Hospital agrees to indemnify District, its Board, officers, administrators, agents, contractors and employees (collectively, "District's Agents") against, and to protect, defend, and hold them harmless from all demands, claims, causes of action, liabilities, losses and judgments, and all reasonable expenses incurred in investigating or resisting the same (including reasonable attorneys' fees), for death of or injury to any person or damage to property arising out of (i) Hospital's use of the School facilities during the term of this Agreement, and (ii) Hospital's use of equipment and personal property in or on the School facilities, specifically including, without limitation, any liability, claim, loss, judgment, damage, demand, or expense, for damage to District's property and equipment; loss or damage to Hospital's personal property and to the personal property of any person using the School facilities under this Agreement; injury to or death of any person including, but not limited to, members, representatives, agents, guests, invitees, employees, and/or patients of Hospital or of the District. Hospital's obligations under this Paragraph 7 shall survive the expiration or earlier termination of the term of this Agreement.

8. Notice.

8.1 Any notice required or permitted under this Agreement shall be in writing, delivered to the Party at the address set forth below, and shall be deemed effectively delivered upon (i) personal delivery or electronic delivery or (ii) two (2) days after deposit in the United States mail, by first-class mail, postage prepaid. A Party may designate another address for notice purposes upon written notice thereof pursuant to the provisions to this section.

Attn: Jennifer Wildman

Mammoth Unified School District

P.O. Box 3509

Mammoth Lakes, CA 93546

Phone: (760) 934-6802 x512

Fax: (760)934-6803

Attn: [Insert Name] U.S. Hospital

[Insert Address]

Phone: [Insert Phone Number] Fax: [Insert Fax Number]

8.2 <u>Emergency Contact Numbers</u>. The Parties shall provide each other emergency contact phone numbers of appropriate supervisory staff, which shall be updated as needed.

Please provide a 24 Hour Contact for Mammoth Hospital (name & phone number):

DRAFT

		(name)	(position)
		(phone)	(alternate phone)
9.	Misc	ellaneous.	
between the executed by	9.1 Parties. both Pa	Entire Agreement. This Agreement sets forth the e Any amendment or modification of this Agreement arties.	ntire agreement must be in writing and
Party shall l	9.2 bear its o	Attorneys' Fees. In the event of a dispute under this own attorneys' fees and costs.	is Agreement, each
copy or an o	original, A facsin	Execution by Facsimile or in Counterparts. This A parts such that the signatures may appear on separate s with all signatures appended together, shall be deemed nile version of any Party's signature shall be deemed all be deemed an original and the same document for a	signature pages. A d a fully executed an original signature.
IN V Agreement	VITNES effective	S WHEREOF, the District and the Hospital have enter as of the date set forth in Paragraph 2.1 above.	red into this
Mammoth U	Jnified S	School District	
	I	Date:	
	I	By:	
	I	Printed Name:	
	7	îtle:	
Mammoth I	Hospital		
	Ι	Date:	
	I	By:	
	F	rinted Name:	
	Т	Title:	
2-5/4672817.1			

4

Appendix 3e - OA Med/Health Situation Report

MONO COUNTY OA MED/HEALTH SITUATION REPORT (SIT REP)/RESOURCE REQUEST

HEALTHCARE ENTITY TO MEDICAL/HEALTH OPERATIONAL AREA COORDINATOR (MHOAC)

This Sit Rep/Resource Request is a tool to efficiently communicate your <u>healthcare entity status to the MHOAC</u>. Please submit a Sit Rep once the decision has been made to activate your emergency operations plan or Hospital Command Center (HCC). If you need assistance in completing this form, or only have the time/capability to give a verbal report, please contact the MHOAC.

LI - hama F - FAV	(, O = office, S = satellite):	Il in/circle the appropriate boxes
Entity:	Person:	Contact Information:
		list until you make personal contact - circle.)
MHOAC	Dr. Tom Boo (Health Officer)	O: (760)924-1828 C: (760) 258-7092 F: (760) 924-1831 H: (760) 582-7722 tboo@mono.ca.gov
MHOAC - EMS	Chris Mokracek (Chief)	C: (907) 398-9000 cmokracek@mono.ca.gov
MHOAC - Public	Sandra Pearce (Health	O: 924-1818 C: 216-7028 H: 935-4017 F: 924-1831
Health	Director)	spearce@mono.ca.gov
Public Health DOC	IC: Liaison:	(760) 924-4608, (760) 924-4607 F: (760) 924-4611
Town of ML EOC	IC: Liaison:	IC: (760) 965-3720
Mono County EOC	Sgt. Mark Hanson (MCSO OES)	C: (760) 920-6224 (non-functional EOC) O: (760) 932-7549 x7 mhanson@monosheriff.org
FROM: (Circle or add a	pplicable information)	
		ED: (760) 924-4076 O: (760) 924-4073 C: (760) 920-1866 lori.baitx@mammothhospital.com
Mammoth Hospital- HCC	HCC if established	(760) 924-4117, Ext 2570, Op Assist: (760) 934-3311, Ext 2515/6
Northern Inyo Hospital	Gina Riesche, ED Manager	O: (760) 872-2620 C: (760) 920-1830
NIH Nurse Supervisor	Or HCC if established	C: (760) 920-3392 NIH landline: (760) 873-5811 HCC: (760) 873-2810
Pioneer HHC/Hospice	Pat West	O: (760) 872-4663 F: (760) 872-4655 C: (760) 784-1009 H: (760) 873-6481
Toiyabe Clinic Antelope Valley	Rachel Kallenmeyn	O: (530) 495-2100 C: (972)953-5102 rkallenmeynn@toiyabe.us
Sierra Life Flight	Mike Patterson	O: (760) 872-2201 C: (760) 784-1520 F: (760) 872-2192
Air-Way Medical	Glenn Steinke	O: (760) 872-1117 C (GS): (760) 937-0624
MWTC Clinic	Rotate Position	O: (760) 932-1616 or (760) 932-1617 F: (760) 932-7112
MWTC	Duty Commander	O: (760) 932-1401

