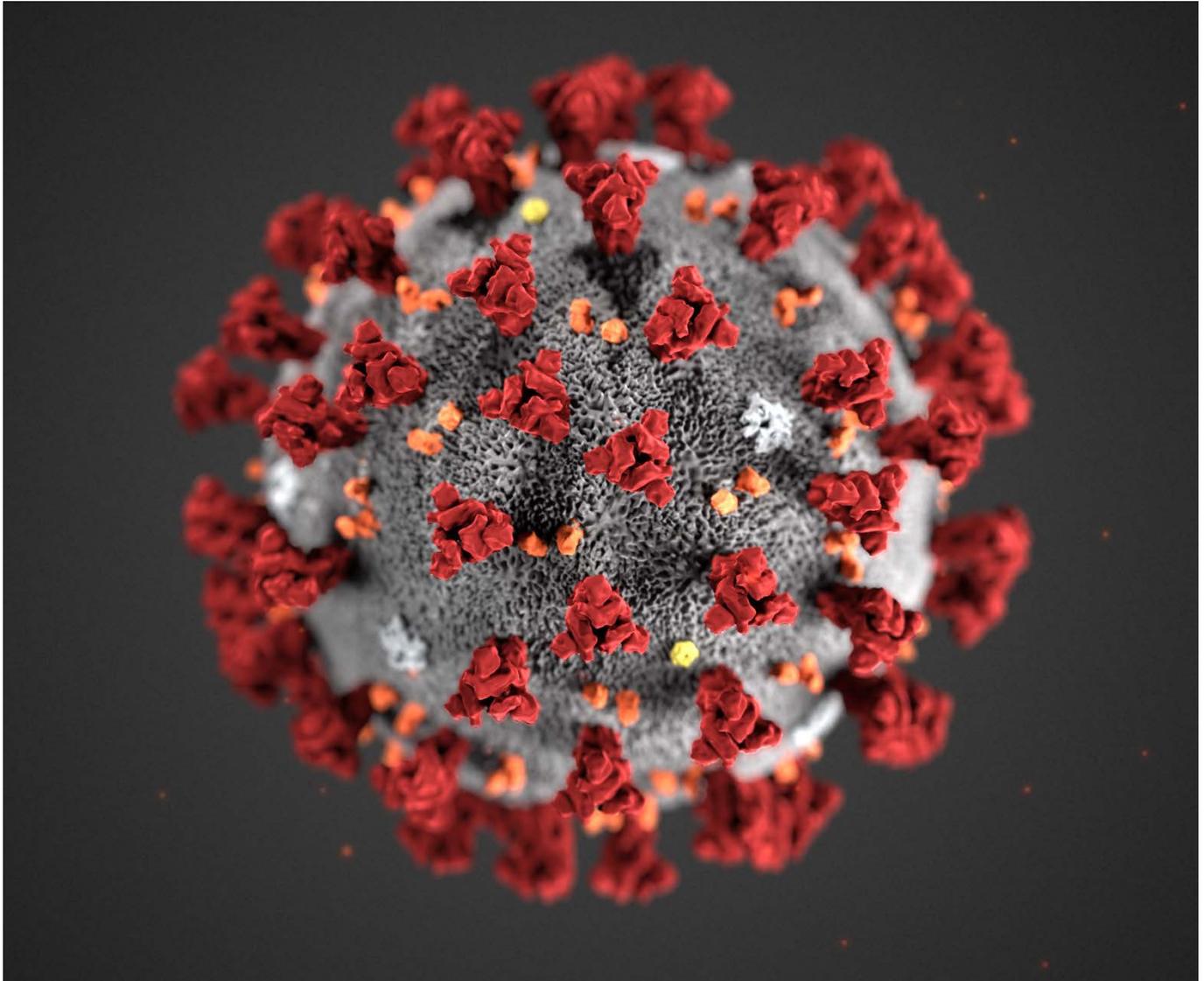


**County of San Diego Health and Human Services
Public Health Services**



**CONSUMER VERSION:
COVID-19 RESPONSE PLAN**

March 5, 2020



Inquiries regarding this document may be directed to:

Public Health Officer
County of San Diego
Health and Human Services Agency
Public Health Services
Health Services Complex
3851 Rosecrans Street, MS: P-578
San Diego, CA 92110-3652 (619) 531-5800

All materials in this document are in the public domain and may be reproduced and copied without permission. However, citation to source is appreciated. Suggested citation:

County of San Diego, Health and Human Services Agency.
County of San Diego Consumer Version COVID-19 Response Plan.
Original Version, February 16, 2020; *1st Revision*, March 5, 2020.

