



Emergency Operations Plan

# **COVID-19**

# **Infectious Disease**

# **Outbreak Plan**

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## INTRODUCTION

Respiratory viruses, such as influenza, are highly contagious. Seasonal outbreaks of these often occur in communities during the fall and winter. During a typical flu season, 5% - 20% of the U.S. population becomes ill; more than 200,000 are hospitalized, and about 36,000 die. Influenza spreads from person to person mainly in respiratory droplets from coughs and sneezes or handling contaminated objects. Yearly immunization with the influenza vaccine is the most effective way of preventing influenza.

At unpredictable intervals, a novel (new) virus, such as the novel coronavirus, appear in humans for which there is no immunity. If the novel virus is transmitted easily from person to person and causes significant illness, this creates the setting for a pandemic, a large-scale outbreak of illness with the rapid spread from person to person and country to country. The World Health Organization (WHO) is responsible for announcing a global pandemic.

Pandemics are about people and the interruptions in their everyday lives. It is expected that a pandemic may have a worldwide impact with an unpredictable timeline, comprising multiple events or waves, and spreading quickly from one urban area to another. Major disruptions are likely for health care, transportation, education, and other public services. Higher education may be severely impacted.

As more information and response strategies develop and become available, the Santa Monica College (SMC) Infectious Disease Outbreak Plan will be updated. Should you have questions or concerns related to the information shared within this document please contact the Student Health Center located on the ground floor of the Cayton Center or the Office of Chief of Police at 1718 Pearl Street.

## PURPOSE

The Santa Monica Community College District's Infectious Disease Outbreak Plan is a companion document to Santa Monica College's Emergency Operations Plan. The plan serves to provide the overarching guidance in developing response plans and subsequent activities, leading to pandemic preparedness. Key departments may need to develop their own internal response plans to address specific issues within their area related to the threat of excessive absenteeism or campus closures.

The SMC community has an obligation to be responsive as with any community and even more, given the social and communal nature of a college campus. Further planning, collaboration and training will prove to be essential in reducing the impact of a pandemic outbreak and while maintaining the critical operations of SMC.

This plan is a dynamic document and will be revised as dictated by circumstances or changes in information.

## OBJECTIVES

The greatest effect on Santa Monica College will be absenteeism and campus closure due to an outbreak. The focus of this plan is to prepare the College to respond to high absenteeism and the possible curtailment of specific activities. This plan is guided by the following principles:

- Protect and support the health, safety, and welfare of our faculty, staff and students, as well as the assets of the college;
- Maintain a commitment to the college mission to provide instruction and services;
- Provide resources and services to address the diverse needs of the college community in keeping with its mission of access and equity.
- Maintain business and administrative operations;
- Recover as quickly and efficiently as possible if any activities are interrupted or suspended;
- Ensure multi-modal communications within the college community, the local communities, and with stakeholders;
- Establish benchmarks or "triggers" to prompt prudent actions;
- To the extent feasible, extend the services or expertise of the college to benefit our community including neighbors, community partners and agencies, and educational and civic partners.

## AUTHORITY

The State of California has the primary responsibility for public health matters within its borders, including isolation and quarantine authority. That authority is usually exercised locally by the Los Angeles County Department of Public Health. In a pandemic situation, the Department of Public Health collects and analyzes health information, conducts epidemiologic investigations, institutes isolation and quarantine measures and, may close any facility if there is reasonable cause to believe that the facility in question may endanger the public health. The College has authority under Board Policy and the Emergency Operations Plan to take actions to minimize the impact of a pandemic on the College.

## INFECTIOUS DISEASE OUTBREAK COORDINATION TEAM

The Director of Health and Wellbeing and the Chief of Police will act as the coordination team (“Coordinators”) for the College. The Coordinators are responsible for monitoring and managing the day-to-day response for the District, providing information to the President, the Emergency Operations Team and the college community via emergency communications protocols.

Should an infectious disease outbreak become more severe than anticipated, it will be the responsibility of the Los Angeles County Public Health department to issue quarantine orders, direct facilities closure, and provide critical information designating key healthcare facilities as well as the distribution of anti-viral medications. That authority encompasses the Santa Monica Community College District. Under these circumstances, the President has the authority to declare a local state of emergency within the District and to operate the District in accordance with the SMC Emergency Operation Plan.