Estimated # of persons affected at your facility: Total # from this incident: Contaminated: Fatalities: Injured: Exposed: Untreated (waiting): Treated (released): Treated (admitted): Transferred: MH (by triage category) Red: Yellow: Green: Capability/Capacity (available means staffed, equipped, and empty/not being used) (enter # or circle): ICU beds: OR rooms: ED open/functional: Y N Ventilators available: Medical/surgical beds: Airborne isolation rooms: Decon available: YN

<u>Current Priorities/Actions Taken/Critical Issues</u> (Circle and describe) (e.g., call out, early discharge, cancel elective procedures, evacuation on/off site/ shelter-in-place, PIO messages, safety concerns, immediate needs, etc.:

Resource Requests

	Priori Circle		Detailed Specific Items: equipment, supplies, medications, staff, other	Unit (each, dozen, box, case, etc.)	Quantity (#)	Estimated duration of use	Comments
E	U	S	Testing Swabs and Medium	1,000	each		Please and Thank You.
E	U	S		1			
E	U	S					
E	U	S			AL AND		
E	U	S		-			

E = Emergent (needed in <12 hours); U = Urgent (needed in >12 hours); S = Sustainment (need to sustain ops)

Examples of items: equipment/supplies: name, capabilities, output, capacity, IV supplies, masks, vaccine, food, water, generator; and/or **medications**: drug name (generic and brand name), dosage form, unit of use package or volume, strength, etc.; and/or **staff**: experience, licensure, DHV, pharmacist, RN (OR/ICU/OB/Surgical), MD, food service, environmental; and/or **other**: transportation (air, ground, handicapped), disaster cache, tent, decontamination supplies

The requestor confirms that the following requirements have been met:

- The availability of each resource being requested is now or will be exhausted shortly.
- The requesting entity is unable to obtain the resources within a reasonable time frame based on priority level indicated from vendors, contractors, MOU's, department, or corporate sources.
- The requesting entity is unable to obtain resources from other non-traditional sources.
- The requesting entity recognizes that it will be fully responsible for the costs associated with this request.

Signature of authorized agent of requesting entity: Patrick Duggan / Mammoth Hospital	
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Chris Mokracek

From:

Debbie Diaz

Sent:

Tuesday, April 21, 2020 12:45 PM

To:

Chris Mokracek

Cc:

Patrick Duggan; Staci Brock

Subject:

4.21.20 Resource Request - Mammoth Hospital EMERGENT!

Attachments:

4.21.20 Resource Request - Mammoth Hospital Mono OA Med H Sit Rep HCF MHOAC version 11.13.19 (3),docx; 4.21.20 ResourceRequest-Mammoth Hospital -Medical and

Health-OP AREA to REGION-STATE Official.xlsx

Re: 4.21.20 Resource Request EMERGENT - Mammoth Hospital

To: Chris Mokracek, Mono County EMS Chief, EOC Branch Manager, and Alternate MHOAC

Attached is a Resource Request from Mammoth Hospital for 1,000 testing swabs and mediums. See email below with explanation from Staci Brock, Mammoth Hospital Infection Control Coordinator.

MH has put their request on the custom form that we have put together for our Mono-Inyo Healthcare Coalition, however, in the COVID-19 pandemic, CDPH has requested that we put Resource Requests on the other form attached. I have filled in this form.

Signature is required from the MHOAC. Should you need to change names on the form i.e. Dr. Thomas Boo to Chris Mokracek/Deb Diaz to Justin Nalder, please do so. Please cc: me once this is sent up to:

- CDPH Cdphdutyofficer@cdph.ca.gov
- EMSA emsadutyofficer@emsa.ca.gov
- MHCCSITREPS&ResourceRequests (CDPH-EPO) MHCCSITREPS&ResourceRequests@cdph.ca.gov
- Region VI Disaster Medical Health Specialist <u>rdmhs6@rivco.org</u>

Let me know should you have any questions.

Thanks, Deb

Triage Process for patients with URI/COUGH/FEVER

3/17/20

<u>All patients entering the hospital at the Emergency department entrance</u> will be directed to the triage window by physical barriers and Admitting staff.

(Patients who call from the parking lot will be asked to park in the handicap spaces and come to the triage window.)

Greeter asks chief complaint and if any cough, fever or cold symptoms.

- Infectious patients will be asked to mask and hand sanitize.
 - No contact triaged through window by RN. CONTINUE ON PROTOCOL.
- Non-infectious patients will be brought to regular ER by ward clerk. STOP PROTOCOL

Greeter gets initial information (for pts not going to regular ER

- Name, DOB and Cell Number on the information form

RN assigned to triage area will assess patient thru the closed window and determine if they can return to their car or must be brought into triage for assessment: Children <5 years old, patients without phone/car, and patients appearing unfit/unwell for car evaluation will be brought in to triage.

Clerk and RN will call patient in car to get registration and triage history

MD will call patient, perform history. Then, physician directs pt to drive to ambulance bay.

MD PPE: Don mask and eyewear. MD will don protective gown ONLY if feels patient is high risk (ie cough/fever). MD will remove "clean" sticker from vitals cart and take cart outside for patient assessment.

MD assessment in the car: PE including vitals- HR, RR, Skin Temp, and Pulse Oximetry. No BP.

- -If MD feels necessary, patient will be brought to triage for further assessment.
- -If patient can be discharged, the patient will wait for discharge paperwork (if necessary).

MD will document vitals on yellow sticky and stick to cart. Tech or RN will enter vitals and clean cart.

<u>Vitals Cart Cleaning</u>: The VS equipment, stethoscope, and otoscope will be cleaned by the EMT. Then, "clean" sticker will be placed on the <u>vital sign screen</u> so MD will be sure to remove before contamination with next patient.