This publication of this document utilizes information known at the time of publication in February 2020. This document is the culmination of activities that started in January 2020 and updated periodically, as needed. This document was developed under the General Management System of the County of San Diego and is in support of *Live Well San Diego* to promote a healthy, safe, and thriving community.

TABLE OF CONTENTS

SECTION I: PURPOSE	05
SECTION II: BACKGROUND AND OVERVIEW	05
SECTION III: WHAT IS THE COUNTY DOING?	08
SECTION IV: WHAT CAN THE PUBLIC DO?	14
SECTION V: PLANNING FOR AN OUTBREAK OR PANDEMIC.....	15
SECTION VI: RESOURCES AND REFERENCES	18
SECTION VII: APPROVAL	19

CONSUMER VERSION: COVID-19 RESPONSE PLAN

SECTION I: PURPOSE

The purpose of this document is to provide information to the general public about the current status of the global coronavirus outbreak and guidance regarding the public health impact of this national incident to residents of San Diego County. This outbreak is being caused by [a novel coronavirus](#), which is a new strain that has not been previously identified in humans.

This document contains background information about the novel coronavirus, what efforts are being conducted by the County to respond to this global incident, what the public can do, and resources and references related to COVID-19.

SECTION II: BACKGROUND

What is Coronavirus?

Human coronaviruses are common throughout the world. Coronaviruses are common in many different species of animals, including camels, cats, and bats. Most coronaviruses infect animals, but not humans. Though it is rare, animal coronaviruses can evolve and infect and then spread between humans.

There are seven different coronaviruses that scientists know of that can infect people and make them sick. There are four main sub-groups of coronaviruses. Some human coronaviruses were identified many years ago and some have been identified recently (see *Table #1*).

Table #1. Types of Coronaviruses.

Common Corona Viruses	Newer Coronaviruses
229E (alpha coronavirus)	MERS-CoV*
NL63 (alpha coronavirus)	SARS-CoV**
OC43 (beta coronavirus)	COVID-19
HKU1 (beta coronavirus)	

*MERS-CoV (beta coronavirus that causes Middle East Respiratory Syndromes, or MERS)

**SARS-CoV (beta coronavirus that causes Severe Acute Respiratory Syndromes, or SARS)

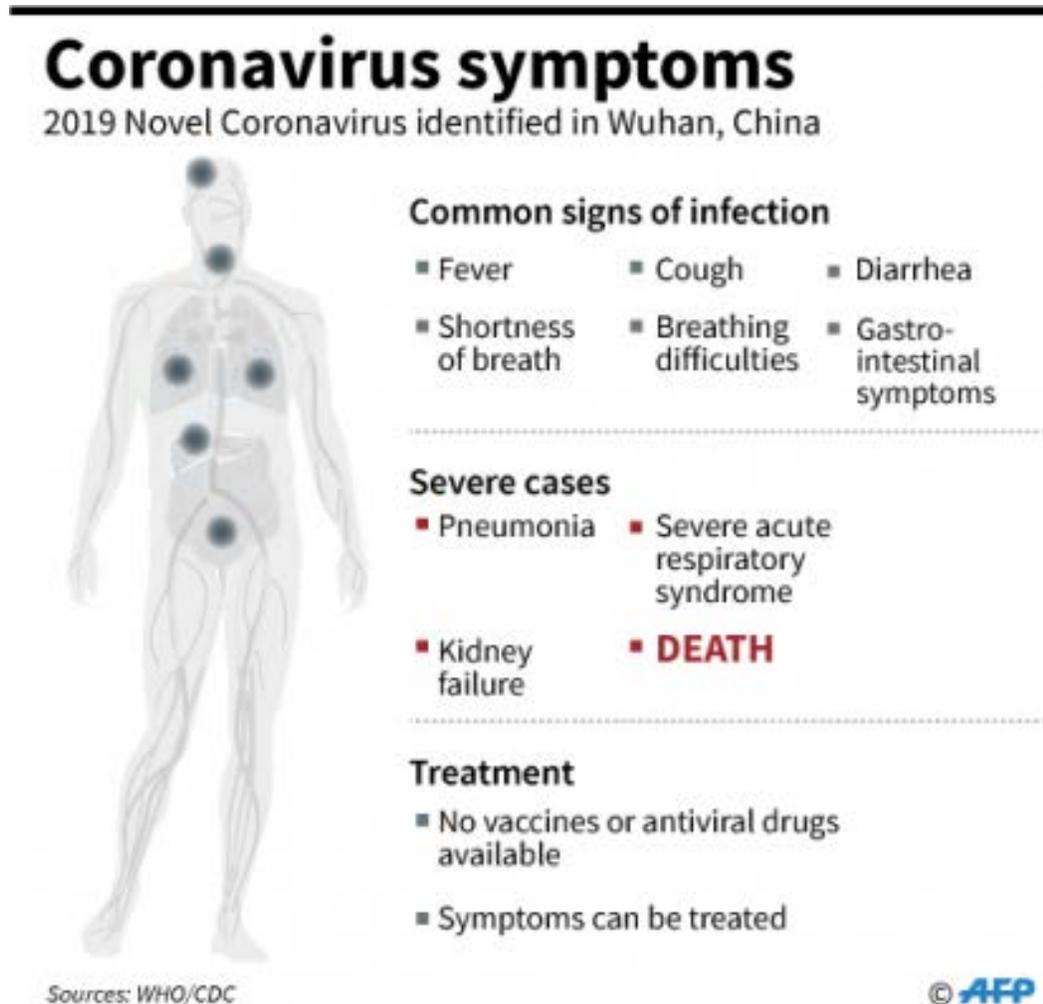
The two most recent human coronaviruses, MERS-CoV and SARS-CoV, are examples of the coronavirus evolving and spreading between humans. As a new coronavirus, it is unknown how COVID-19 spreads and is under research.

