



Hosted by Lydia Missaelides

March 17, 2021
10:30 am - 12:00 pm

**The Pathway Back to CBAS:
Getting Safely Started Now**



Made possible by a grant from
Archstone Foundation



MARCH 03, 2021 Webtalk Evaluation: 4.9!

1. WOW, how fortunate we are to have Dr. Gandhi speak with us.
2. I am adjusting the sails!
3. Bring back Dr. Gandhi!! She was amazing! She brought a new positive outlook that has given me hope that things will change soon! Thank you
4. Dr. Gandhi was awesome! Makes us in SF proud to have her in our fabulous City!
5. Very helpful and hopeful. Appreciated her debunking myths.
6. I thought Dr. Gandhi was great! She was honest and shared her perspective on the information overload we are all absorbing.
7. This talk defiantly gave me hope for the future. gained more knowledge from today's talk then any of the information I have been receiving from the news and work.
8. LOVE this group... thank you so much.
9. Excellent! Loved Dr. Gandhi. Lydia, you do such an excellent and gracious job with navigating questions etc.
10. Thanks as always! It was great to hear a presenter providing an optimistic and science-based perspective on the pandemic.
11. Enjoyed Dr Gandhi-easy to understand and follow explanation on the Cov19 Vaccine works
12. What a breath of fresh air! I am ready to start realistically adjusting our sails immediately! recommendations for ADHC. No room for pessimism here!
13. Excellent information to clarify vaccination concerns.
14. Great sensible, optimistic and easy to understand information.
15. Very insightful and helpful, Thank you Dr Gandhi, Lydia, Pam and rest of Staff for keeping us updated with such valuable information.
16. Appreciate the time to put info together that was easy to understand and follow.
17. Excellent webinar and Dr. Gandhi was inspiring. Her passion is only outweighed by her knowledge and expertise. Thank you!
18. Another informative webinar. Now, we are the most informed audience.
19. Encouraging in respect to needs when we re-open congregate services
20. Very well presented and informative, I am surprised r/t information on mask wearing after Covid 19 vaccinations and herd immunity.
21. The webinar was very informational. It helps to have this expert knowledge when responding to client's concerns regarding the vaccines.
22. Thank you Team CAADS for all the latest updates on the rapidly changing dynamics of the pandemic and vaccine rollouts! What a year how far we've come!

Agenda

- 1) Vaccine and Vaccination Updates
- 2) CDA Updates
- 3) Preparing for Safe Re-entry to TAS/CBAS
- 4) Resources
- 5) Thought for the Week

Presenters

- Ron Chapman, MD, MPH, COVID Vaccine Task Force, CDPH
- Denise Peach – Former Chief, CBAS Branch, CDA
- Vision Team Members:
 - Lena Haroutunian, Program Director, New Sunrise ADHC
 - Jennifer Hurlow Paonessa, Program Director, Neighborhood House
 - Kay Lee, Vice-President, Commonwealth ADHC
 - Richard Lee, Program Director, Beverly ADHC
 - Renee Nashtut, CEO, TurboTar



Vaccinate ALL 58

Together we can end the pandemic.

California Department of Public Health

COVID-19 VACCINE TASK FORCE UPDATE

March 17, 2021



Vaccinate ALL 58

Together we can end the pandemic.

California Department of Public Health

Dr. Ron Chapman
COVID-19 Vaccine Task Force

Update on COVID-19

COVID-19 in California

SEE THE NUMBERS

Tracking COVID-19

As of March 16, California has 3,530,055 confirmed cases of COVID-19, resulting in 55,372 deaths.

Cases

3,530,055 Total

1,260 Today

↘ 6.1 New cases per 100K

Deaths

55,372 Total

42 Today

↘ 0.1 New deaths per 100K

Tests

51,351,366 Total

167,229 Today

↘ 1.8% Test positivity

Vaccines Administered

12,637,197 Total

Updated March 16, 2021 at 10:00 AM with data from March 15, 2021

Note: Case rate is based on a 7-day average with a 7-day lag. Rates of deaths is based on a 7-day average with a 21-day lag due to delays in reporting. Test positivity is based on a 7-day average with no lag. Directional change is compared to the prior 7-day period. Data is provided by the California Department of Public Health.

COVID-19 by Age in the U.S.