<u>DC instructions/Rx</u> may be given to the patient at the time of exam (some physicians will pre-print d/c instructions after phone hx and hand to patient at time of exam). Otherwise, they will be printed by charge nurse, who will ONLY mask/eyewear (no gown) and hand to patient through car window.

Appendix 3g - Discharge Process

Draft 4-29-20

Discharge Process for PUI/COVID Patients

Emergency Department MAMMOTH HOSPITAL

- 1. Patient is identified as Person Under Investigation (PUI) for COVID-19 or is known positive.
- 2. Patient is determined to be "Homeless" or who would put a family member at risk for COVID-19 if they returned home.
- 3. Mono County Shelter (hotel) Referral is completed with referral from a medical provider (signature of medical provider is required).
- 4. Email completed form to eoclogistics@mono.ca.gov.
- 5. Phone call to EOC @ 760-xxx-xxxx with the following considerations:
 - 1. During the night hours (9pm to 7am) if number of patients requiring care does not impact the ED, wait until 7am to call. If ED requires the patient to be discharge due to patient volumes, call immediately.
 - 2. Anticipate that EOC will require 2 to 3 hours to arrange the hotel room.
- 6. EOC will provide room number to the Hospital ED staff.
- 7. Give discharge instructions to the patient. Additional instructions related to isolation are located here: Hospital Intranet>Coronavirus Information (link at top of page)>Discharge Info COVID Eng Span. These instructions are approved by both the EOC and Hospital for use with our patients.
- 8. EOC will provide orientation information to the patient on food service, check in phone calls and daily assessment.
- 9. ED staff will work with House Supervisor and EOC to identify transportation to hotel room {this is from Inyo's process: available staff to walk or push the patient via wheelchair to the hotel room. This may include an ED Staff member and Security, or other available staff from other units. Staff should go in teams of two (2) to escort the patient to the hotel. Staff shall wear appropriate PPE.
- 10. The hotel will have the room open, thus avoiding contact with the hotel staff.
- 11. Upon return to NIHD, staff will doff PPE and disinfect any equipment utilized for patient. Complete hand hygiene.
- 12. EOC will notify food service {need to determine food service provider daily to coordinate food preparation. {Mammoth Hospital uses Northern Inyo Hospital Dietary Service to provide 3 meals per day}

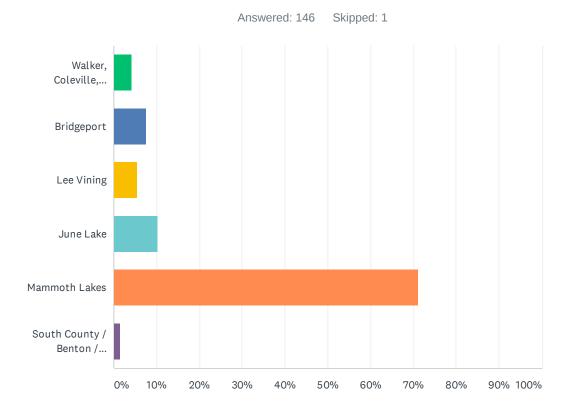
Draft 4-29-20

13. EOC will provide supportive services for the duration of stay in motel. Public Health will determine length of stay via established criteria.

Key Indicator 5 Appendix

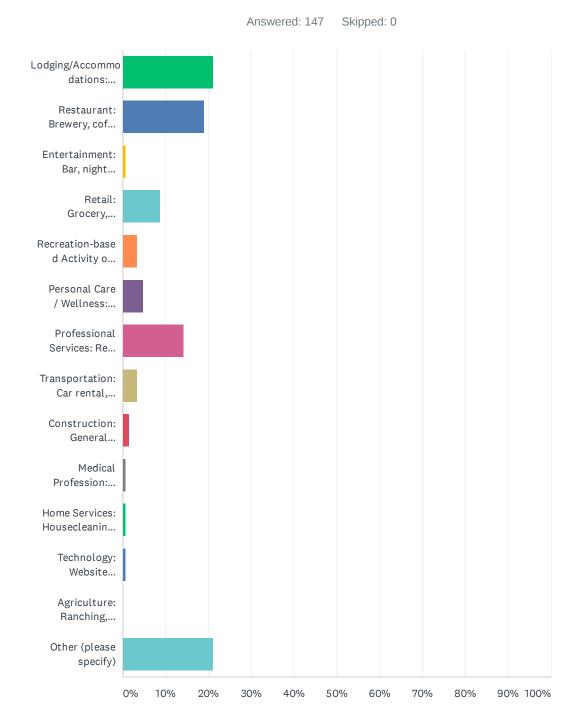
Appendix 5a - Business Needs Survey

Q1 In what region is your business located?



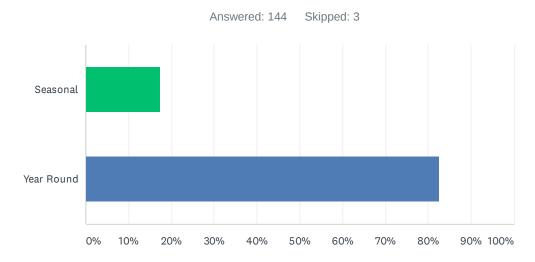
ANSWER CHOICES	RESPONSES	
Walker, Coleville, Topaz	4.11%	6
Bridgeport	7.53%	11
Lee Vining	5.48%	8
June Lake	10.27%	15
Mammoth Lakes	71.23%	104
South County / Benton / Crowley Lake	1.37%	2
TOTAL		146

Q2 Why type of business do you own?