Signs and Symptoms

Human coronaviruses commonly cause mild to moderate upper respiratory tract illness, like the common cold, in people worldwide. They can also sometimes cause lower-respiratory tract illnesses, such as pneumonia or bronchitis, however, this is more common in people with cardiopulmonary disease and/or weakened immune systems, infants, and older adults.

Symptoms of COVID-19 include fever, cough, and shortness of breath (see *Figure #1 below*). According to the Centers for Disease Control and Prevention (CDC), the symptoms may appear in as few as two days, or as many as 14 days, after exposure. In addition, symptoms range from mild to severe. Although the infection has caused deaths, the majority of Patient Under Investigation (PUI) cases with confirmed illness are recovering. Currently, treatment is supportive.

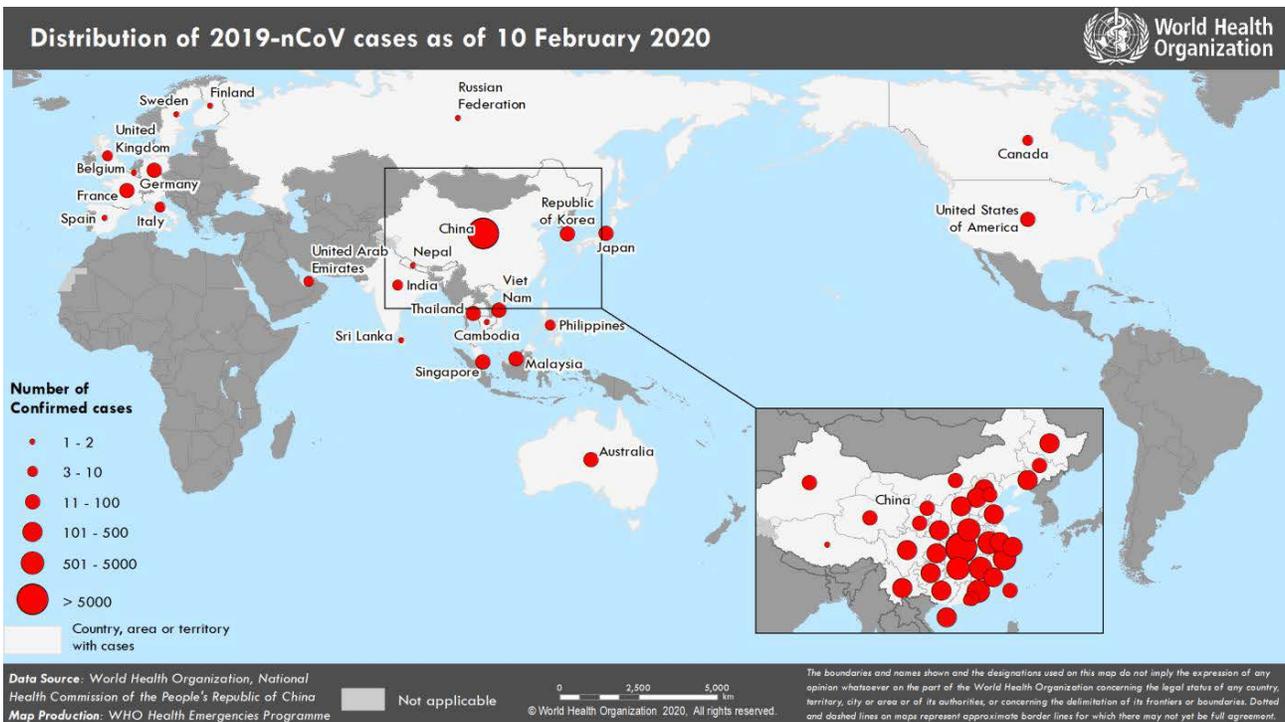
Figure #1. Coronavirus Symptoms.