Risk for COVID-19 Infection, Hospitalization, and Death By Age Group

Rate compared to 5–17-years ¹	0–4 years	5–17 years	18–29 years	30–39 years	40–49 years	50–64 years	65–74 years	75–84 years	85+ years
Cases ²	<1x	Reference group	3x	2x	2x	2x	2x	2x	2x
Hospitalization ³	2x	Reference group	7x	10x	15x	25x	35x	55x	80x
Death ⁴	2x	Reference group	15x	45x	130x	400x	1100x	2800x	7900x

All rates are relative to the 5–17-year age category. Sample interpretation: Compared with 5–17-year-olds, the rate of death is 45 times higher in 30–39-year-olds and 7,900 times higher in 85+-year-olds. Compared with 18–29-year-olds, the rate of hospitalization is 8 times higher in 75–84-year-olds (55 divided by 7 equals 7.9).

COVID-19 by Race/Ethnicity in U.S.

Risk for COVID-19 Infection, Hospitalization, and Death By Race/Ethnicity

Rate ratios compared to White, Non-Hispanic persons	American Indian or Alaska Native, Non-Hispanic persons	Asian, Non-Hispanic persons	Black or African American, Non-Hispanic persons	Hispanic or Latino persons
Cases ¹	1.9x	0.7x	1.1x	1.3x
Hospitalization ²	3.7x	1.1x	2.9x	3.2x
Death ³	2.4x	1.0x	1.9x	2.3x

Race and ethnicity are risk markers for other underlying conditions that affect health, including socioeconomic status, access to health care, and exposure to the virus related to occupation, e.g., among frontline, essential, and critical infrastructure workers.

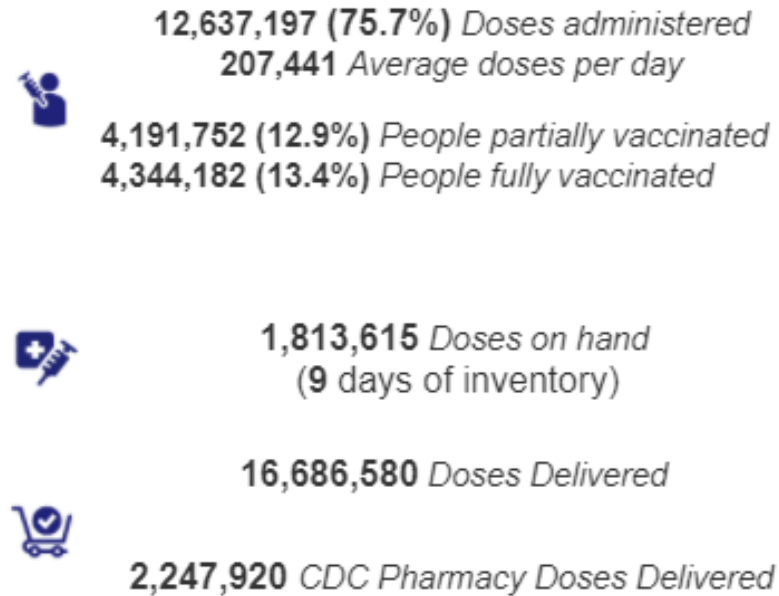
Vaccine Update

Vaccination Update



COVID-19: Vaccine Dashboard

Statewide



See [Data Dictionary](#) for Details.

Doses Administered by County of Residence

County

(All) ▼



Los Angeles	3,056,690
San Diego	1,274,951
Orange	1,037,074
Riverside	639,534
Alameda	619,693
Santa Clara	615,446
San Bernardino	490,894
Contra Costa	445,789
Sacramento	429,212
San Francisco	357,837
San Mateo	314,002
Ventura	270,080
Fresno	262,364
Sonoma	206,118
Kern	194,533

Data: 3/15/2021 11:59pm | Posted: 3/16/2021

COVID-19 Vaccines

Current COVID-19 vaccines with FDA emergency use authorization (EUA):

Pfizer- BioNTech

- Approved for those 16 years and older
- Consists of two doses given 21 days apart

Moderna

- Approved for those 18 years and older
- Consists of two doses given 28 days apart

Johnson & Johnson

- Approved for those 18 years and older
- Consists of just one dose

Who Is Eligible

Based on available supply, individuals described below are or will be eligible for COVID-19 vaccines:

Phase 1A 3,142,166 Californians

Healthcare workers and LTC residents and staff

Phase 1B 5,960,528 Californians

Food/Agriculture

Education/Childcare

Emergency Services

65+ 6,254,300 Californians

Who Is Eligible (continued)

People with high-risk medical conditions 4.4 million Californians:

- Cancer, current with weakened immune system
- Chronic Kidney disease, stage 4 or above
- Chronic pulmonary disease, oxygen dependent
- Down Syndrome
- Solid organ transplant, leading to a weakened immune system
- Pregnancy
- Sickle cell disease
- Heart conditions, such as heart failure, coronary artery disease, or cardiomyopathies (but not hypertension)
- Severe Obesity (body mass index greater than or equal to 40 kg/m²)
- Type 2 diabetes mellitus with hemoglobin A1c greater than 7.5%

Who Is Eligible (continued)

Healthcare providers may also vaccinate individuals with developmental or other severe disabilities or illness if:

- The individual is likely to develop severe life-threatening illness or death from COVID-19 infection.
- Acquiring COVID-19 will limit the individual's ability to receive ongoing care or services vital to their well-being and survival.
- Providing adequate and timely COVID care will be particularly challenging as a result of the individual's disability.

Who Is Eligible (continued)

- People in congregate living spaces such as behavioral health facility, prison, and jails.
- People experiencing homelessness about to transition into a congregate setting.
- Public transit workers, including airport workers for commercial airlines.
- Janitors in a variety of settings.
- Utility workers (electricity, gas, water, waste, roads/highways) that provide emergency support.
- Disaster service workers who have been activate.
- Social workers responding to abuse and neglect of children, elders and dependent adults, and those who must enter a residence as part of their work.

TB Test for New Participants

[Dept of Social Services PIN 21-14-ASC](#) (page 5) offers caution and guidance about the interaction of TB test and COVID-19 vaccination.

CDC recommends individuals:

- Complete the TB test before COVID-19 vaccination; or
- If already vaccinated, defer the TB test until four (4) weeks after completion of the second dose of the COVID-10 vaccine. (Note: J&J vaccine is a single dose)

Addressing Vaccine Hesitancy

COVID-19 Vaccines are Safe

California has its own **Scientific Safety Review Workgroup** comprised of immunization, public health, academic and other experts who are vetting vaccine safety.

The Scientific Safety Review Workgroup confirms the Pfizer-BioNTech, Moderna, and Johnson & Johnson **vaccines have met high standards** for safety and efficacy.

Sometimes vaccination can cause a sore arm, aches, fatigue or fever for a few days after getting the vaccine, but these are not harmful.

California's Vaccination Guiding Principles

California's plan for the distribution and administration of a COVID-19 vaccine is guided by the following overarching principles:

- Ensuring transparency by bringing in community stakeholders from the outset
- Ensuring the COVID-19 vaccine meets safety requirements
- Ensuring the vaccine is safe, distributed and administered equitably, at first to those with the highest risk of becoming infected and spreading COVID-19
 - Given recent surge and vaccine scarcity, this has shifted to those with highest risk of morbidity and mortality

Public Outreach and Education

The Vaccinate All 58 campaign's goal is to **educate, motivate and activate** Californians to get vaccinated when it's their turn.

- Combating mis- and dis- information
- Addressing barriers like a lack of access and hesitancy
- Helping Californians navigate eligibility

Accessibility for All

- Creating in-language content, with a focus on ethnic/multicultural media
- “Live Reads” airing across 40 ethnic media outlets in 18 languages
- \$52.7M awarded to 337 CBOs to date

Leveraging Trusted Messengers

“Ground game” teams:

- State funded CBOs
- Philanthropy funded CBOs
- Local health jurisdictions (61 total) and their CBO networks
- State agency partnerships
- Key stakeholders (elected officials, non-funded CBOs, etc.)

65+ Engagement Efforts

Engagement to reach older Californians:

- Leverage partnerships with state agencies that serve older Californians
 - Department of Aging
 - California Commission on Aging
 - Department of Health Care Services
 - Department of Social Services
 - Office of Emergency Services i.e. Listos California
- Partnership with established groups that serve older Californians
- Targeted Paid and Earned Media

Third Party Administrator

Transitioning to a Statewide Vaccine Network

- A third-party administrator (TPA) is an entity that selects and manages the network responsible for the delivery of health care or other services on behalf of a group of people. Blue Shield was chosen to be the TPA.
- Key functions include:
 - **CONTRACTS:** Develop and manage the state vaccine network contracts, including start-up costs and monthly incentive payments.
 - **COMMUNICATIONS & EDUCATION:** Develop and implement a communications plan with the state vaccine network providers.
 - **IMPLEMENTATION:** Support vaccine distribution criteria set by the state, including considerations such as hotspots and equity measures.
 - **REPORTING:** Feed provider data as required to myturn.ca.gov and statewide dashboards.