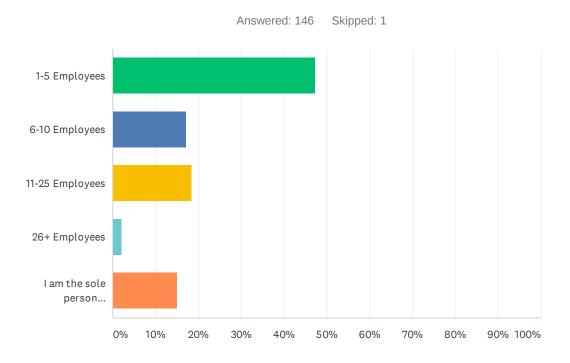
ANSWER CHOICES	RESPONS	SES
Lodging/Accommodations: Motel, hotel, condo, cabins, Air B&B/VRBO, campground, RV Park, etc.	21.09%	31
Restaurant: Brewery, coffee shop, bakery, etc.	19.05%	28
Entertainment: Bar, night club, concert venue, theater, etc.	0.68%	1
Retail: Grocery, Pharmacy, pet store, hardware, artisan/gallery, sports store, etc.	8.84%	13
Recreation-based Activity or Service: Ski Area, fishing guide, marina, bowling, etc.	3.40%	5
Personal Care / Wellness: Athletic club, hair/nail/beauty salon, barber shop, massage, spa, etc.	4.76%	7
Professional Services: Real estate, property management, legal, accounting, engineering, consulting, etc	14.29%	21
Transportation: Car rental, taxi, gas station, automotive repair, etc.	3.40%	5
Construction: General contractor, trades, plumbing, painting/drywall, HVAC, etc.	1.36%	2
Medical Profession: Dentist, chiropractor, psychologist, etc.	0.68%	1
Home Services: Housecleaning, carpet cleaning, landscaping, etc.	0.68%	1
Technology: Website developer, computer services, etc.	0.68%	1
Agriculture: Ranching, crops, livestock, nursery, etc.	0.00%	0
Other (please specify)	21.09%	31
TOTAL		147

Q3 Is your business seasonal or year-round?



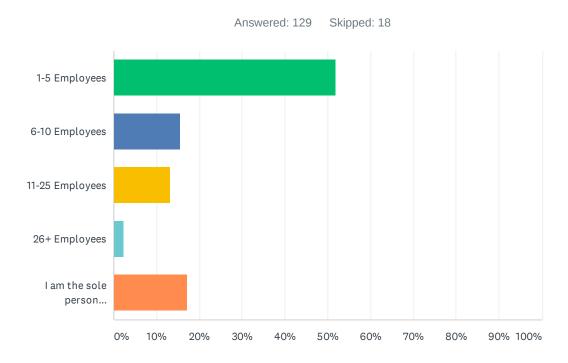
ANSWER CHOICES	RESPONSES	
Seasonal	17.36%	25
Year Round	82.64%	119
TOTAL		144

Q4 How many people do you employ FULL TIME at your place of business?



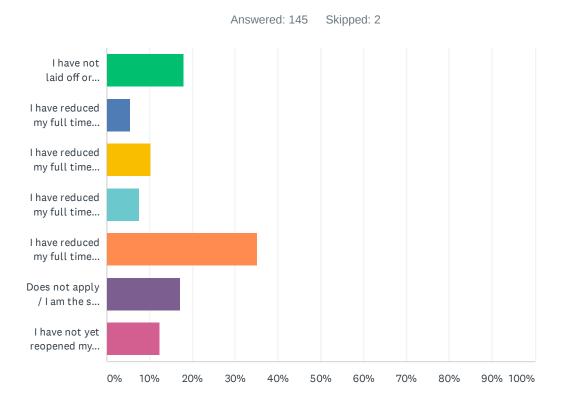
ANSWER CHOICES	RESPONSES	
1-5 Employees	47.26%	69
6-10 Employees	17.12%	25
11-25 Employees	18.49%	27
26+ Employees	2.05%	3
I am the sole person operating my business	15.07%	22
TOTAL		146

Q5 How many people do you employ PART TIME at your place of business?



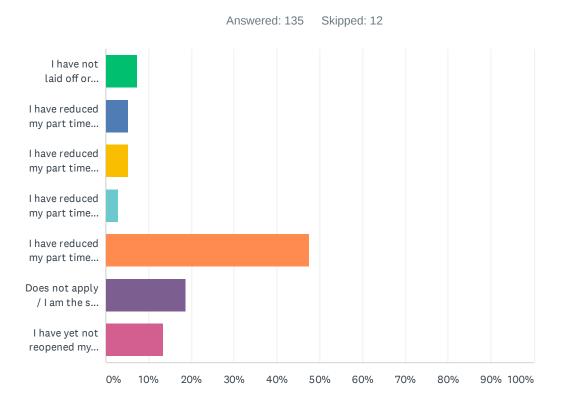
ANSWER CHOICES	RESPONSES	
1-5 Employees	51.94%	67
6-10 Employees	15.50%	20
11-25 Employees	13.18%	17
26+ Employees	2.33%	3
I am the sole person operating my business	17.05%	22
TOTAL		129

Q6 Have you had to decrease hours or lay off your FULL TIME workforce?



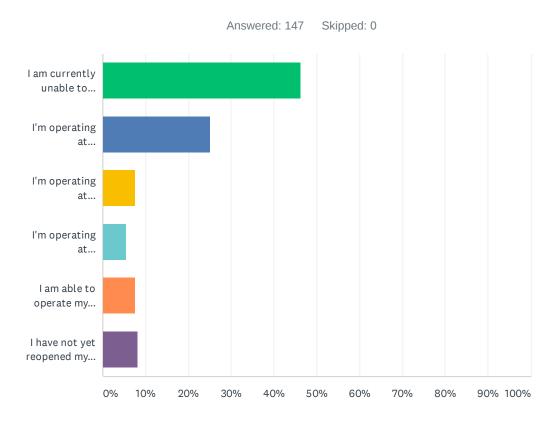
ANSWER CHOICES	RESPONSES	
I have not laid off or decreased hours of any of my full time employees	17.93%	26
I have reduced my full time workforce hours by 5-25%	5.52%	8
I have reduced my full time workforce hours by 26-50%	10.34%	15
I have reduced my full time workforce hours by 51-75%	7.59%	11
I have reduced my full time workforce hours by 76-100%	35.17%	51
Does not apply / I am the sole operator of my business	17.24%	25
I have not yet reopened my seasonal business	12.41%	18
Total Respondents: 145		

Q7 Have you had to decrease hours or lay off your PART TIME workforce?