COVID-19 Global Outbreak

Since December 31, 2019, Chinese authorities have identified thousands of human infections. The Center for Systems Science and Engineering at Johns Hopkins has developed an [interactive website to report global cases](#). Since February 10, 2020, the numbers of COVID-19 cases and deaths have grown from 69,300 confirmed cases and 1,670 deaths to over 94,000 confirmed cases and over 3,000 deaths, as of March 4, 2020. Early cases were associated with an outbreak of pulmonary infections first documented in Wuhan City, Hubei Province, China. While the virus is mostly affecting people in mainland China, infections have been confirmed in numerous international travelers in over 75 countries and territories, including the United States. (Figure #2 above). As of this revision, [travel restrictions](#) are also in place for South Korea, Japan, Iran, and Italy.

Figure #2. COVID-19 Cases Worldwide as of February 10, 2020 (WHO).



SECTION III: WHAT IS THE COUNTY DOING?

A. General Roles and Responsibilities

In the case of an outbreak of an emerging disease, the County of San Diego Health and Human Services Agency (HHSA) Public Health Services (PHS) department will collaborate with federal and state public health agencies. HHSA also works very closely with the sectors such of healthcare, education, and law enforcement and other agencies and partners. The PHS department will coordinate response efforts between other HHSA and County departments and external partners. The Emergency Medical Services/Public Health Preparedness and Response/ Department Operations Center/ Medical Operations Center may be activated to support the response. This is often identified as the Medical Operations Center or MOC. Activations are done using the Incident Command System (ICS) principles. This system enables the County to be very flexible and assess the medical impact of the emergency and the need for resources.

B. Response Plan

1. Level of Activation

The Chief of the Public Health Preparedness and Response (PHPR) branch of PHS serves as the MOC Director when the *Response Plan* is activated. There are three levels of response that are identified to guide response activities for San Diego County. The levels, response, and triggers are found in *Table #2* below.

Table #2. Levels of Response.

Levels	Responses (Triggers)
Level 3	▪ Monitoring Level (First confirmed U.S. Case Announced)
Level 2	▪ Response Level (First San Diego Case, Arrival of Repatriated Citizens)
Level 1	▪ Emergency Response Level (Sustained Transmission, Strained Hospital System)

On January 21, 2020, the MOC was activated at *Level 3 (first U.S. case in Washington state)*. On Saturday, February 1, 2020, activation increased to *Level 2*, in anticipation of the arrival of two flights of repatriated American

citizens from China at Marine Corp Air Station (MCAS) Miramar, during the week of February 3, 2020. These repatriates were cared for under a mandatory federal quarantine period of 14 days. On February 10 and 11, 2020, respectively, two COVID-19 cases were confirmed in repatriates under mandatory federal quarantine at the MCAS Miramar. These individuals have been evaluated and have completed their mandatory federal quarantine and have left San Diego.

HHS worked with the CDC, the California Department of Public Health (CDPH), California Office of Emergency Services, and local medical healthcare systems to manage PUI cases. The report of other cases in California and across the nation, as well as the global situation, is carefully monitored by HHS. Standard procedures already in place are being utilized to identify, isolate, test, and investigate potential cases.