Be Notified When You Become Eligible

- Visit My Turn to sign up to be notified when you're eligible
- Scheduling system as a pilot, expanding to additional counties
- Those without access to the internet can call the CA COVID Hotline at 1-833-422-4255
 - Language capabilities in 250+ languages



How Will Californians Get Their Vaccine

- Schedule an appointment via My Turn or through your healthcare provider
- At a pharmacy
- Through your primary care provider
- Mass vaccination sites
- Employer-based, mobile, or pop-up clinics

Thank You!

VA58@cdph.ca.gov

<https://toolkit.covid19.ca.gov/partners/>

Who qualifies from CBAS/ADHC/ADPPs?

Everyone!

See CDPH Fact Sheet

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/vaccine-high-risk-factsheet.aspx>



Sample Verification Letter from CAADS

[insert letterhead here]

March 15, 2021

This letter serves as verification that [insert participant full name] is enrolled in [insert program name] and meets the criteria described by the California Department of Public Health Information Notice for COVID-19 vaccine administration released on March 11, 2021 with an effective date of March 15, 2021.

Signed,

Name
Title
Center

Regional Center Participant Outreach

Dept of Developmental Services (DDS) letter 3/9/21 directs Regional Centers to:

1. Provide personalized letters re: eligibility to be vaccinated
2. Conduct outreach to consumer ages 16 and over re: where to get vaccine; how to schedule appointment; options for assistance
3. Those most at-risk should be prioritized

Dept. of Developmental Services Letters

Department of Developmental Services has issued three letters to support professional and family caregivers to obtain vaccinations:

<https://www.dds.ca.gov/corona-virus-information-and-resources/vaccine-testing/>

1. Direct service employees

https://www.dds.ca.gov/wp-content/uploads/2021/01/COVID-19VaccinePhase1ALetter_DirectServiceEmployees_01132021.pdf

2. Family caregivers of people with Intellectual and Developmental Disabilities

https://www.dds.ca.gov/wp-content/uploads/2021/01/COVID-19VaccinePhase1ALetter_FamilyMembers_01132021.pdf

3. Regional center employees

https://www.dds.ca.gov/wp-content/uploads/2021/01/COVID-19VaccinePhase1ALetter_RCEmployees_01132021.pdf

Continue to Support Vaccination Readiness & Access

- No does not mean never, sometimes it is a slow yes
 - Continue to support your staff and participants with education; gentle encouragement and assistance in making appointments for vaccination, as needed.
- Your help is invaluable. Access to vaccination clinics remains a challenge.
- Do keep track of vaccination status of staff and participants

Vaccination Clinic Sites Updates

- Added eligibility (4.4 million Californians) starting 3/15 adds to longer waits and difficulty making appointments for existing groups.
- Specific vaccine (Pfizer, Moderna, Janssen) depending on individual site and/or availability.
- ADA accessibility improving with addition of drive thru lanes (ie. Disneyland, Hansen Dam) and other accommodations.
- Check to see if special accommodations are provided for those with difficulty with ambulation or additional health issues.

“MyTurn” Appointment Website Update

Do you currently have any of the following conditions that put you at the highest risk for extreme complications from COVID-19?

Cancer, current with debilitated or immunocompromised state | Chronic kidney disease, stage 4 or above | Chronic pulmonary disease, oxygen dependent | Down syndrome | Immunocompromised state from solid organ transplant | Pregnancy | Sickle cell disease | Heart conditions, excluding hypertension | Severe obesity with a Body Mass Index ≥ 40 kg/m² | Type 2 diabetes mellitus with hemoglobin A1c level greater than 7.5%

For more details on these conditions, visit [California Department of Public Health](#)

☐ Yes

☐ No

Do you currently have a physical or mental disability that is so severe and high-risk that one of the following applies: 1) a COVID-19 infection is likely to result in severe, life-threatening illness or death; OR 2) acquiring COVID-19 will limit your ability to receive ongoing care or services vital to your well-being and survival; OR 3) providing adequate and timely COVID care will be particularly challenging as a result of your disability?

☒ Yes

☐ No

- Additional screening questions for disability/high-risk eligibility.
- No current qualifiers for ADHC/CBAS attendance.
- Recommendation for ADHC/CBAS to check “Yes” on second qualifier until specific eligibility is added on website.
- First qualifier should be “Yes” if applicable.

Other Appointment Sites

- Retail pharmacy websites (Rite-Aid, CVS, etc..) require separate signups but may offer more local options and increased availability.
- Online tools such as (<https://www.findmyvaxla.com/>) offer assistance with searching for available appointments.
- County/city specific websites and other resources have less traffic and maybe easier to navigate.

