

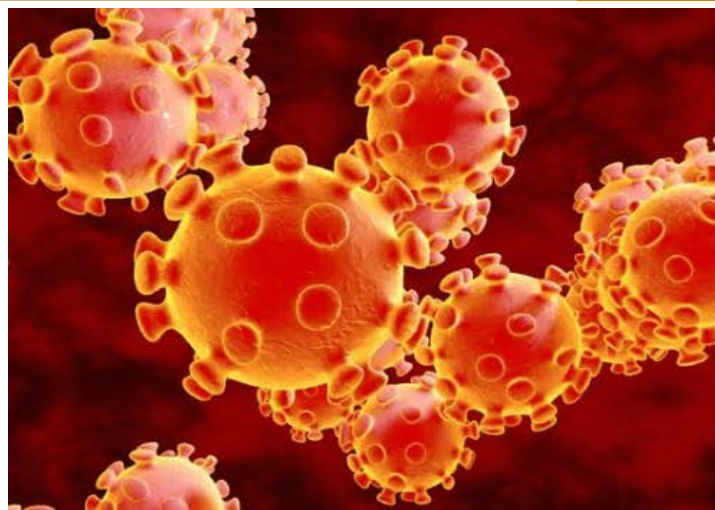


Updates for Treatment Providers on Novel Coronavirus (COVID-19)

March 17, 2020

Los Angeles Department of Public Health
Substance Abuse Prevention and Control





Overview of Webinar

Coronavirus Disease 2019 Information for Healthcare Providers

- Coronavirus (aka COVID-19)
- LA County Updates
- Misconceptions
- Precautions: General, Residential Settings, and Outpatient Settings
- Prevention Practices
- When Someone has Symptoms
- Self-Care
- Resources and More Information

Coronaviruses-a large family of viruses generally infecting animals and some infecting humans (with person to person spread)

This Coronavirus strain is called the Novel Coronavirus aka COVID-19

- ❖ Usually causes MILD to MODERATE illness (i.e. common cold)
- ❖ Transmitted from an infected person who has symptoms...
 - Droplets produced when an infected person coughs or sneezes
 - Close personal contact, such as caring for an infected person
 - Touching an object or surface with the virus on it, then touching your mouth, nose, or eyes before washing your hands
- ❖ People are most contagious when they are most symptomatic (i.e. the sickest)
- ❖ Contact with contaminated surfaces and then touching your mouth, eyes, nose is possible to contract virus, but not considered the main way it is transmitted

Watch for symptoms

Reported illnesses have ranged from mild symptoms to severe illness and death for confirmed coronavirus disease 2019 (COVID-19) cases.

The following symptoms may appear **2-14 days after exposure**.*

- Fever
- Cough
- Shortness of breath



If you develop **emergency warning signs** for COVID-19 get **medical attention immediately**. Emergency warning signs include*:

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

*This list is not all inclusive. Please consult your medical provider for any other symptoms that are severe or concerning.

- There is no specific treatment, but many of the symptoms can be treated (depending on individuals' condition)
- To date there is not a vaccine to prevent COVID-19
- Some specific treatments are under investigation, and will be tested through clinical trials.
- Help prevent the spread to others.

KEEP EMERGENCY ROOMS AND HOSPITALS FREE TO TREAT SERIOUS ILLNESSES!

- People with mild illnesses should not go to ERs or hospitals for treatment.
- Most people with flu-like illness will get better without the need to see a doctor or take special medicines.