The County Public Health Officer (PHO) has the authority and responsibility to determine the severity of the situation and potential of the public's health and safety. The PHO works with the County Policy Group in determining the need for proclaiming a local emergency, declaring a local health emergency, or both. On February 14, 2020, the County did execute both options. These proactive measures were taken to increase the County's capacity for reimbursement, administrative flexibility with contracts and vendors, and support the enhanced response efforts for additional needed resources.

These actions also support the County's responsibility to monitor at-risk travelers who may be returning to San Diego.

2. Objectives

- Conduct ongoing surveillance and epidemiological investigations of potential cases of COVID-19 as they are reported and/or identified.
- Conduct follow-up of close contacts of cases and ensure appropriate monitoring and quarantine practices under public health supervision.
- Enhance and maintain laboratory capacity to provide timely testing and diagnostic results for COVID-19.

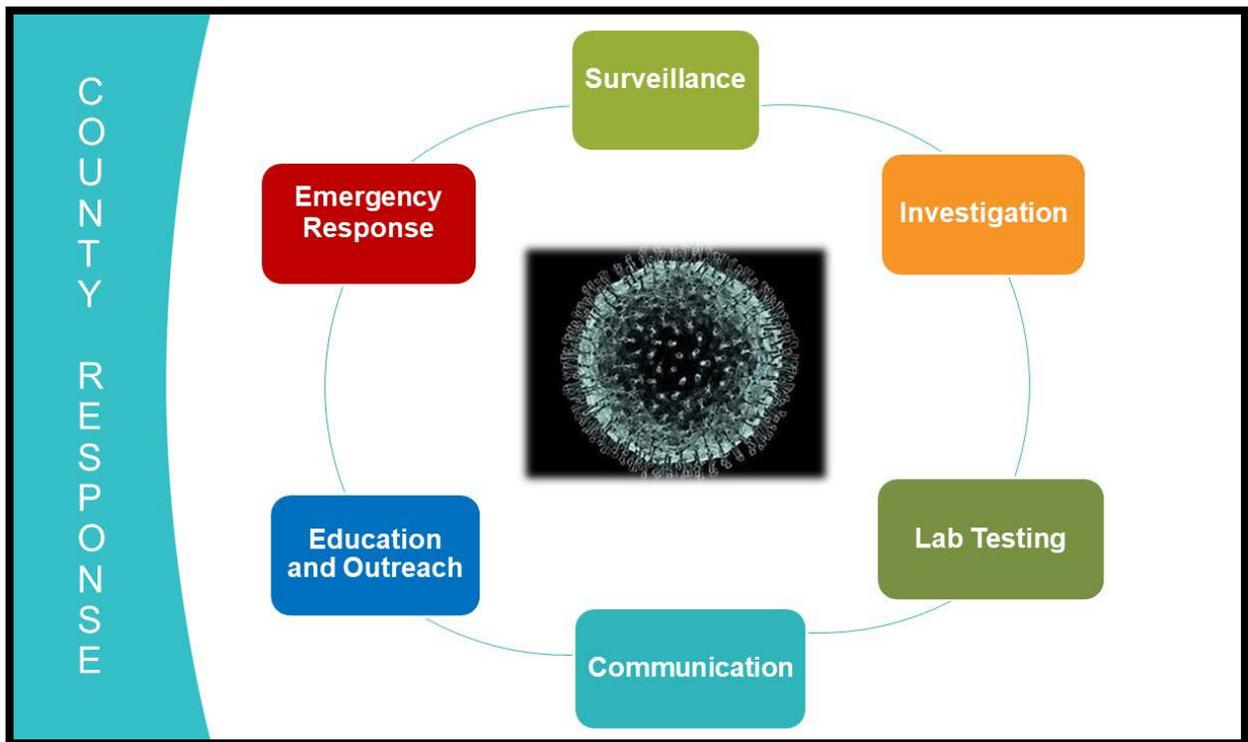
- Ensure appropriate data are gathered, analyzed, and reported to communicate status updates and progress related to the COVID-19 outbreak to County leadership, partners, media, and the public.
- Utilize effective health promotion and education practices to communicate to the public, media and response stakeholders.
- Address outbreak and pandemic planning, mitigation, and protection of the public’s health.