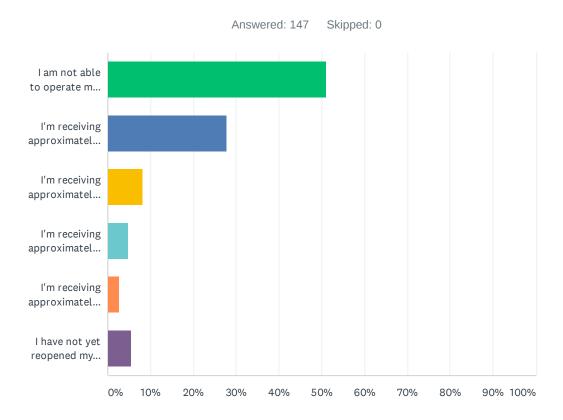
ANSWER CHOICES	RESPONSES	
I have not laid off or decreased hours of any of my part time workforce	7.41%	10
I have reduced my part time workforce hours by 5-25%	5.19%	7
I have reduced my part time workforce hours by 26-50%	5.19%	7
I have reduced my part time workforce hours by 51-75%	2.96%	4
I have reduced my part time workforce hours by 76-100%	47.41%	64
Does not apply / I am the sole operator of my business	18.52%	25
I have yet not reopened my seasonal business	13.33%	18
TOTAL		135

Q8 How fully is your business operating under the current COVID-19 directives?



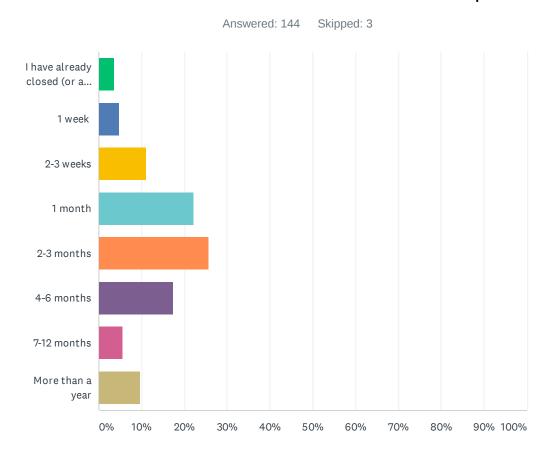
ANSWER CHOICES	RESPONSES	;
I am currently unable to operate my business	46.26%	68
I'm operating at approximately 25% capacity	25.17%	37
I'm operating at approximately 50% capacity	7.48%	11
I'm operating at approximately 75% capacity	5.44%	8
I am able to operate my business at 100% as normal, or with some minor modifications	7.48%	11
I have not yet reopened my seasonal business	8.16%	12
TOTAL		147

Q9 How has the current COVID-19 situation affected your business revenue?



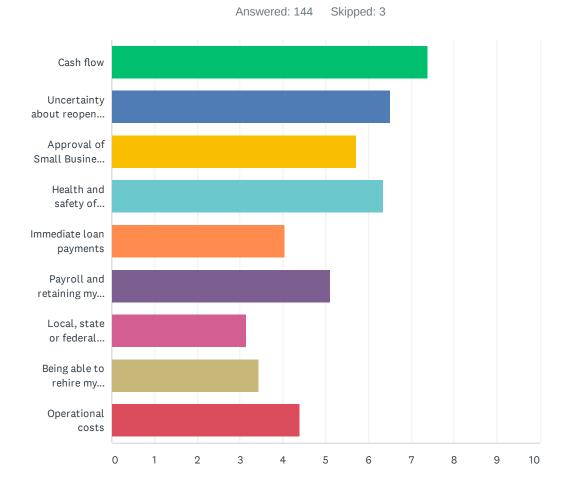
ANSWER CHOICES	RESPONSES	
I am not able to operate my business and have no revenue coming in	51.02%	75
I'm receiving approximately 25% of normal operating revenues	27.89%	41
I'm receiving approximately 50% of normal operating revenues	8.16%	12
I'm receiving approximately 75% of normal operating revenues	4.76%	7
I'm receiving approximately 100% of normal operating revenues	2.72%	4
I have not yet reopened my seasonal business	5.44%	8
TOTAL		147

Q10 By your estimate, how much longer can your operation survive if the current business and economic conditions persist?



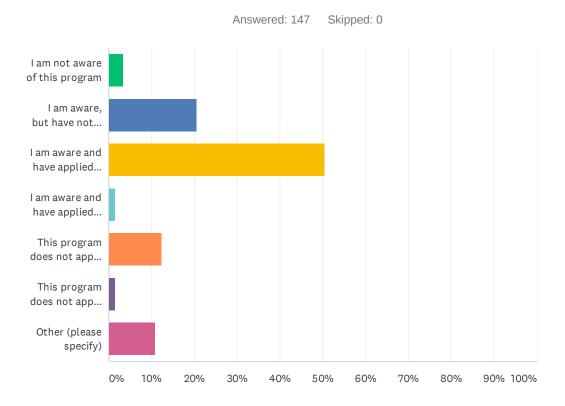
ANSWER CHOICES	RESPONSES	
I have already closed (or am in the process of closing) my business permanently	3.47%	5
1 week	4.86%	7
2-3 weeks	11.11%	16
1 month	22.22%	32
2-3 months	25.69%	37
4-6 months	17.36%	25
7-12 months	5.56%	8
More than a year	9.72%	14
TOTAL		144

Q11 What Is the greatest concern for your business right now?