## RISK ASSESSMENT

As a novel (new) disease spreads throughout the world, people have little or no immunity and there will be limited vaccines available during the initial onset, which may result in a pandemic. The assumptions used in this planning process are:

1. A pandemic is a public health emergency that takes on significant political, social, and economic dimensions and will be governed by factors that cannot be known in advance.
2. A pandemic could last from 18 months to several years with at least two peak waves of activity. In an affected community, a pandemic wave may last about 6 to 8 weeks.

3. Vaccinations and antiviral treatment are anticipated to be the most effective medical treatment, but they may be in limited supply.
4. Non-medical containment measures will be the principal means of disease control until enough vaccinations are available.
5. Based on previous pandemics, the clinical attack rate (those persons becoming ill) is likely to reach thirty (30) percent in the overall population.
6. If the pandemic becomes severe, the economic impact is likely to be significant, though predictions are subject to a high degree of uncertainty.
7. Once the pandemic has run its course, economic activity should recover relatively quickly, although a severe pandemic will have a more disruptive effect.
8. High absenteeism rates (students and staff) constitute the greatest challenge to the College.

## **RESPONSE GUIDELINES**

### **Illness Severity**

The complete clinical picture with regard to new noroviruses are not fully understood. Reported illnesses have ranged from mild to severe, including illness resulting in death. Older people and people with certain underlying health conditions like heart disease, lung disease and diabetes, for example, seem to be at greater risk of serious illness and death.

Below California Department of Public Health outlines four (4) scenarios that should be considered by each campus in order to protect students, faculty, and staff. The current scenarios were based on current conditions as it relates to the COVID-19 Virus. Conditions may change based on information received from the California Department of Public Health.

### **Scenario I: Measures already underway to prevent the spread of a new norovirus such as COVID-19.**

Pursuant to prior guidance released, campus administrators have or should immediately take steps to slow the spread of respiratory infectious diseases, including COVID-19. CDPH has recommended implementing the following steps:

- Review and update emergency operations plans (EOPs), including continuity plans for teaching and learning if students are excluded from campus. **See Appendix “A”**
- Exclude students, faculty, or staff who have a travel history over the course of the last 14 days to an area identified by the CDC as Level 3 Travel Health Notice (see CDC’s Evaluating and Reporting Persons Under Investigation). Additionally, based on the Los Angeles County Public Health’s recommendation, exclude those who have been in close contact with someone diagnosed with COVID-19 from the campus for 14 days from the day of their last exposure.

- Students, faculty, and staff who present fever and/or respiratory infection symptoms should stay home and consult with campus healthcare professionals, manager and or Human Resources for guidance. When feasible, identify a “sick room” through which others do not regularly pass.
- Isolate the individual as much as possible from others and arrange for the individual to go home as soon as possible.
- Encourage flu vaccine for those who have not had it this season.
- Develop a communications plan to use with the college community and all constituencies.
- SMC Coordinator will contact county emergency operations center or the local public health department immediately if SMC notices any concerning clusters of respiratory disease or spikes in absenteeism. For contact information, please search the Los Angeles Public Health Department website: [publichealth.lacounty.gov](http://publichealth.lacounty.gov)
- Encourage all students, faculty, and staff to take everyday preventive actions:
  - Regular hand washing
  - Stay home when sick.
- Remain at home until fever has been gone for at least 24 hours without the use of fever-reducing medicines.
- Seek immediate medical care if symptoms become more severe, e.g., high fever or difficulty breathing.

Use “respiratory etiquette”.

- Cover cough with a tissue or sleeve. See CDC’s [Cover Your Cough](#) page for multilingual posters and flyers, posted at the bottom of the webpage.
- Provide adequate supplies within easy reach, including tissues and no-touch trash cans.
- Wash hands frequently.
- Encourage hand washing by students and staff through education, scheduled time for handwashing, and the provision of adequate supplies.
- Provide alcohol-based hand sanitizers to supplement hand washing.
- Enhance cleaning consistent with CDC guidance.