For the Most Updated Information




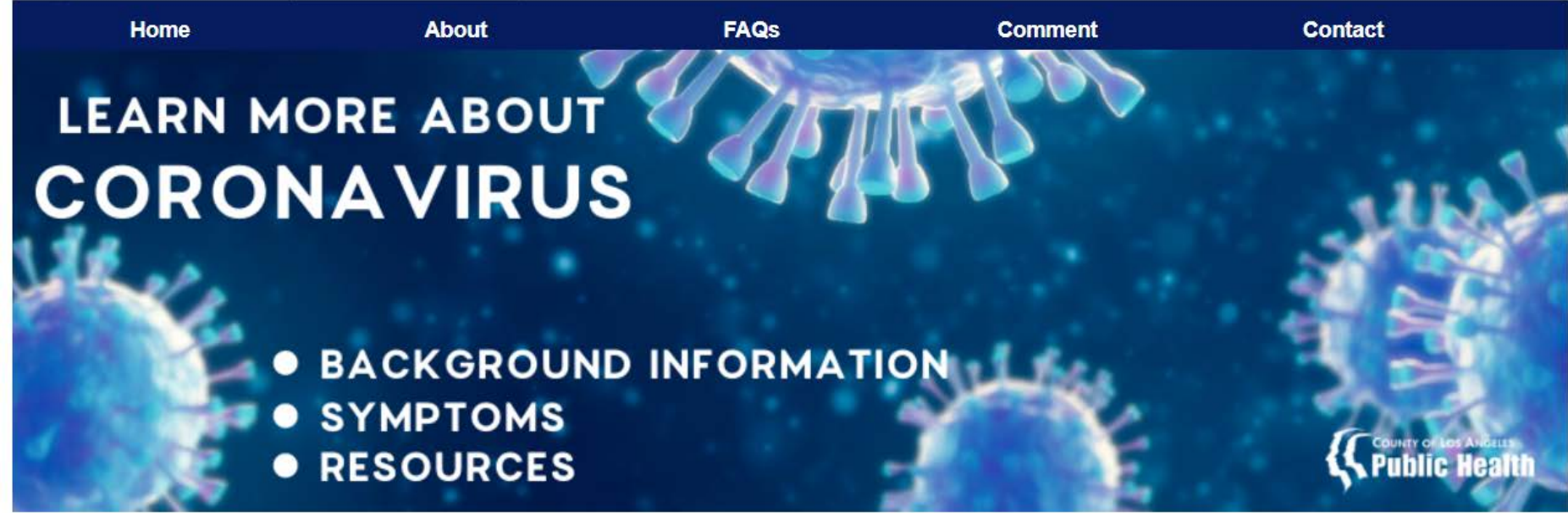
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LEARN MORE ABOUT CORONAVIRUS

- BACKGROUND INFORMATION
- SYMPTOMS
- RESOURCES



Novel Coronavirus in Los Angeles County*

<http://publichealth.lacounty.gov/media/coronavirus/>

How Prevention Works: Flattening the Curve





COVID-19 Misconceptions



Do not assume that someone of a race or nationality is likely to have COVID-19; this new virus has infected people of many different races and nationalities across the entire world.

It is vital to NOT assume someone is at risk based on their race/ethnicity or country or origin.

Avoid blaming anyone or assuming someone has the disease because of the way they look or where they or their families come from.

An infectious disease is NOT connected to any racial or ethnic group; speak up in kindness when you hear false rumors or negative stereotypes that foster racism and xenophobia.

Misconceptions of COVID-19



Questions	Known Fact
Can COVID-19 be transmitted in hot and humid climates?	From evidence so far, COVID-19 can be transmitted in all areas including hot/humid. Cold/snow also cannot kill COVID-19
Do vaccines against pneumonia protect you against the new coronavirus?	No. Vaccines against pneumonia, such as pneumococcal vaccine and Haemophilus influenza type B (Hib) vaccine, do not provide protection against the new coronavirus.
Are younger people as susceptible to COVID-19 as older people?	People of all ages can be infected, however older people and people with pre-existing medical conditions appear to be more vulnerable to becoming severely ill with the virus.
Can regularly rinsing your nose with saline help prevent infection with the new coronavirus?	No. There is no evidence that regularly rinsing the nose with saline has protected people from infection with the new coronavirus.
Are thermal scanners (thermometer) effective in detecting people infected with COVID-19?	Thermal scanners can detect if a person has a fever, however cannot specifically indicate if it is related to COVID-19.
Can spraying alcohol or chlorine all over your body kill COVID-19?	These substances may be harmful to clothes or mucous membranes. They will also not kill the virus if it has entered the body.
Can I get COVID-19 through drinking water, swimming or bath tubs?	The COVID-19 virus has not been detected in drinking water. Conventional water treatment methods that use filtration and disinfection, such as those in most municipal drinking water systems, should remove or inactivate the virus that causes COVID-19. Proper maintenance of pools should remove and deactivate the virus.