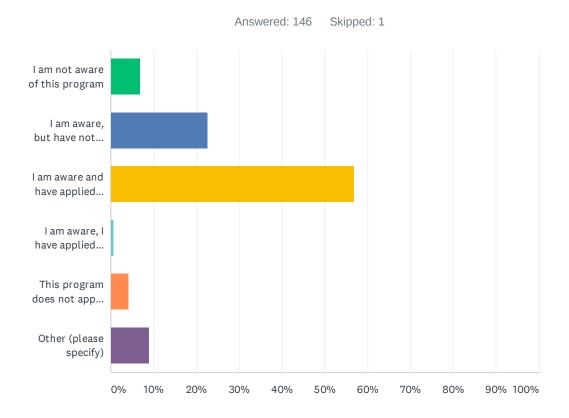
	1	2	3	4	5	6	7	8	9	TOTAL	SCORE
Cash flow	40.63% 52	22.66% 29	14.06% 18	6.25% 8	3.91% 5	5.47% 7	3.13% 4	0.78% 1	3.13% 4	128	7.38
Uncertainty about reopening and the timing of when business will return to normal, or close to normal	26.23% 32	21.31% 26	9.84%	11.48%	11.48%	4.92% 6	5.74% 7	3.28%	5.74% 7	122	6.51
Approval of Small Business Administration (SBA) relief funding	3.45%	16.38% 19	23.28%	17.24% 20	11.21%	13.79% 16	4.31% 5	7.76% 9	2.59%	116	5.71
Health and safety of employees and/or community	24.59%	16.39% 20	13.11% 16	13.11% 16	9.84%	5.74% 7	8.20% 10	4.10% 5	4.92% 6	122	6.33
Immediate loan payments	1.74%	6.96%	9.57% 11	6.96%	19.13% 22	11.30% 13	11.30% 13	14.78% 17	18.26% 21	115	4.03
Payroll and retaining my employees	1.64%	12.30% 15	14.75% 18	15.57% 19	16.39% 20	17.21% 21	9.02% 11	9.02%	4.10% 5	122	5.10
Local, state or federal taxes	2.50%	0.83%	3.33%	7.50% 9	5.83% 7	10.83% 13	28.33% 34	17.50% 21	23.33% 28	120	3.13
Being able to rehire my employees and other qualified people when business levels resume	1.68%	1.68%	8.40%	7.56% 9	8.40%	15.97% 19	11.76% 14	25.21%	19.33% 23	119	3.44
Operational costs	6.35% 8	7.14% 9	7.94% 10	14.29% 18	12.70% 16	11.11% 14	11.11% 14	13.49% 17	15.87% 20	126	4.40

Q12 Are you aware of the SBA Paycheck Protection Program and have you applied?



ANSWER CHOICES	RESPONSES	
I am not aware of this program	3.40%	5
I am aware, but have not applied	20.41%	30
I am aware and have applied through a bank but have NOT received any money	50.34%	74
I am aware and have applied through a bank and have received my money	1.36%	2
This program does not apply to me because I have no employees	12.24%	18
This program does not apply to me because I pay my employees under the table	1.36%	2
Other (please specify)	10.88%	16
TOTAL		147

Q13 Are you aware of the SBA Economic Injury Loan or the \$10,000 advancement?



ANSWER CHOICES	RESPONSES	
I am not aware of this program	6.85%	10
I am aware, but have not applied	22.60%	33
I am aware and have applied but not received any money	56.85%	83
I am aware, I have applied and have received my money	0.68%	1
This program does not apply to my business	4.11%	6
Other (please specify)	8.90%	13
TOTAL		146

Q14 Do you have any recommendations and/or constructive ideas on how local government or chambers of commerce can help your business?

Answered: 78 Skipped: 69

Q15 Do you have any other recommendations and/or constructive ideas that would help your business?

Answered: 57 Skipped: 90



Surge Child Care Policy

- 1. Child care will be held in a large, ventilated room with direct bathroom access.
- 2. There will be no more the five children and two staff per classroom.
- 3. The classroom shall be 245 square feet for five children and two adults
- 4. Staff and children are to be screened for illness and fever, Hands free, and questioned about any current illness before entering the classroom.
- 5. Staff and children who are ill or show signs of illness will not be allowed to enter the classroom.
- Child care providers in high-risk covid-19 infection categories are not permitted to provide
 care. See the following CDC link. https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-
 - risk.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fspecific-groups%2Fpeople-at-higher-risk.html
- 7. All surfaces in the classroom and bathroom will be cleaned every 90 minutes with an EPA covid-19 certified disinfected. See attached document of EPA disinfectants.



- 8. Both staff and children will practice hand hygiene every 60 minutes. Wash with soap and water for 20 seconds if hand santizer is not available.
- 9. Clean the classroom before and after child care operations. See the following link from the CDC https://www.cdc.gov/coronavirus/2019-ncov/prepare/disinfecting-building-facility.html
- 10. Use protective gloves when cleaning, and surgical masks at all times. (Adults only)

Appendix 5c - Business Guidelines

MONO COUNTY HEALTH DEPARTMENT Public Health Officer

P.O. BOX 3329, MAMMOTH LAKES, CA 93546 PHONE (760) 924-1830 •

FAX (760) 924-1831 EMAIL TBOO@MONO.CA.GOV

May 1, 2020

Guidelines for Businesses during the COVID-19 Pandemic

An important note about this document: The safety practices outlined in this document are framed as either requirements or recommendations, but stakeholders should keep in mind continued uncertainty about whether the State of California is going to produce California-wide standards which might supersede local efforts. In the public health world, facing this pandemic, Mono County is permitted to be stricter than the State if it is appropriate, but not more lenient. In the event any of these requirements or recommendations conflict with (or are less strict than) State law or regulation, State law or regulation shall govern.