**Scenario II: Measures to be taken if there are two or more community transmission cases of a new norovirus such as the COVID-19 virus, but no staff or students test positive.**

If the local public health department has confirmed **two or more** community transmission cases, but no individuals (staff or students) at campus have tested positive for the norovirus, in addition to the items outlined in Phase I, CDPH recommends campus administrators implement the following steps:

- Faculty and staff with any fever and/or respiratory infection symptoms should not be at work. Faculty and staff should self-screen (check themselves for subjective fever and/or respiratory symptoms such as cough) for respiratory infection symptoms each morning before interacting with students.
- Ensure sick leave policies allow faculty and staff to stay home if they have symptoms of respiratory infection.
- Limit visitors to the campus by not allowing those with symptoms of fever and/or respiratory infection or who have a travel history over the course of the last 14 days to an area identified by the CDC with a Level 3 Travel Health Notice.
- Consider alternatives to congregated programming within the campus including any large or communal activities. (Such as fairs, athletic activities, and club activities)

**Scenario III: Measures to be taken if one student, faculty or staff member tests positive for the norovirus and exposed others on campus.**

If **one** student, faculty or staff member tests positive for norovirus, and exposed others on campus CDPH recommends that campus administrators implement the following steps:

- Isolate the student, faculty or staff and immediately contact your local public health department.
- Implement communication plans for campus closure to include outreach to students, faculty, staff, and the community.
- Provide guidance to students, faculty and staff reminding them of the importance of community social distancing measures while campus is closed, including discouraging students or staff from gathering elsewhere. Community social distancing measures include canceling group activities or events, religious services, after-campus classes and sporting events.
- Initiate the plan for continuity of instructional and support services, and establish alternate mechanisms for these to continue.
- Maintain regular communications with the local public health department.
- Consult CDC guidelines to determine what additional cleaning protocols, if any, should be deployed at the campus prior to reopening the campus.

## At Risk Populations

Older individuals and people with certain underlying health conditions like heart disease, lung disease and diabetes, seem to be at greater risk of serious illness. The Emeritus College caters to a population that is in this risk category. Steps to consider and or implement include:

- Cancellation of Classes
- If feasible move temporarily to remote instructional methodologies
- Determine the limit of the closure and any additional steps needed for the campus to reopen; temporary closure may be necessary to assess and clean facilities. Additionally, this may not include a complete closure. This determination will be made by campus administrators in consultation with the local public health department.

## **Scenario IV: Measures to be taken if multiple students, faculty or other employees test positive for COVID-19 on a campus.**

If more than **five** students, faculty, or staff on a campus test positive for COVID-19, the campus administrator should consult with local public health officials for guidance on closing the campus.

- In consultation with the local public health department, the campus administrator may determine the extent of the campus closure and what length of time is warranted based on the risk level within the specific community as determined by the local public health officer.
- Initiate communication plans for campus closure to include outreach to students, faculty, staff, and the community.
- Provide guidance to students, faculty and staff reminding them of the importance of community social distancing measures while campus is closed, including discouraging students or staff from gathering elsewhere. Community social distancing measures include canceling group activities or events, religious services, after-campus classes and sporting events.
- Continue the plan for continuity of instructional and support services, adjusting as needed and establish alternate mechanisms for these to continue.
- Maintain regular communications with the local public health department.

- Work with the local public health department to determine what additional cleaning protocols, if any, should be deployed at the campus prior to reopening the campus.
- Determine the timing of return of students and staff, and any additional steps needed for the campus to reopen, in consultation with the local public health department.
- Contact local area stakeholders to include SMMUSD and the City of Santa Monica to inform them of any closure plans that might affect concurrent services.

Please note that there have been reports of students and others being stigmatized. We must ensure students' and staffs' privacy to help prevent discrimination.

**Additional Resources.**

- Centers for Disease Control and Prevention Website : [www.cdc.gov](http://www.cdc.gov)
- California Department of Public Health Website: [www.cdph.ca.gov](http://www.cdph.ca.gov)
- Mass Gatherings – Appendix “B” California Department of Public Health Guidelines on Mass Gatherings.

## CRITICAL & ESSENTIAL FUNCTIONS

A complete closure of the College is not expected; however, if the severity of the pandemic increases, the College may have to cease social activities for some period (i.e., classes, public activities). The following critical functions need to be maintained if the District is ordered to close:

Critical and Essential Functions	Responsible Groups
Essential administrative functions, which include employee leave, benefits, and employment questions, establishing a labor pool to maintain critical functions, purchasing, payroll and student financial aid.	Office of the President Academic Affairs Student Affairs Human Resources Financial/Business Services Financial Aid Admission & Records
Safety and Security of the students, staff, faculty	College Police
Physical Plant and maintenance of infrastructure, utilities, custodial	Facilities
Community and media information Information Infrastructure	PIO & Institutional Communications (Web and Social Media) Information Technology

The administrators of each Department/Division will:

1. Plan on how to operate during a period of excessive absenteeism.
2. Plan on how to maintain critical and essential functions if the District must close. Consider what functions could be delayed or postponed or could be completed via telecommuting.
3. Identify, by name, the absolute minimum number of staff needed.
4. Identify a chain of succession within the area.
5. Identify contact numbers and emails address for all staff.