General Precautions





Stay home when you are sick. If you have a fever wait to return to work until you **7 days** after the start of symptoms and **72 hours** fever free (without fever reducing medication and symptoms improve whichever is later)



Avoid touching your eyes, nose, and mouth with unwashed hands.



Facemasks are most effective when used appropriately by health care workers and those directly caring for people who are sick, but in general NOT recommended



Wash your hands often with soap and water for at least **20 seconds**, especially after going to the bathroom; before eating; and after blowing your nose, coughing, or sneezing.



Cover your cough or sneeze with a tissue, then throw the tissue in the trash. If you do not have a tissue, use your sleeve (not your hands).



Limit close contact, like kissing and sharing cups or utensils, with people who are sick.



Clean and disinfect frequently touched surfaces using a regular household cleaning spray or wipe.



Get a flu immunization if you have not done so this season.

Handwashing!



<https://www.cdc.gov/handwashing/videos.html>

Individuals who are higher risk for serious illness from COVID-19 are recommended to take actions to reduce your risk.

- Older adults (65 years+)
- Individuals with compromised immune systems
- Individuals who have serious chronic medical conditions like:
 - Heart Disease
 - Diabetes
 - Lung Disease

Things to Avoid

- Smoking
- Wearing multiple masks
- Wearing multiple gloves
- Taking antibiotics (unless instructed to do so by your healthcare provider)

- Post signage instructing patients and visitors to inform staff if they are experiencing fever, cough or shortness of breath.



Notice to People Visiting Patients

If you have fever, a cold, or flu-like symptoms, please postpone your visit.



**Protect your family and friends.
Protect our patients.**


Los Angeles County Department of Public Health
publichealth.lacounty.gov/media/Coronavirus/
03/04/20




ATTENTION
ALL PATIENTS

If you have:


- **Traveled outside of the United States** or
- Had close contact with someone who recently traveled outside of the United States and was **SICK**




And now **you** have:



Fever




Cough



Trouble breathing

PLEASE TELL HEALTHCARE STAFF IMMEDIATELY!

Los Angeles County Department of Public Health
1/22/2020





COVER YOUR COUGH

Stop the spread of germs and keep others from getting sick.



Cover your mouth and nose with a tissue when you cough or sneeze. Throw the tissue in the trash.



If you don't have a tissue, **cough or sneeze into your upper sleeve or elbow.** Don't sneeze into your hands.



You may be asked to **wear a facemask** to protect others.



Wash hands often with soap and warm water for 20 seconds. If soap and water aren't available, use alcohol-based hand sanitizer.



STEPS FOR HANDWASHING

Stop the spread of germs and keep yourself and others from getting sick.



1. Wet your hands with warm water.



2. Lather up with soap. Soap gets rid of the oil that helps germs stick to your hands.



3. Rub and scrub your hands together for at least 20 seconds. Strongly rub and scrub your wrists, palms, between fingers, under your nails, and the backs of your hands. The soap and scrubbing action loosens the germs off your hands.



4. Rinse your hands thoroughly with warm, running water.



5. Dry your hands completely with a clean towel or paper towel. Use the towel to turn off the faucet when you're finished drying your hands. Throw the paper towel away.

If soap and water aren't available, use an alcohol-based hand sanitizer. Alcohol-based hand sanitizers can usually be found as a gel or wipes. Make sure the product is at least 60 percent alcohol.

To use an alcohol-based hand sanitizer:

- Rub the gel or wipe all over both hands.
- Rub hands together for 30 seconds until they feel dry.



- Facilities should post updated signage regarding what steps are being taken to ensure patient and staff safety.
 - E.g.
 - Increasing cleaning schedules
 - Isolation and screening measures
 - Limiting gatherings to 10 or less participants

Clearly written policies and procedures regarding COVID-19 should be posted to help ensure adherence.

These steps will help to reduce fears of both staff and patients.