Rite Aid COVID-19 Vaccine Scheduler

Let's check if you qualify for the COVID-19 vaccine at this time.

State and local jurisdiction qualifications determine if you are eligible for the COVID-19 vaccine at this time. The customer is responsible for complying with all federal, state and/or local guidelines. All responses on the form must be accurate or your appointment may be canceled.

Date Of Birth What's your occupation?

City Do you have any other medical conditions?

State Zip Code (optional)

Available Appointments	
Magic Mountain 26101 Magic Mountain Pkwy Valencia, CA 91355	
03/16/2021: 956+ Appointments Available	03/17/2021: 1244+ Appointments Available
03/18/2021: 1102+ Appointments Available	03/19/2021: 913+ Appointments Available
03/20/2021: 884+ Appointments Available	03/21/2021: 455+ Appointments Available
Last Updated: Less Than a Minute Ago	

COVID-19 Vaccinations

People in Tier 1A and seniors 65 and older are now eligible for a free COVID-19 vaccination.

The City of Glendale is pleased to partner with Tri-State Clinics to offer COVID-19 vaccines to our community.

February 20, 21, & 22, 2021
9:00 a.m. to 4:00 p.m.

Glendale Civic Auditorium
1401 North Verdugo Rd., Glendale, CA 91208

REGISTRATION IS REQUIRED!

Saturday 2/20/21 - <https://www.calvax.org/reg/8956702129>
Sunday 2/21/21 - <https://www.calvax.org/reg/5812602969>
Monday 2/22/21 - <https://www.calvax.org/reg/1012582969>
Tel: 750.842.6843 Option Mobile (1) Spanish, English, Armenian, Russian

tri-state
Community Services & Parks

Partnering with a Retail Pharmacies

- Reach out to local pharmacies (Albertsons, CVS, Rite-Aid).
- Inquire about hosting an on-site clinic for participants and staff.
 - Be sure to have a specific number of first/second doses and support staff to assist.
- We have successful examples of clinics hosted at ADHC and ADPs
 - We can put you in touch with others to share experiences

CDC Guidance for Vaccinated People

For the purposes of this [guidance](#), people are considered fully vaccinated for COVID-19 ≥ 2 weeks after they have received the second dose in a 2-dose series (Pfizer-BioNTech or Moderna), or ≥ 2 weeks after they have received a single-dose vaccine (Johnson and Johnson [J&J]/Janssen).[†]

Note: this guidance **applies to non-healthcare settings**.

POLLS

CDA Updates

Denise Peach

ACL 21-03, March 12, 2021 Vaccine Eligibility

Notice of vaccine eligibility for
ADHC/CBAS participants 18-64

- Providers should inform participants of their eligibility and assist with scheduling an appointment as needed
- Participants will need to self-attest that they meet eligibility requirements
- Verification documentation of the diagnosis or type of disability is not required

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

GAVIN NEWSOM Governor

CALIFORNIA DEPARTMENT OF AGING
Community-Based Adult Services Branch
1300 National Drive, Suite 200
Sacramento, CA 95834
www.aging.ca.gov
TEL 916-419-7545
FAX 916-928-2507
TTY1-800-735-2929



ACL 21-03

Date: March 12, 2021
To: Adult Day Health Care (ADHC) / Community-Based Adult Services (CBAS)
Center Administrators and Program Directors
From: California Department of Aging (CDA) CBAS Branch
Subject: COVID-19 Vaccine Eligibility for Persons with High-Risk Medical Conditions
or Disabilities

Purpose

This All Center Letter (ACL) is to notify ADHC / CBAS providers that all ADHC / CBAS participants ages 18 to 64 are eligible to receive the COVID-19 vaccine as of March 15, 2021, because of their high-risk medical conditions and/or developmental or other significant high-risk disabilities which places them at high-risk for death and severe complications from COVID-19, per the California Department of Public Health (CDPH) [Provider Bulletin](#).

ACL 21-02 March 5, 2021

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

GAVIN NEWSOM Governor

CALIFORNIA DEPARTMENT OF AGING
Community-Based Adult Services Branch
1300 National Drive, Suite 200
Sacramento, CA 95834
www.aging.ca.gov
TEL 916-419-7545
FAX 916-928-2507
TTY1-800-735-2929



ACL 21-02

Date: March 5, 2021
To: Adult Day Health Care (ADHC) / Community-Based Adult Services (CBAS)
Center Administrators and Program Directors
From: California Department of Aging (CDA) CBAS Branch
Subject: Provision of ADHC / CBAS Services in the Center

Purpose

This All Center Letter (ACL) is to remind ADHC / CBAS providers that the policy directives in [ACL 20-14 "CBAS Temporary Alternative Services \(TAS\) Guidance on Provision of In-Center Services"](#) are still in effect due to the public health emergency (PHE), until revoked by CDA. Providers may not deliver services in the center unless they meet all requirements specified in ACL 20-14.