C. Public Health Services

Public Health Services department has the primary role to respond to this emerging disease. As part of this response, the following core functions of Public Health will form the foundation of this response: 1) surveillance, 2) investigation, 3) laboratory testing, 4) communication, 5) health education and outreach, and 6) emergency response (see *Figure #3* below).

Public Health Services addresses outbreak and pandemic planning, mitigation and protection of the public’s health. The readiness to respond includes collaboration with multidisciplinary stakeholders and sector groups.

Figure #3. County Response Approach.



1. Surveillance

Surveillance is a primary strategy for the early detection and control of this emerging disease. Surveillance is based on reports of cases of the disease, primarily from the healthcare community and laboratories, followed by interviews of the case-patients by investigators. The main goals of surveillance are to:

- Identify cases or potential cases of COVID-19
- Describe the outbreak (person, place, and time) and monitor disease trends.
- Identify contacts of case-patients who may be at risk.
- Characterize changes in the epidemiology of infected populations

2. Investigation

Investigation is a central activity necessary to confirm the incident of disease, determine the exposures and risk factors that are the basis of the surveillance data, implement disease control measures and determine if there were any other close contacts who might be at risk.

Disease control efforts will be necessary to control the spread of this virus throughout San Diego County. These efforts may include self-quarantine, isolation, and quarantine practice.

Patients with confirmed COVID-19 infection, who do not need to be hospitalized, will be requested to remain under home isolation precautions until the risk of secondary transmission to others is thought to be low. The decision to discontinue home isolation precautions is made on a case-by-case basis, in consultation with healthcare providers and Public Health Services.

Individuals who are close contacts of cases under quarantine will be monitored throughout the 14-day incubation period until the risk of person-to-person transmission is thought to be low. If an individual develops symptoms consistent with COVID-19, the person will be advised to seek medical assessment and possible laboratory testing.

Returning travelers, from China and other COVID-19 affected areas, who are considered medium risk are requested to self-quarantine and perform

frequent temperature checks under public health supervision. Staff from PHS will conduct regular monitoring of these persons, up to 14 days, for any development of symptoms.

3. Laboratory Testing

Laboratory testing is essential in the confirmation of COVID-19 disease. Eleven California Public Health Laboratories, including the State Public Health Laboratory can currently test for COVID-19 and additional laboratories are being brought online. Positive tests are sent to CDC for confirmation. The capability of COVID-19 testing at the County PHL provides more rapid results than previously available, when all samples were sent to the CDC. This change has informed public health action and medical care for people who may have been exposed.

4. Communication

Information about COVID-19 and the evolving situation in San Diego County will be made available to healthcare professionals, through health alerts (CAHAN), to various sector groups, via specific letter communications; and the general public, via the website (www.coronavirus-sd.com). Questions from the general public can be addressed by calling [2-1-1 San Diego](tel:6194357273).

5. Education and Outreach

Informing the public about the global, national, state, and local status of COVID-19 is essential to keeping the public aware of this situation and the risk to individuals in the County. Distribution of information to the public includes: health promotion materials, [fact sheets](#) and [frequently asked questions](#). Health alerts are provided to healthcare professionals through a variety of communication avenues. Clinical and community presentations are available. An intentional strategy to educate and inform various sectors of the community, following the *Live Well San Diego* model, is being implemented.

6. Emergency Response

PHS PHPR Branch coordinates the emergency response for public health threats in San Diego County. Over the past two decades, the local health department has gained great experience responding to communicable disease outbreaks (e.g., measles, mumps, chickenpox, H1N1). There is a strong coordination of effort and trusted collaboration between the County

(Public Health Services, Emergency Medical Services, and Office Of Emergency Services) and local healthcare, military, law enforcement, city municipalities, schools, and community partners. PPHR is the lead for the local public health response, as cited above in the ***Level of Activation*** section.

D. Emergency Medical Services System

County Emergency Medical Services (EMS) is monitoring the status of the County's EMS Delivery System via the All-Hazard Health Services Capacity Management Plan (Capacity Plan), which was created more than 20 years ago for any situation, including the current one. EMS staff closely monitor prehospital and Emergency Department status to identify and manage surges and/or system stress using the many tools contained in the Capacity Plan. The more than 50 agencies that provide EMS services directly to the community receive regular guidance distributed through the County's Local Emergency Medical Services Information System (LEMSIS). EMS is engaged and supporting the mission at all levels of response to this emerging disease.