Ensure access to hygiene items such as soap and/or hand sanitizer, tissue, and facemasks if appropriate



Position trashcans near doors, so items such as paper towels or gloves could be discarded when transitioning rooms



Routine cleaning and disinfecting of all frequently touched or occupied areas of the facility, including door handles, phones (cell phones), pens, chairs, kitchen areas and bathrooms

- ❖ As staff are also vulnerable to COVID-19, staff scheduling for Residential/Congregate facilities is crucial.
 - Prepare for worker absences.
 - Plan for ways to continue essential services if on-site operations are reduced temporarily.

- ❖ If a staff is out sick with acute respiratory illness, do not require a healthcare provider's note. Medical facilities will be extremely busy and may not be able to provide such documentation in a timely manner.



- Substance use treatment is an essential and vital service that we provide to the most vulnerable in our community.

- **Facilities should NOT pre-emptively close or deny services without just cause.**



- DMC Certification Standards and AOD Standards
 - There are standards for emergency procedures when declared by County Emergency Services Officer that must be followed. Providers should reach out to their Contract Program Auditors to discuss what those standards allow.

- ❖ Providers should assess both new (upon admissions) and existing patients as they arrive for services using a variety of methods
 - It is acceptable and encouraged to ask patients about any current symptoms they may be experiencing as they arrive, especially fever like symptoms.
 - This is for the safety of the staff and the patients alike.
- ❖ Providers may, to the best of their ability, identify patients who may be at higher risk due to medical conditions, history of respiratory illness or compromised immune systems to encourage alternative treatment options, such as telephone based services.
- ❖ If possible, facilities can provide Personal Protective Equipment (PPE) to patients/staff who need to be onsite for treatment, specifically for any patient or staff who are experiencing any possible symptoms of COVID-19.

Assess new patients at the time of screening/intake for symptoms of fever, cough, and shortness of breath.

- Screening/intake should occur in a private room
- If a patient presents with symptoms, they should wear a face mask to limit exposing others. Recommend patient seek guidance from their medical professional.

Endorsing/presenting with symptomology of COVID-19 in and of itself is NOT reason to deny admission to a patient.

- These symptoms may also be related to other conditions including related to their SUD.
- If an individual is medically stable, not needing emergency care, and meets SUD treatment criteria, they may be admitted.

Group activities should be minimized and replaced with individual encounters, to the extent possible.

Group activities for symptomatic clients should be conducted separate from clients without symptoms.

The number of group activity participants should be minimized to the extent possible and should not exceed 10 participants in a room or closed space for residential and 50 in non-residential settings.

Participants should be seated or positioned at least 6 feet apart from one another, and efforts should be made to avoid direct face-to-face positioning of chairs.



Residential/Congregate Services (i.e. Residential, Inpatient or Recovery Bridge Housing)



Residential Facilities are vulnerable for the spread of COVID-19 due to close proximity and ongoing exposure to individuals.

To reduce the potential of spread, the following are recommendations to help Agencies prepare should COVID-19 be detected/suspected in an individual.



Identify a sick room/area, with signage, where a patient(s) with symptoms would have access to a bed and restroom.

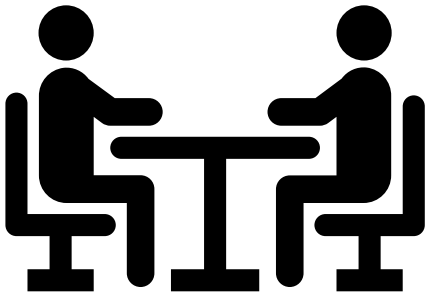


Ensure beds are placed as far apart as possible (at least 6 ft). If not feasible, instruct patients to sleep with heads at opposing ends of the bed, and head-to-feet if beds are next to one another.

Assess current patients for symptoms of fever, cough, and shortness of breath. This could include patient self report and/or observation.

If symptoms are present:

- Move them to a designated sick room/area
- Keep symptomatic patients separated from asymptomatic (not experiencing symptoms) patients.
 - This may include adding partitions to create and encourage compliance.
 - Ensure there is no sharing of utensils, cups, or linens.
 - Create separate eating times or designate a meal eating area for symptomatic patients.