ACL 21-02 March 5, 2021 (cont.)

Current Requirements and Phased Transition to Congregate Services

- With decreased COVID-19 cases/deaths and increased vaccinations planning has begun for return of congregate center services in 2021
- Meanwhile providers are currently able to deliver remote and limited in-center services under the provisions of ACL 20-14
 - TAS currently allows for in-center services, as approved in your TAS Plan of Operation.
 - “Group” services such as group activities and group dining are not allowed until further guidance is released.
 - However, participants may attend the center for individual services that may be provided parallel to other participants but not in groups, until further notice from CDA

TAS Continues Through 2021

- CBAS TAS flexibilities were set to expire this month, however the Department of Health Care Services (DHCS) is working with CMS to extend these flexibilities, to a yet unspecified date later this year
- TAS remains in place but you will safely transition participants and teams through phases over the next several months to increase availability of in-center services
- CDA anticipates releasing new guidance soon that will identify expectations/requirements for the phased transition to congregate services
- In the meantime, providers should begin planning for the transition to congregate



“It’s a Good Time to Start Planning”

Vision Team

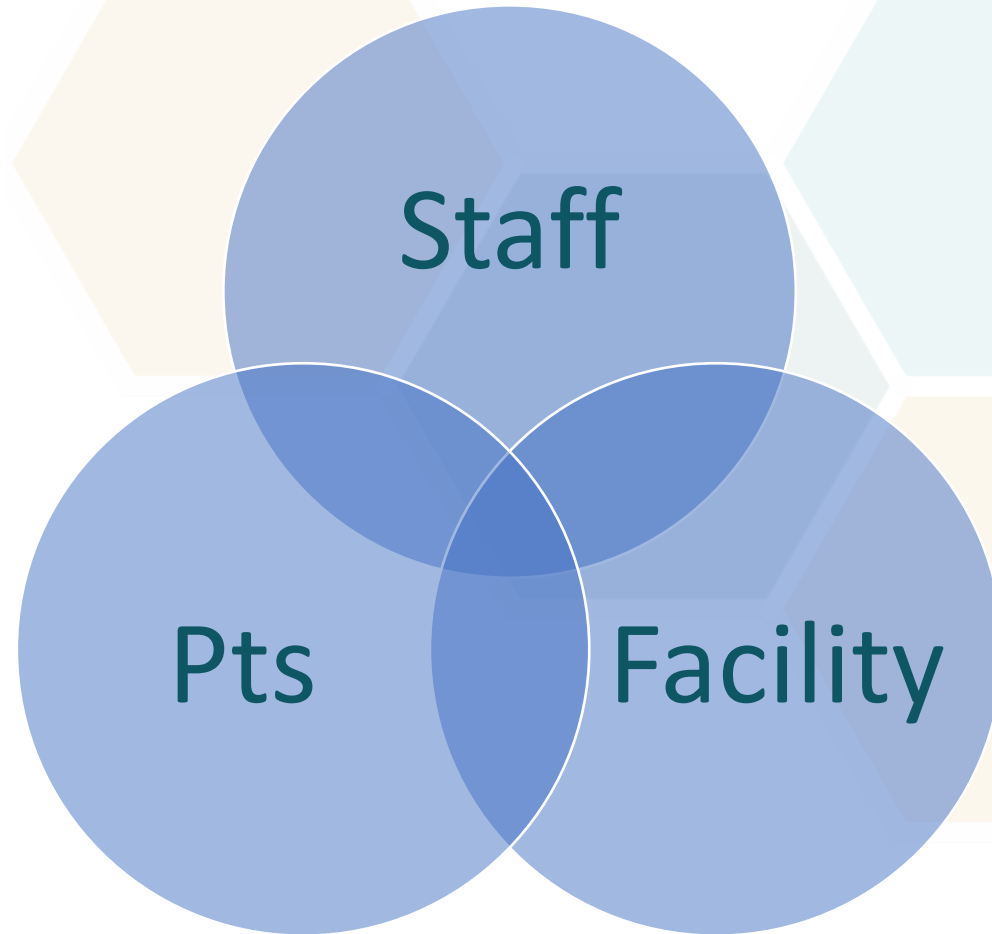
Where to Start?