E. Office of Emergency Services

The Office of Emergency Services (OES) Emergency Operations Center would be activated if there is sustained human-to-human transmission of COVID-19 occurring in San Diego County. The OES coordinates the overall county response to disasters, including alerting and notifying appropriate agencies, when disaster strikes; coordinating all agencies that respond; ensuring resources are available and mobilized in times of disaster; developing plans and procedures for response to, and recovery from, disasters; and developing and providing preparedness materials for the public.

F. County Communication Office

The County Communications Office (CCO) will coordinate with responding agencies and partners to provide the public with information on the status of the current situation in San Diego County, including ways for the public to

protect themselves. Public information will be shared in many ways, including on different County departmental websites, social media, news conferences, mobile applications, and 2-1-1 San Diego telephone line and website. During Levels 2 or 1 activation of the MOC, the CCO would be responsible, in collaboration with OES, to provide staffing for a Joint Information Center or JIC.

SECTION IV: WHAT CAN THE PUBLIC DO?

Currently, there is no vaccine available to protect against COVID-19. At this time, the risk for contracting the new coronavirus in the American general public is low. The public has a greater risk of contracting influenza. Therefore, it is recommended for **everyone** to get their flu vaccine and practice proven and routine preventive actions to help prevent the spread of any respiratory viruses and other germs.

Preventive Measures

These preventive measures include actions that are also called Nonpharmaceutical interventions (NPI). These actions are proven strategies to slow the spread of disease and prevent illness. You can protect yourself and your family by:

- Washing your hands often with soap and water for at least 20 seconds - if soap and water are not available, use at least a 60 percent alcohol-based hand sanitizer.
- Avoiding touching your eyes, nose, and mouth (especially with unwashed hands).
- Cleaning and disinfecting frequently touched objects and surfaces.
- Avoiding close contact with people who are sick.
- If you are sick, stay home and keep your distance from others to protect them from getting sick too.
- Covering your cough and sneeze, with a tissue if possible, then throwing the tissue in the trash and washing your hands.
- Practicing other good health habits. Get plenty of sleep, be physically active, manage your stress, drink plenty of fluids and eat nutritious food.
- Being prepared and informed.

What to Do If Exposed to COVID-19

If you have had close contact with someone who has COVID-19 or is being evaluated for infection:

1. Monitor your health starting from the day you **first** had close contact with the person and continue for 14 days after you **last** had close contact with the person.
2. Watch for these signs and symptoms:
 - Fever (100.4F/38C or higher) – Take your temperature twice a day,
 - Coughing,
 - Shortness of breath or difficulty breathing, and
 - Other early symptoms include chills, body aches, sore throat, headache, diarrhea, nausea/vomiting, and runny nose.
3. If you develop fever or any of these symptoms, call your health care provider right away, so they can arrange to for infection control measures, to prevent exposure to other patients.

SECTION V: PLANNING FOR OUTBREAKS AND PANDEMICS

What Should the Public Do?

Pandemics may happen when a new (novel) strain emerges which can infect people easily and spreads from person-to-person in an efficient and sustained way. Not all novel strains result in a pandemic. You are encouraged to review an excellent resource provided by the Department of Homeland Security at [Ready.gov/Pandemic](https://www.ready.gov/pandemic). This website identifies actions the public can take before and during a pandemic. It is essential to plan now for community transmission of COVID-19 in our region. CDC has also published "[Interim Guidance: Get Your Household Ready for Coronavirus Disease.](#)" Please note these following important tips to help residents prepare to respond to this public health threat.

- Store a two-week supply of food, beverages, and water, including food for family pets. Ensure an adequate supply of prescribed and routine medications are on hand.
- Plan ways to care for those who are at greater risk for serious complications and who will take care of sick family members.

- If you have family members with increased risk of getting seriously sick, check with your medical providers about symptoms and treatment.
- Create an emergency contact list of family and friends, teachers and employers.
- Have a plan in case your school, childcare, or employer closes temporarily.
- Talk with your children, family, and friends about what to do if an outbreak occurs and what each person would need.

Planning now helps you act more effectively to protect you and your family when COVID-19 does occur locally.

What Should Schools Do?