- If a symptomatic patient needs to go outside the designated sick area, the following precautions should be taken before leaving the designated area and as appropriate:

Wash Hands Properly

Wear Face Mask

Avoid Touching Face

- If a patient needs a higher level of medical care, notify EMS that the patient has an undiagnosed respiratory infection.
- If multiple patients in your facility become newly sick with fever and respiratory symptoms, notify Los Angeles County Department of Public Health at **(213)-240-7941** during daytime hours or **(213) 974-1234** (After Hours Emergency Operator).



Non-Residential Services

(i.e. Outpatient/OTP)





Outpatient

- People attending outpatient programs are coming from a variety of locations or settings and may have interacted with many people or surfaces to and from an agency.
- Outpatient providers should identify strategies to continue to deliver services and screen individuals as they come in for services.

SAPC Provider Manual 4.0 (Pg. 80) allows for the following services to be delivered by telephone.

Due to the current state of emergency, the requirement for calls to be made from a DMC site is waived. Please check the SAPC website for updates.

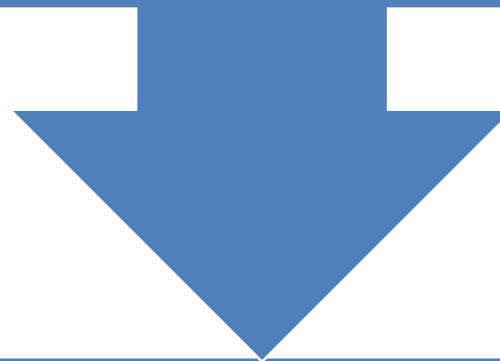
1. Individual Counseling

2. Case Management

3. Collateral Services

4. Crisis Management

5. Recovery Support Services



***Providers should document on the treatment plan and progress notes the reason for any ongoing telephonic services.



Telehealth Services

Telehealth Services: Treatment service provided using a HIPAA compliant visual *and* audio platform and following regulatory guidelines. (i.e. Not facetime or WhatsApp).

Documentation:

The first line the note (progress or miscellaneous- whichever is most appropriate for the service) should note The service was conducted via a Telehealth Service.

Primary Providers: When entering treatment, use Telehealth for Service Location.

Secondary Providers: use 02 as the Service Location.

* SAPC is currently expediting the development of telehealth policies and procedures.

What's good for work is good for home too



For those who care of others, specifically children or older adults or anyone with a weakened/compromised immune system, additional precautions should be taken while providing care



Avoid sharing utensils, food, drinks etc..



Remember to wash hands upon returning home and prior to giving care to others.

- If possible, wearing gloves if the caregiver or care receiver are sick.



Have adequate supply of prescription medicines and medical supplies for those who are under the patient's care.



- ❑ **Emergency Policy & Procedures:** Providers should follow their policies and procedures regarding emergency procedures and daily dosing for patients who cannot travel or are homebound as outlined in the SAMHSA Federal Opioid Treatment Standards.

- ❑ **Be as flexible with Dosing as Possible:** Patients may want or need to limit visits to the clinic and may require take-home doses, if clinically appropriate and specific regulation criteria are met.
 - Providers should take extra precautions and educate patients on risks of take home methadone if take-home medications procedures were expedited based on a necessary exception as defined in 42 CFR 8.

 - Consider additional education on overdose and providing naloxone, if necessary.

OTP and Patients on MAT



Consider staggering times for dosing for those who are more at risk (Older Adults or patients with compromised immune systems).

In some instances, medications are permitted to be delivered or picked up on behalf of the patient per the SAMHSA Federal Guidelines for Opioid Treatment.

Providers should ensure a "Chain of Custody" record is kept and must follow all relevant rules and regulations in these situations.

Providers may need to allow for special accommodations, where appropriate, to protect staff and patients to minimize additional risk.

Consider extending take-home medication periods, if safe, clinically appropriate and able to ensure all pertinent regulations are followed for take-homes and submitting an exception request via the SMA-168 form.

Consider a separate entrance for those at risk, if possible.

Precautions for those in the Field



When engaging in community outreach, approach others cautiously to avoid being in close contact with residents who may be ill.

Keep a 6-foot distance from others until you have established that the situation is safe.