- This is just the beginning of preparing for return to in-center groups. We are setting up to be able to operationalize upcoming return.
- Until further guidance comes from CDA, we are still operating under TAS.
- Inherent flexibility exists in TAS, so do not wait until new guidance comes out to start preparations.
- Goal is a gradual return to in center services and preparations can begin anytime.
- The situation changes day-by-day, so remain adaptable and trust that we will have a clearer picture moving forward.



Planning Considerations

- Start with these elements
- They are all connected & related
- Where circles intersect are where to think about how these elements interact with each other



Think about Staffing

- CDA Form 0006 - Staffing Changes
 - Core MDT will be needed we move toward re-assessments and new admissions.
 - Think about workload of evaluations, assessments, reassessments workload. What and when and how long will it take to look at all participants.
- Imagine work spaces for staff
- What flexibility is needed to move between TAS in-center and remote services as in-center services are gradually added

Cal OSHA Emergency Temporary Standards

Model COVID-19 Prevention Program

The Model Covid-19 Prevention Program is a new requirement, per Cal OSHA Emergency Temporary Standards, effective 11/30/2020. Until 3/1/2021, no monetary penalties were imposed on employers acting in good faith.

Per Cal Osha, these emergency provisions were already required under employers' Injury and Illness Prevention Programs (IIPP), including" identifying hazards, using face coverings, and physical distancing."

See: <https://www.dir.ca.gov/Title8/sb7intro.html>

Model COVID-19 Prevention Program

- Use Cal OSHA's Model Covid 19 Prevention Program to ensure all requirements are met
 - Model plan is easy to use and update
<https://www.dir.ca.gov/dosh/coronavirus/ETS.html>

COVID-19 Model Written Program

- COVID-19 Model Prevention Program – *Posted* December 1, 2020
(Fillable Word) [English](#) | [Español](#)
- You must orient employees to the plan and document their training
- Beneficial way to ensure that team's safety efforts are well coordinated during the return to in-center services

Example from the Model Plan: *Engineering controls*

1. We implement the following measures for situations where we cannot maintain at least six feet between individuals: *[enter your site-specific measures, which can include installing solid partitions.]*
2. We maximize, to the extent feasible, the quantity of outside air for our buildings with mechanical or natural ventilation systems by:
[describe how this will be accomplished, taking into consideration:
 - *Circumstances where the amount of outside air needs to be minimized due to other hazards, such as heat and wildfire smoke.*
 - *How the ventilation system will be properly maintained and adjusted, whether you own and operate the building, or not.*
 - *Whether it is possible to increase filtration efficiency to the highest level compatible with the existing ventilation system.]*

HELPFUL RESOURCE TO AID YOUR DECISION MAKING: [Interim Guidance for Ventilation, Filtration, and Air Quality in Indoor Environments \(ca.gov\)](https://www.cdph.ca/Programs/CID/DCDC/Pages/Immunization/Interim-Guidance-for-Ventilation-Filtration-and-Air-Quality-in-Indoor-Environments.aspx)

Guidance for Ventilation

[Interim Guidance for Ventilation, Filtration, and Air Quality in Indoor Environments \(ca.gov\)](https://www.dir.ca.gov/oshpd/)



This Guidance is intended to be used for buildings for which the state or local health department is permitting business, assembly, or other occupancy or use to occur indoors.

NOTE: On November 30, 2020, the California Division of Occupational Safety and Health (Cal/OSHA) implemented a mandatory [emergency temporary standard](#) (ETS) to prevent employee exposure to COVID-19 in California workplaces not covered by the Cal/OSHA Aerosol Transmissible Diseases standard. Employers must become familiar with and implement all employee protection requirements covered in the ETS. Please see Section 9 of this document identifying the specific provisions of the ETS that pertain to ventilation.

The following guidance supplements the Cal/OSHA ETS by recommending practical steps building operators can take to promote better ventilation, filtration, and air quality in indoor environments for the purpose of reducing the spread of COVID-19. This interim guidance may change as scientific knowledge, experience, community transmission, and other conditions change. Other useful information on building ventilation and related issues is available from the [Centers for Disease Control and Prevention](#) (CDC) and Section 10 of this document, Resources.

The recommendations described below come with a range of initial costs and ongoing operating costs, which may affect decisions about which interventions to implement. Always consult with building engineering or maintenance staff prior to making changes to a mechanical ventilation system.

Diane Puckett.