Copies of those plans are to be submitted to the District's Emergency Preparedness Coordinator (Chief of Police) and to the College President.

## **PLANNING CONSIDERATIONS – CAMPUS WIDE ISSUES**

### **Academic Affairs**

The Office of Academic Affairs shall develop policies and procedures concerning the necessity for waivers of regulations regarding examinations and required days of instructions. The Office of Academic Affairs should also encourage faculty to consider developing alternate methods to deliver classroom instruction and materials in the event of a campus shutdown. Implementation of these policies and procedures will be coordinated with the Academic Senate and Student Affairs. Information, as available, will be distributed to the campuses and posted online.

## **Human Resources**

The primary effects of a novel pandemic will be on staffing levels. Unlike natural disasters, pandemics do not damage property or equipment; the effects are mainly human resource oriented. Absenteeism may be for a variety of reasons: illness/incapacity, caring for other family members, or school closures. Human Resources will develop guidelines and provide answers to frequently asked questions related to leave, benefits, payroll and employment.

## **Information Technology Infrastructure**

During a level two or three pandemic event, it is possible that the College's information technology systems may become overloaded with increased volume. If public health plans call for social isolation, more staff, students, and faculty will be trying to "telecommute" and that will result in a change in normal network traffic patterns and increased demand placed upon network equipment and communication links to the internet. Information Services should develop strategies to inform the college about issues related to telecommuting and alternatives to meetings and presentations.

## **Travel**

The Federal Pandemic Response Plan anticipates that the public will voluntarily limit personal travel and that significant portions of business travel will also be curtailed. While it is unlikely that travel restrictions will be imposed by the state or federal government, the College should limit official travel to areas with high infection rates.

## **Public Health/Hygiene Etiquette**

Access to vaccines and antiviral drugs during the pandemic will be extremely limited. Non-medical interventions may be the only way to delay the spread of the disease. Non-medical interventions include limiting social gatherings and using infection control measures to avoid spreading the disease. The Center for Disease Control defines influenza-like illness as having a fever of 100-degree Fahrenheit or higher AND one of the following, cough or sore throat. The best guidance available is:

- Avoid close contact with people who are sick.
- Stay home and away from work until you are fever-free for 24 hours without the use of fever reducing medications.
- Cover your mouth and nose with a tissue, handkerchief, or the sleeve of your clothing when coughing or sneezing.
- Clean your hands – schools/colleges/units should consider providing waterless antibacterial hand cleansing solutions to individuals.

- Avoid touching your eyes, nose or mouth.
- Persons with respiratory infection symptoms can use a disposable surgical mask to help prevent exposing others.

## COMMUNICATION

Communication strategies are an essential component in managing any disease outbreak and are crucial in a novel pandemic. Accurate, timely, and consistent information at all levels is critical to minimize unwanted and unforeseen consequences and to maximize the practical outcome of the response.

The Coordinators and Public Information Officer (PIO) will be responsible for developing the information that will be distributed via the District's website, publications, posters and flyers, voice mail, e-mail, and regular mail.

All Departments and Divisions will develop an internal emergency communications plan and identify a primary and alternate person as the main point of contact for the Coordinators. All staff and students are encouraged to subscribe to the College's emergency alert system, which will be a primary means for communicating emergency information to the campus community.

## RECOVERY

Recovery begins immediately and continues throughout the response phase of any emergency/disaster. With the novel pandemic, recovery efforts may be thwarted by an unknown duration of the actual event and the unknown number of faculty, staff, and students affected.

### Business Resumption

Based on the best available information, the Coordinators will conduct ongoing reviews of the international/national/local and college's situation and make a recommendation to the President of the College about the appropriate response level and recommend a partial, incremental, or total return to normal operations.

### Psychological Support for Staff, Faculty, Students

After a pandemic wave is over, it can be expected that many people will be affected in a variety of ways. They may have lost friends and relatives, suffer from fatigue, or have financial losses as a result of the interruption of work. Services available to the staff, faculty, and students through campus resources will be communicated through all available means.

## **Analysis and After-Action Reports**

Once the resumption of classes, and college business and campus operations is underway, debriefings will be convened to discuss the response and recovery, changes necessary to current plans, and opportunities for improvement to future disasters.