Keep a supply of gloves and surgical masks handy (and know how to appropriately use these) for situations where you are not able to maintain your distance.





Standard Public Health Prevention Practices



Social Distancing-A recommended practice by public health officials to stop or slow down the spread of contagious diseases.

- It requires a creation of physical space between individuals who may spread certain infectious diseases.
- The key is to minimize the number of gatherings as much as possible. When events or activities cannot be modified, postponed, or cancelled the idea is to create space between people (approximately 6 feet is advisable).

**Note-this is particularly important focus for people who come together on a one-time or rare basis and who have very different travel patterns (i.e. coming from multiple countries, states, or counties)*

Social/Self/Home/Voluntary Isolation- A recommended practice for when people are concerned about possible exposure, which will help to reduce the spread to others.

- People are encouraged to Self-Observe (pay attention to increased coughing, raises in temperature etc...) and Self-Monitoring (if potential symptoms are noticed, monitoring them closely before engaging medical services).

SOCIAL DISTANCING

What You Need To Know About COVID-19

What does it mean and why is it important? Social Distancing is the practice of reducing close contact between people to slow the spread of infections or diseases. Social Distancing measures include limiting large groups of people coming together, closing buildings and cancelling events.

 AVOID	 USE CAUTION	 SAFE TO DO
<ul style="list-style-type: none">GROUP GATHERINGSSLEEP OVERSPLAY DATESCONCERTSTHEATRE OUTINGSATHLETIC EVENTSCROWDED RETAIL STORESMALLSNON-ESSENTIAL TRAVELBARs & RESTAURANTS	<ul style="list-style-type: none">VISITING A GROCERY STOREPICK UP & DELIVERY OF FOODPICKING UP MEDICATIONSPLAYING TENNIS IN A PARKESSENTIAL TRAVELVISITORS IN YOUR HOMEMASS TRANSIT	<ul style="list-style-type: none">TAKE A WALKGO FOR A HIKEYARD WORKPLAY IN YOUR YARDCLEAN OUT CLOSETREAD A GOOD BOOKLISTEN TO MUSICCOOK A MEALFAMILY GAME NIGHTGO FOR A DRIVEGROUP VIDEO CHATSSTREAM A FAVORITE SHOWCALL OR TEXT A FRIENDCALL OR TEXT AN ELDERLY NEIGHBOR

Isolation and Quarantine are public health practices used to stop or limit the spread of disease

Isolation

Used to separate **ill** persons who have a communicable disease from those who are healthy. Isolation restricts the movement of ill persons to help stop the spread of certain diseases.

- For Example: If you are sick it is recommended to stay home (i.e. self-isolate)

Quarantine

Used to separate and restrict the movement of **well** persons who may have been exposed to a communicable disease to see if they become ill. These people may have been exposed to a disease and do not know it, or they may have the disease but do not show symptoms. Quarantine can also help limit the spread of communicable disease

Isolation and Quarantine are used to protect the public by preventing exposure to infected persons or to persons who may be infected.



Hard surfaces:

- Clean and disinfect hard surfaces and objects.
- Wash stained surfaces with a general household cleaner to remove dirt, germs, and grease. Rinse with water, then use an EPA registered disinfectant. Follow the manufacturer's recommended concentration, use, and contact time.
- If an EPA-registered disinfectant is not available, use a fresh 2% chlorine bleach solution (approximately 1 tablespoon of bleach in 1 quart of water). Prepare the bleach solution daily or as needed. Test strips can be used to check if the solution is the right strength.
- 70% alcohol-based disinfectants are recommended to prevent the spread of viruses but the alcohol can evaporate quickly and not fully disinfect. If you use these products, follow the contact times in the instructions.

Clean all “high-touch” surfaces such as counters, tabletops, doorknobs, light switches, bathroom fixtures, toilets, trash cans, phones, remote controls, keyboards, tablets, and bedside tables.



Carpets, couches, and other porous (absorbent) surfaces:

- Vacuum to keep dust from spreading and going into the air.
- Spot-clean spills of bodily fluid promptly following policies and procedures.
- Deep clean carpets, avoiding splashing as much as possible
- Use steam cleaners to clean carpets and other porous surfaces if needed.