More Facility Preparedness

- Environmental Modifications
- Checking physical plant for readiness
- Great time to paint, clean, check HVAC system (especially if building has not been used regularly - cleaning and change filters)
- Air filtration – portable HEPA (can be noisy)
- Also, equipment, supplies (food and non-food) emergency food, PPE
- Hand sanitizer, thermometers, nursing supplies
- Arranging furniture to accommodate 6 foot spacing
- Signage

New Sunrise ADHC

Pre-COVID

Before remodel

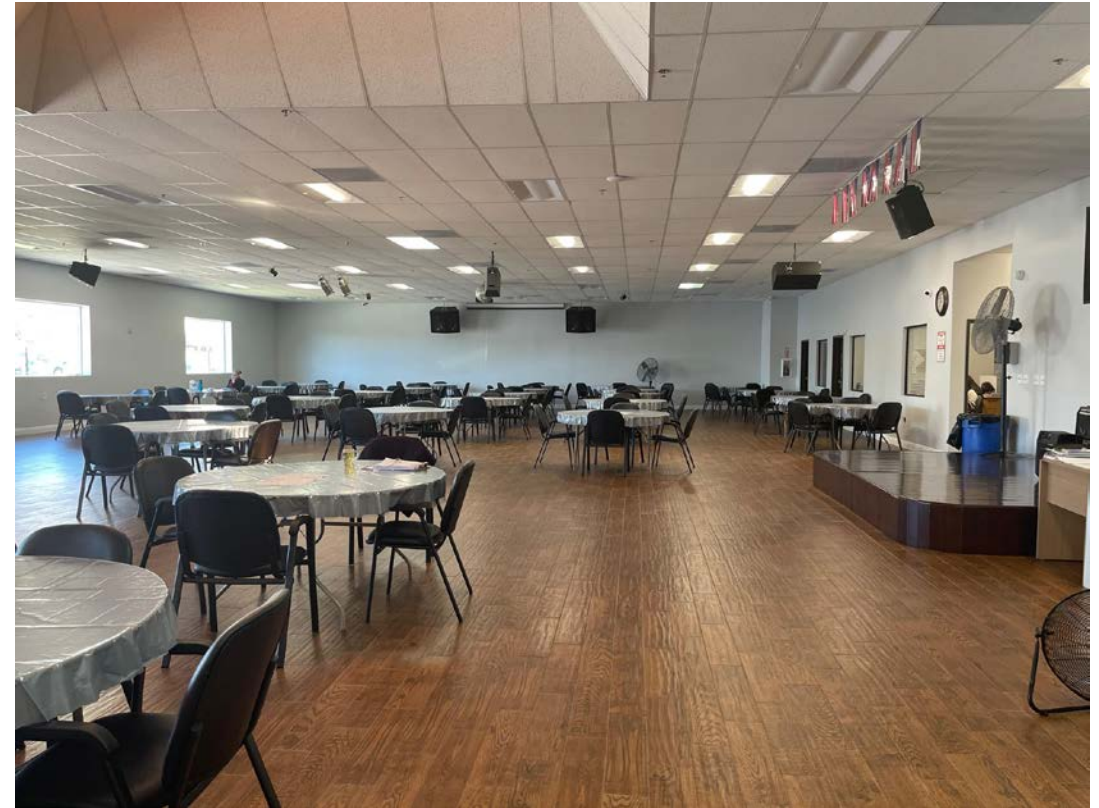


After remodeling

Paint, floors and new tables and chairs
with socially distance spacing



New Sunrise ADHC



Participant Readiness

- Look at participants from the perspective of prioritizing who might most benefit from coming into the center for a service
 - Begin to address strengthening and conditioning concerns as you are safely able to do through TAS, while you work on readying to move participants forward to come into the center.
- Consider both the participant and caregiver mindset. Ask how they feel about coming to the center for limited service?
- “Meet them where they are at”
 - What do you need to think about for each person to safely return to the center? For example, check on Paratransit eligibility, relationships and coordination with other services, e.g. IHSS.

Upcoming ALE webtalks

All webinars are held Wednesday 10:30 am to Noon, unless otherwise noted

Beginning Feb 17, 2021 Webtalk moves to 1st and 3rd Wednesdays of the month

Save these dates:

April 7 , 2021 Re-entry planning and vaccination updates

April 21, 2021 More re-entry planning and guidance

May 5, 2021 To be announced

May 19, 2021 To be announced

June 2, 2021 To be announced

Thought for the Week

STRENGTH
“A **river cuts**
through rock, not
because of its power, but
because of its
persistence.”



—James N. Watkins