Childcare settings and schools can take steps to help stop or slow the spread of COVID-19:

- Review, update and implement emergency operations plans in collaboration with the local health department and other relevant partners.
- Make sure the plan includes strategies to reduce the spread of a wide variety of infectious diseases.
- Monitor student and staff absences and alert local health officials of a spike of absences due to respiratory illnesses.
- Ensure they know what to do, such as staying home when sick and appropriately covering coughs and sneezes.
- Clean surfaces frequently such as doorknobs and desktops.

CDC has published and [“Interim Guidance for Administrators of US Childcare Programs and K-12 Schools to Plan, Prepare, and Respond to Coronavirus Disease 2019.”](#) This document provides information to help childcare programs, schools, and their partners understand how to help prevent the transmission of COVID-19 within childcare and school communities and facilities.

What Should Businesses Do?

In the case of community widespread exposures and outbreaks, the CDC has issued an [interim guidance](#) for businesses that may help prevent workplace exposures to COVID-19.

Actions include the following:

- Encourage sick employees to stay home if they have symptoms of acute respiratory illness.
- Make sure your sick leave policies are flexible and consistent with public health guidance and that employees are aware of them. Sick leave policies should be flexible and permit employees to stay home if they need to care for a sick family member.
- Have a plan in place should a large number of employees get sick or need to work from home.
- If an employee shows up to work sick or becomes sick during work hours, separate them and send them home.
- Encourage sneezing and coughing etiquette and hand hygiene by all employees.
- Perform routine cleaning of all frequently touched surfaces in the workplace, such as workstations, countertops and doorknobs.

Workplaces offer many opportunities for people to interact. More interaction between people in close contact increases the risk for illnesses. Business are encouraged to develop an emergency communication plan for sharing information with managers, employees, clients, and customers during a pandemic. The evaluation of flexible attendance and sick leave policies and human resource guidance is recommended in advance of a pandemic.

Everyone has a role to play in preventing the spread of COVID-19. If you have questions about COVID-19, call 2-1-1 to speak with a specially trained operator or visit www.coronavirus-sd.com.



SECTION VI: RESOURCES AND REFERENCES

A. Resources

1. **2-1-1 San Diego**, <https://211sandiego.org/>. On January 29, 2020, the call line for general public inquiries was established.
2. **CDC Information Lines, Centers for Disease Control and Prevention, United States Department of Health and Human Services, (800) 232-4636**. A national contact center and publication fulfillment system that offers live agents by phone and email to help callers find the latest, reliable, and science-based health inform
3. **San Diego County Health and Human Services, Epidemiology Branch**. Health care providers who identify possible patients that have traveled from mainland China should contact the San Diego County Epidemiology Unit at 619-692-8499 during normal business hours (Monday-Friday 8AM- 5PM, or 858-565-5255 after hours, on weekends, and County-observed holidays). To obtain further information on what the County of San Diego is doing to monitor and respond to coronavirus, please go to www.coronavirus-sd.com.

B. References

1. **County of San Diego Health and Human Services Agency (HHSa)**, 2019 Novel Coronavirus:
https://www.sandiegocounty.gov/content/sdc/hhsa/programs/phs/community_epidemiology/dc/2019-nCoV.html
2. **California Department of Public Health**, Novel Coronavirus 2019:
<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/nCOV2019.aspx>
3. **The California Department of Public Health (CDPH)** and a Network of Labs Prepare to Begin Novel Coronavirus testing in California:
<https://www.cdph.ca.gov/Programs/OPA/Pages/NR20-004.aspx>

4. **Centers for Disease Control and Prevention (CDC)** – About 2019 Novel Coronavirus (2019-nCoV): <https://www.cdc.gov/coronavirus/2019-ncov/about/index.html>
5. **Centers for Disease Control and Prevention (CDC)** – Human Coronavirus Types: <https://www.cdc.gov/coronavirus/types.html>
6. **Centers for Disease Control and Prevention (CDC)** – Nonpharmaceutical Interventions: Workplace Administrators. <https://www.cdc.gov/nonpharmaceutical-interventions/workplace/workplace-administrators.html>
7. **World Health Organization** – Information and guidance regarding current outbreak of COVID-19, including travel advice and situation reports: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019>

SECTION VII: APPROVAL

This plan has been approved by:



Wilma J. Wooten, M.D., M.P.H.
Public Health Officer
Director, Public Health Services

February 16, 2020

Date

Revision Dates #1	March 5, 2020
Revision Dates #2	
Revision Dates #3	
Revision Dates #4	