We will be living with this epidemic disease for some time, trying to balance economic activity against uncontrolled virus spread. These guidelines for business practices in Mono County are consistent with the concepts that we have been preaching for weeks: distancing, hygiene (surfaces, hands, cough/sneeze/talk), and face coverings. One hopes that prominent hygiene practices will build customer confidence. With widespread adoption, it may be possible to promote Mono County as a safer place to visit.

Required of all Businesses:

• Exclude ill persons

This is paramount for employees and proprietors. The Mono County Public Health (Public Health) Order dated March 24, 2020, orders all ill staff to be excluded from work and requires employers to either screen employees daily or obtain written agreement from staff that they will report illness to the employer. For specified guidance and details on symptom screening, refer to the March 24th Order.

Ill persons must stay home, and we recommend seeking medical advice and testing whenever COVID-19 is considered a possibility (for additional guidance, call the Mono Nurse Hotline at 211 or (760) 924-1830). Ill persons must isolate themselves for a minimum of 10 days *AND*, prior to returning to work, must have had no fever for 3 consecutive days *AND* other symptoms (e.g., cough, headache, body aches) must be gone. Sole proprietors who are ill must close their businesses, or arrange for alternative management of the business, until above criteria are met.

Employers and their staff should be aware that the inability to work due to COVID-19-related isolation and quarantine ordered by Public Health , may trigger eligibility for the State Employment Development Department's disability program and work-related exposures to the virus may trigger eligibility for State Workers Compensation Insurance coverage.

As much as possible, have employees keep a log of their daily contacts. This way, if an employee becomes infected, the business can provide this information to Mono County Public Health who will alert all possibly exposed persons in order to minimize further virus transmission.

All persons, employees and customers, must wear face coverings/masks (for additional details on this
mandate, refer to the Public Health Order dated April 30, 2020). As noted below, restaurant customers
are not required to use face coverings while eating and drinking.

- Provide hand washing or sanitizing opportunities for customers at the door (and/or other locations throughout the store) and require use upon entry.
- If feasible, consider providing single-use face coverings at door in case a customer forgets their own.
- Maintain distancing. Consider limiting the number of persons in the facility at any given time to ensure unrelated persons can safely maintain 6-feet of psychical separation.
- Implement measures to ensure mandated spacing at registers and front desks (e.g., visual markers, arranged walkways, etc.).
- Require all employees to wash and/or sanitize hands frequently (see individual business categories below for additional guidance).
- Ensure frequent and diligent cleaning of common surfaces with a disinfectant that is EPA-labeled for
 viruses or 10% bleach solution (1-part bleach to 9-parts water, mixed fresh daily). Test strips for the
 concentration of bleach solutions are available and are commonly used for restaurant dishwashers. If
 test strips are used, the objective is to maintain bleach concentration at or above 200 parts per million
 ppm.

Recommended for all Businesses:

- No touch doors are desirable, but if not feasible, keep doors open as much as possible, or implement other measures to help reduce contact.
- Implement no-touch payment options. If this is not feasible, implement measures to minimize contact with surfaces and exchanges between staff and customers and routinely sanitize hands and any shared surfaces. The use of plastic coverings over payment structures is a good alternative to no-touch payment and may facilitate disinfection. If used, the plastic coverings should be changed regularly. It is okay to accept cash; cashiers handling cash should have ready access to hand hygiene (washing or disinfection).
- Temperature screening at entry may be considered and may help convey the impression of a safe and healthy environment, but effectiveness is unknown as it would not identify the many people with COVID-19 who do not exhibit fever or other symptoms

Retail Businesses:

Recommended

- If customers are handling merchandise, suggest they practice frequent hand hygiene to protect themselves and others.
- Consider signage throughout the store to encourage best practices.
- Maintain distancing. Consider limiting the number of persons in the facility at any given time to ensure unrelated persons can safely maintain 6-feet of physical separation.
- Cashiers should have ready access to hand hygiene (washing or disinfection) and all employees should
 practice effective and frequent hand hygiene (ideally between each customer). Gloves for retail
 employees are not recommended and should not be worn for multiple transactions at the register as
 they are just as likely to transmit viruses and bacteria as are unwashed hands.
- Consider installing plexiglass barriers at counters/registers at a height taller than adult eye level to protect both customer and employee. Though the effectiveness remains unknown, such barriers are expected to decrease droplet transmission.

- Consider curbside pick-up and delivery services where feasible.
- Consider prohibiting customers from bringing in their own bags or baskets; however if they are allowed, customers should be expected to load their own carriers without employee assistance and employees should take measures to clean the surfaces on which the carriers were set so as to minimize contact with such outside items.
- Consider not allowing product returns or exchanges.
- For rental operations, consider keeping returned rental items on shelf for 24 hours before renting again and, in any event, ensure all returned items are thoroughly cleaned and disinfected upon return, either by the customer or by an employee using personal protective equipment.
- Consider temporarily prohibiting customers from trying on clothing.