Utensils and tools:

- Clean and sanitize plates, glasses, and silverware in a dishwasher or by hand with soap, hot water, and an EPA approved sanitizer.
- Clean mops and cloths with soap and hot water and sanitize with an EPA-registered disinfectant or bleach solution and allow to dry. Use single-use, disposable mop heads and/or cloths as an alternative.
- Read directions carefully when using disinfecting wipes on electronics. Check that the electronics can withstand the use of multiple wipes that are needed to keep the surface wet long enough to meet the required contact time.



Linens:

- Wash sheets, blankets, towels, curtains and other linens with household laundry soap and hot water (167 °F or more). Dry on a high heat setting according to policies and procedures.



Trash disposal:

- Wear gloves when handling trash or waste.
- Ensure that trash is thrown into sturdy, leak-proof (e.g. plastic) bags that are tied shut, placed directly into trash bins and disposed of regularly.
- Handle medical waste (such as needles) according to policies and procedures. After cleaning and throwing away waste, remove gloves and wash hands.

Other general cleaning guidance:

- Immediately throw away all disposable cleaning items.
- Wash hands frequently, including after emptying waste baskets and touching tissues and similar waste.
- Wash your hands thoroughly and often with soap and water for at least 20 seconds or use an alcohol-based hand sanitizer that contains at least 60% alcohol. See Public Health's guidance on the correct way to wash your hands. <http://publichealth.lacounty.gov/acd/handwash.htm>





...And Don't Forget the Self-Care



Hearing, reading, or watching the news of the outbreak can lead people to feel anxious and show signs of stress (*even when it effects people far from where you live and you are at low or no risk*).

What You Can Do to Cope

1. Manage Stress
 - stay informed from credible sources (i.e. Los Angeles County & California Department of Public Health and the CDC)
2. Reach Out and Stay Connected to Your Community
 - Keep in contact with your friends and family (phone, social media, video chat)
 - If you know someone affected by Coronavirus or those practicing social distancing offer to have a meal delivered or give them a call to check in
3. Be Informed and Inform Your Loved Ones
 - Become familiar with local medical and mental health resources in your community
 - Avoid sharing unconfirmed news (this helps to avoid creating unnecessary fear and panic)
 - Give honest and age appropriate information to children while remaining calm (children often feel what you feel)
4. If you or a loved one are having difficulty coping consider seeking professional help



Individuals Experiencing Symptoms of COVID-19



What to do if Someone is Symptomatic



- If you are having difficulty breathing or keeping fluids down, go to an emergency room or call 911.
- Wash your hands with soap and water for at least 20 seconds especially after going to the bathroom; before eating; and after blowing your nose, coughing, or sneezing. If soap and water are not available, use alcohol-based hand sanitizer that contains at least 60% alcohol.
- Cover your coughs and sneezes with a tissue, and then dispose of the tissue and clean your hands immediately. If you do not have a tissue, use your sleeve (not your hands).
- Limit close contact with people who are sick.
- Clean and disinfect frequently touched objects and surfaces using a regular household cleaning spray or wipes.
- Residential & inpatient settings need to report, within **1 business day**, known COVID-19 cases to DHCS and SAPC (sapcmonitoring@ph.lacounty.gov) when staff or patients test positive.

- Stay home for at least 72 hours after you no longer have a fever or symptoms of a fever without the use of fever-reducing medication.
- Call your health care provider to determine next steps including if testing for COVID-19 is warranted.
- Employees who have been in contact to a suspected or known case of COVID-19 should be in quarantine at home for 14 days. If they develop symptoms while in quarantine, then they should follow the return to work guidelines (7 days after symptoms started and 3 days after fevers have resolved and symptoms improved whichever is longer).
- **Persons diagnosed with COVID-19 are considered cleared after 14 days from symptom onset or 3 days after resolution of fever and improvement of other symptoms, whichever is longer.**



Though an individual may present with symptoms, testing for COVID 19 is not currently standard practice. Below is LAC DPH Public Health Lab’s (PHL) criteria for COVID-19 testing for Medical Providers.