With any pandemic, actions may be fluid and can rapidly change. The actions of the College will reflect the guidelines of the LA County Public Health Department, The California Community College Chancellor's Office and any emergency declaration with authority to mandate action.

Approved: March 11, 2020

## Appendix “A”

### **Preparation**

In addition to taking into consideration the (4) scenarios outlined by the California Department of Public Health all areas should assess the possible impact on the campus and develop a response plan to mitigate those impacts, to the extent possible. The Emergency Operations Team along with the Coordinators will be responsible for implementing the response plan upon direction from the President’s Office.

- 1) Create and Implement Prevention Campaign for Proper Hygiene and Disinfecting Protocol.
  - a) Obtain poster information from relevant sources for print, distribution, and posting.
  - b) If available, post videos demonstrating proper coughing/sneezing techniques on the College’s website.
  - c) Provide disinfecting dispensers in high use areas.
  - d) Provide disinfecting wipes in offices and labs where equipment is shared.
  - e) Provide custodial staff training on viral cleaning and disinfecting protocols.
  - f) Educate students on wiping keyboards and headsets with disinfecting wipes.
  - g) If possible, stock small disinfecting hand gels in the student center, cafeteria, library, computer centers, and all such common gathering areas. .
- 2) Create an absentee tracking program for monitoring changes in absenteeism in selected classes and areas. Predetermined classes will be notified that they will be monitored as part of the Pandemic Tracking Program, and faculty and students will be briefed on its purpose. Assign tracking leads for each area to report weekly status to the Coordinators. Potential classes or programs for tracking are:
  - a) Nursing Programs
  - b) Police/Community Contacts (Fingerprinting etc.)
  - c) Sports Teams
  - d) Maintenance and Operations, Student Services Building (employees)
- 3) Develop mitigation strategies.
  - a) Human Resources policies that address:
    - (1) Mandatory vs. voluntary release from work due pandemic illness
    - (2) Use of sick time for primary illness
    - (3) Extended use of sick time for care of family member with pandemic illness.
    - (4) Employees sick with no sick/vacation time remaining
    - (5) At work social distancing for high-risk employees (i.e. pregnant, immune suppressed, etc).

- 4) Remind College employees of the Disaster Service Worker (DSW) requirement by providing information via website, flyers, and training.
- 5) Faculty are encouraged to consider alternative methods of delivering instruction.
  - a) Faculty should provide guidance on attendance.
  - b) When appropriate, faculty will announce alternative methods of delivering instruction to their students.
  - c) When applicable, faculty may use distance learning, email, or other methods to accommodate student absences.
  - d) When appropriate, back-up faculty for critical classes should be identified in the event an instructor becomes ill and will be out for a protracted amount of time. Procedures for providing substitutes will be followed.
- 6) Purchase Personal Protective Equipment (PPE)
  - a) Purchase respiratory protective items (if available and appropriate)
  - b) Hand sanitizers
  - c) Protective eyewear
  - d) Gloves
  - e) Others as determined by the safety committee

### **Minimal Infection Rate (Scenarios 1 and 2)**

Initiate the Pandemic Tracking Program after the second week of school to allow students to add and drop courses without affecting the tracking of absenteeism.

- 1) Student attendance
  - a) Attendance will be taken on the same day of each week to maintain continuity of reporting.
  - b) Roll will be taken either at the beginning or end of class and provided to the Coordinators.
  - c) Attendance will be tracked to identify any severe spike (50% from week to week) or a steady increase in absenteeism.
  - d) If any faculty members are made aware of students testing positive for novel disease in their classes, they are to report it immediately to the Coordinators.
- 2) Administration attendance
  - a) If multiple employees in a department or common area report symptoms and/or home ill, the supervisor will contact the Coordinators.

- b) Employees or family member(s) testing positive for novel disease, the Coordinators will be notified.
- 3) Faculty attendance
- a) If multiple faculty reports flu-like symptoms or are home ill, the office of Academic Affairs will notify the Coordinators.
  - b) If faculty report flu-like symptoms and have reported an increase in student absenteeism or had a student test positive for novel flu, the faculty member will contact the office of Academic Affairs who in turn contact the Coordinators. .
- 4) Initiate a District-wide media awareness program
- a) Hygiene campaign on proper coughing, sneezing and hand washing.
  - b) "Wipe Away" campaign to disinfect shared keyboards, telephones, and workspaces.
  - c) Social Isolation when flu-like symptoms are present – stay home when sick campaign.
    - i) E-mail
    - ii) Website
    - iii) Campus wide bulletins
    - iv) Department meetings
    - v) Flyers and/or posters
- 5) Initiate Viral Cleaning and Disinfection Protocols
- a) Maintenance and Operations
  - b) High use areas i.e. computer center, cafeteria, shared workstations

### **Moderate Infection Rate (Scenario 3)**

Continue all activities outlined in the previous levels.

