Coronavirus Disease:  
What Organizations Can Do To Prevent And Prepare

March 4, 2020

You’ve probably heard a lot about a new (novel) Coronavirus called COVID-19. As leaders of the homeless services system in Los Angeles, you are vital in implementing strategies to prevent and contain infections in your agency as well as to support continuity of care in the case of widespread sickness. As such, we wanted to share guidance on these important areas to help us all prepare. Please share and discuss with your operational, programmatic, and human resource leadership in order to implement or augment protocols within your agency and programs.

- Ensure all facilities and sites have signs promoting proper handwashing [http://www.publichealth.lacounty.gov/media/Coronavirus/CoronavirusInfographicEnglish.pdf]. Promote handwashing among your staff and clients. Distribute 70% alcohol hand sanitizer for those who do not have access to handwashing facilities.
- We will help provide access to supplies.
- Keep work and facility surfaces as clean as possible. Review facility-cleaning protocols and be extra vigilant.
- Train staff in universal precautions. They should have supplies for this, including gloves, masks, alcohol swabs, Ziploc bags, and hand sanitizer. Please train staff on their use.
- Actively encourage sick employees to stay home.  
  - Experts recommend that employees who have symptoms of acute respiratory illness stay home and not come to work until they are free of fever (100.4°F or greater using an oral thermometer), signs of a fever, and any other symptoms for at least 24 hours, without the use of fever-reducing or other symptom-altering medicines (e.g., cough suppressants). Employees should notify their supervisor and stay home if they are sick.
  - Ensure that your sick leave policies are flexible and consistent with public health guidance and that employees are aware of these policies.
- Have contingency plans for backup staffing in the case of large numbers of staff become sick.
  - Employers should plan to monitor and respond to absenteeism at the workplace. Implement plans to continue your essential business functions in case you experience higher than usual absenteeism.
  - Cross-train personnel to perform essential functions so that the workplace can operate even if key staff members are absent.
  - Assess your essential functions and the reliance that others and the community have on your services or products. Be prepared to change your business practices if needed to maintain critical operations (e.g., identify alternative suppliers, prioritize customers, or temporarily suspend some of your operations if needed).
  - Enhance screening of visitors, staff, and residents for symptoms of acute respiratory illness (e.g., fever, cough, difficulty breathing). If someone is exhibiting symptoms, contact their healthcare provider immediately for further instructions. Make sure to keep a distance of 6 feet. Ensure the person with symptoms wears a mask until further direction of a healthcare provider. [https://www.cdc.gov/coronavirus/2019-ncov/about/steps-when-sick.html]. We expect more guidance on both facility and street-based protocols for clients with potential infections. We will share it when available.
  - CDC does not recommend that people wear a facemask to protect themselves from
Facemasks should be used by people who show symptoms of COVID-19 to help prevent the spread of the disease to others. The use of facemasks is also crucial for health workers and people who are taking care of someone in close settings (at home or in a health care facility).

Devote extra case planning for those that are most vulnerable. It appears those risk of severe illness begins to increase at age 50 for those who contract COVID-19 and increases with age (i.e., an 80-year-old person is at greater risk than a 70-year-old person). People over age 80 are the highest risk group. Persons with underlying medical problems also are likely at higher risk for severe disease, including persons with cardiovascular disease, diabetes, cancer, heart disease, or chronic lung diseases like COPD, as well as those who are immunocompromised. Ensuring clients with these vulnerabilities are connected to their medical home and know their medical provider is critical.

**Other helpful planning resources**

The US Department of Housing and Urban Development (HUD) just released its Infectious Disease Toolkit for CoCs. This toolkit provides structure and specific examples for planning and responding to Influenza, Coronavirus, and other infectious diseases. The toolkit consists of three documents that provide information for CoC leadership, homeless service providers, and partners to utilize when planning for and responding to infectious diseases. [https://www.hudexchange.info/resource/5985/infectious-disease-toolkit-for-cocs/](https://www.hudexchange.info/resource/5985/infectious-disease-toolkit-for-cocs/)

The County of Los Angeles Department of Public Health (DPH) launched a helpful Coronavirus portal [http://publichealth.lacounty.gov/media/Coronavirus/](http://publichealth.lacounty.gov/media/Coronavirus/) with FAQs, handwashing guidance, and other valuable information for Angelenos. They also launched a valuable #NCVFacts campaign on Twitter. The US Centers for Disease Control and Prevention (CDC) also has vital information on their websites [https://www.cdc.gov/coronavirus/2019-ncov/index.html](https://www.cdc.gov/coronavirus/2019-ncov/index.html)


We recommend that you and your staff take a look at these resources and check back often as the issue is quickly evolving.
LAHSA is a joint powers authority of the city and county of Los Angeles, created in 1993 to address the problem of homelessness in Los Angeles County. LAHSA is the lead agency in the HUD-funded Los Angeles Continuum of Care, and coordinates and manages over $400 million annually in federal, state, county, and city funds for programs providing shelter, housing, and services to people experiencing homelessness.