Clinical Features	&	Epidemiologic Risk
Fever or signs/symptoms of lower respiratory illness (e.g. cough or shortness of breath)	AND	Any person (including healthcare workers) who in the last 14 days before symptom onset has had close contact with a laboratory confirmed COVID-19 patient
Fever and signs/symptoms of lower respiratory illness (e.g. cough, shortness of breath)	AND	Any healthcare worker without an alternative diagnosis (e.g., negative molecular respiratory panel)
Fever and signs/symptoms of a community acquired lower respiratory illness (e.g. cough or shortness of breath) requiring hospitalization	AND	A history of travel from affected geographic areas* in the last 14 days before symptom onset or Radiographic findings compatible with a viral pneumonia and no alternative diagnosis
Part of a cluster of 2 or more cases of an acute respiratory illness within a 72-hour period	AND	Congregate living setting with a large proportion of older adults and persons with comorbid medical conditions (e.g. skilled nursing facility, senior assisted-living facility, homeless shelters)

Guideline for Clinician's- Coronavirus Disease 2019 (COVID-19) Clinician Check List: Evaluating Patients Who May Have COVID-19.

If a patient meets criteria for COVID-19 Testing at PHL, then call LAC DPH and an on-call physician will advise on the next steps. Call...

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



- Please be prepared to provide a call back number and to wait for a call-back.

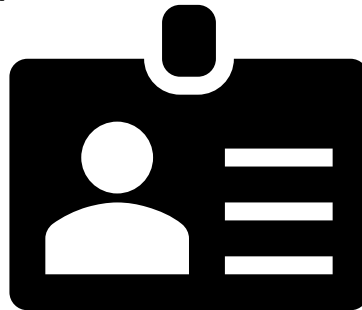
DO NOT collect or send specimens to PHL until the case is discussed and testing is approved by DPH (if approved, refer to PHL specimen collection/transport instructions on final page). Only contact LAC DPH if the patient meets the PHL COVID-19 testing criteria.

If a patient does not meet full PHL criteria, there is still the option for testing at a commercial clinical laboratory, if available.

Agencies should consider having staff that have tested Positive for COVID-19 and fully **recovered** to serve symptomatic patients.

This established immunity will help to reduce dangerous exposures

****Only to be considered once the staff are safely cleared to return to work ****



*Staff should continue to practice recommended good hygiene practices once they return to work



Miscellaneous Information



- ❖ It is important to continue to document all services provided.
- ❖ Consent for Telehealth must be given (document verbal consent and have the patient sign as soon as is feasible).
 - Mention in the note Telehealth-location of where services were provided
- ❖ If the patient is unable to continue participation at the frequency outlined in the Treatment Plan, document the change in a Progress Note and include the expected timeframe.



- ❖ For all patient signatures (if unable to get patient signature)
 - ✓ Obtain verbal consent
 - ✓ Document in a note (that is related to the service) that patient consent/signature was obtained verbally & patient will sign as soon possible

- If using your personal device for Telehealth please make sure your device is registered follow directions on SAPC website <http://publichealth.lacounty.gov/sapc/Sage/SageInfo.htm>

Los Angeles Health Alert Network



The Department of Public Health (DPH) emails priority communications to health care professionals through LAHAN. Topics include local or national disease outbreaks and emerging health risks. To receive LAHAN communications, click the 'subscribe' button. It takes less than a minute to sign up. DPH will not share your contact information.

[Subscribe](#)

*To access directly from this page hit Control and click on Subscribe

www.publichealth.lacounty.gov/lahan

Text: the word 'LAHAN' to 66866

For More Information



Los Angeles County Department of Public Health (LAC-DPH)

<http://publichealth.lacounty.gov/media/Coronavirus/>

LAC Department of Public Health-Business Toolkit

<http://www.publichealth.lacounty.gov/media/Coronavirus/#business-toolkit>

California Department of Public Health

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/ncov2019.aspx>

Centers for Disease Control and Prevention (CDC)

<https://www.cdc.gov/coronavirus/2019-ncov/index.html>

CALL 2-1-1 24/7 Information Helpline for Los Angeles County

<https://www.211la.org/>