Retail Businesses:

Required

- Maintain distancing between diners by arranging tables at least 6 feet apart, including counter/bar seating for unrelated persons.
 - Public Health has no objection to outdoor tables, but we recommend that restaurants adding outdoor tables confer with Town/County Planning to ensure compliance with any applicable State or local regulations.
- Restaurants and staff must follow all applicable provisions of the California Retail Food Code found in
 Division 104 Part 7 of the California Health and Safety Code and hands must be washed or disinfected
 after every customer contact as well as after using restroom, eating, drinking, or touching face, taking
 out garbage, exposure to common surfaces or after engaging in any other activity that contaminate
 hands, including but not limited to handling cash.
 - Gloves are optional and if used *must* be changed as often and in the same instances as hands would be washed or disinfected pursuant to State law.
 - o Disposable gloves shall not be cleaned and re-used.
- Employees must use face coverings/masks
 - Customers are required to have face coverings when out in public and should be encouraged to use face coverings in the establishment when not eating and drinking.
 - Consider higher level face coverings (e.g. surgical masks) for restaurant staffs working tables,
 since customers will not be covering their faces while dining
- Eliminate customer salad bars, buffets, and other self-serve offerings. Self-serve drinking stations are oaky, but only single-use cups may be used.
- Use digital, disposable or plastic-laminated (disinfectable) menus.
- If feasible, consider mobile ordering for dine in and take out orders and use of white boards for menus.
- Frequent diligent cleaning and disinfecting of surfaces, including menus, using effective product
 (disinfectant EPA-labeled for coronaviruses or 10% bleach which should be maintained at 200 ppm; can
 use the test strips used for dishwashers).

- Recommend lists of high touch surfaces and written protocols for cleaning such areas, e.g. tables, sinks, faucets, light switches, phones, toilets, keyboards, door handles
- Avoid condiments on tables- provide clean condiments upon request. Condiment bottles should be cleaned after each use or single-serving packages of condiments can be provided upon request.
- All eating utensils must be dispensed by employees. Eliminate customer self-serve eating utensil displays.
- Avoid placing water pitchers on tables unless pitchers can be washed between tables and patrons are comfortable sharing at a table
- Mandate spacing at register, if applicable.
- At self-serve soda machines, a glass or cup should be used just once.
- Eliminate coffee self-serve stations, consider doing all coffee extras behind the counter

A. RECOMMENDED <u>TO BE COMPLETED</u>

- Clean silverware may be placed on clean tables but should not be left for long periods of time, in order to prevent contamination by customers.
 - o Recommend that silverware should be rolled in clean linen or napkin "roll ups".
 - Consider option customers to bring their own cutlery.
- Shared wine bottles purchased by customers can be left on table in most situations. Avoid leaving bottles for sale on tables.
- Rearrange workstations so food preparers and servers are as far apart as possible and not facing one another.
- Restrooms-increase cleaning and disinfection efforts in addition to state law requirements. Consider
 encouraging patrons to use restroom at home as much as possible, but not at the expense of
 appropriate handwashing!
- Consider curbside pick-up and delivery service where feasible.
- Hand sanitizer at each table would be a nice feature, if affordable and sustainable.

Hotels/Lodging:

A. REQUIRED TO BE COMPLETED

- Ensure distancing-avoid crowding at desk and other places
- Clean/disinfect check-in area after each encounter
- All bedding in the unit (used or unused) including duvets, comforters, or throw blankets should be laundered between each guest.
- Maintain lists of high touch surfaces and written protocols for cleaning such areas, e.g. tables, sinks, faucets, light switches, phones, toilets, keyboards, door handles
- Frequent diligent cleaning and disinfecting of hotel common area surfaces using effective product (10% bleach maintained at 200 ppm (can use test strips used for dishwashers) or a disinfectant that is EPA-labeled for coronaviruses).
 - Consider logbook for cleaning and disinfection
- Eliminate self-serve breakfast and other scenarios.
- Housekeeping safety issues
 - Housekeeping staff should have disposable gloves and gowns are recommended

- Do not clean rooms for 24 hours after checkout and routine ventilation of rooms before cleaning.
 - Ventilate rooms prior to cleaning
 - o Ask guests to bag their own linen
 - o Do not shake dirty laundry.

B. RECOMMENDED <u>TO BE COMPLETED</u>

- Consider plexiglass barriers at reception desk (effectiveness unknown but expected to reduce risk of droplet transmission).
- No touch check-in and check-out recommended. Actual practices may vary.
- Strongly consider closing common areas where people gather. If these are left open facilitate distancing, with flexibility for family groups.
 - Consider closing game rooms.
- Pools OK if distancing maintained.
- Spa use should be limited to members of a single-family group at a time.
 - Spas should be cleaned between users.
- For pillows, changing pillowcases is adequate, but may consider washing pillows or using double pillow cases.
- Do not routinely leave ice buckets, TV remote control, soap, shampoo, coffee, etc., in room but instead provide at check-in on request.
- Throw pillows should be removed from rooms.
- Provide small packs of tissue to guests rather than leaving boxes/dispensers with larger supplies in rooms.
- Consider automatic lighting sensors.
- Recommend providing disinfection wipes in rooms for guest use.
- In any eating areas maintain distancing-tables at least 6 feet apart (refer to restaurants for this).
- Abundant and prominent hand sanitizer in eating areas.
- No condiments on tables (provide clean condiments upon request).
- Elevators-recommend only one or two unrelated persons use elevator at one time; wiped down, provide sanitizer at the elevator entraining.
- For lodging with kitchens and cooking instruments, equipment, contraptions, utilities, it may not be feasible to clean everything between guests. Recommend advising guests of business practices so that guests may take their own precautions.
- Daily in-room cleaning service not recommended, for safety of staff. Drop off requests at door are okay.

RV Parks ... To be completed

- Many recommendations for other lodging businesses (above) may apply.
- Recommend no-contact check-in.
- Recommend closing bathrooms (or very frequent and diligent cleaning).
- Self-contained RVs preferred as bathrooms not required.
- Recommend closing club houses and game rooms.

Public Transportation (buses, taxis, shuttles)- <u>To Be Completed</u>

- No unrelated passengers or groups (i.e. people not traveling together).
- Larger vehicles, e.g. buses, shall facilitate distancing of at least six feet between unrelated passengers.
- Drivers and passengers shall wear masks/face coverings
- Clean/disinfect vehicle after each transport.
- Recommend providing hand sanitizer and antiseptic wipes to passengers.

	Date
Thomas Boo, MD Mono Co./TOML Health Officer	

Key Indicator 6 Appendix