- 1) Initiate educational and work distancing
  - a) Distance learning should be available to impacted classes and programs.
  - b) Telecommuting options should be considered if feasible.
  - c) Transfer of critical functions should be addressed.
- 2) Social Distancing should be implemented
  - a) Minimize sport and public events.
  - b) Cancel class field trips and travel to areas with high infection rates.

### **Severe Infection Rate (Scenario 4)**

Continue all activities outlined in the previous levels.

- 1) Work with the Los Angeles County Health Department to determine whether mandatory

social isolation is appropriate for populations at high risk or whether closure of the college is necessary.

- 2) If closure is ordered:
  - a) Declare a College State of Emergency.
  - b) Reduce College operations to the critical functions outlined in this plan.
  - c) Clean and disinfect college in preparation for re-opening.

### **Subsidence**

- 1) Continue absentee surveillance program until trend is confirmed.
- 2) Continue hygiene campaign of handwashing and the proper way to sneeze/cough.
- 3) Continue disinfecting protocol.
- 4) Return to normal campus functions.
- 5) Assess and debrief campus departments to determine the effects of a pandemic wave.
- 6) Offer support services to affected individuals as appropriate.

## Appendix “B”

**TO:** Public Event Organizers

**FROM:** California Department of Public Health

**DATE:** March 7, 2020

**SUBJECT:** Mass Gatherings Guidance on Novel Coronavirus or COVID-19

This guidance is based on what is currently known about the transmission and severity of coronavirus disease 2019 (COVID-19). The California Department of Public Health (CDPH) will update this guidance as needed and as additional information becomes available.

### **Background**

COVID-19 is a respiratory illness caused by a novel virus that has been spreading worldwide. Community-acquired cases have now been confirmed in California. We are gaining more understanding of COVID-19’s epidemiology, clinical course, immunogenicity, and other factors as time progresses, and the situation is changing daily. CDPH is in the process of monitoring COVID-19, conducting testing with local and federal partners, and providing guidance and resources to prevent, detect and respond to the occurrence of COVID-19 cases in California.

At this time, community transmission of COVID-19 has occurred in California. Public event organizers should prepare for possible impacts of COVID-19 and take precautions to prevent the spread of COVID-19 as well as other infectious diseases, including influenza and gastroenteritis.

### **Illness Severity**

The complete clinical picture with regard to COVID-19 is not fully understood. Reported illnesses have ranged from mild to severe, including illness resulting in death. Older people and people with certain underlying health conditions like heart disease, lung disease and diabetes, for example, seem to be at greater risk of serious illness.

## Context

Mass gatherings and large community events bring people from multiple communities into close contact with each other and have the potential to increase COVID-19 transmission. One method to slow the spread of respiratory virus infections, including COVID-19, is by increasing social distancing (reduce close contact).

The goals of this guidance are: (1) to protect people attending and working at the event and the local community from COVID-19 infection; and (2) to reduce community transmission and introductions of COVID-19 into new communities.

Below CDPH outlines two (2) scenarios that should be considered by event organizers.

**Scenario I: CDPH recommends for mass gatherings and large community events in counties without evidence of community transmission, organizers should follow these steps:**

As the COVID-19 situation is evolving, event organizers should create an emergency contingency plan for how to modify, cancel, or postpone their mass gathering or large community event if a COVID-19 outbreak occurs in their community.

- Events may still need to be modified, canceled, or postponed if participants are traveling from communities with COVID-19 outbreaks.
- Event organizers should:
  - Collaborate and coordinate with community partners including the local public health department, hotels where participants are staying, airlines, the event venue, and other partners.
  - Use event messaging and communications to promote everyday preventive health messages to your participants and staff, which include:
    - Stay home when you are sick, except to get medical care.
    - Cover your coughs and sneezes with a tissue or sleeve, then throw the tissue in the trash.
    - 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.

- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Clean frequently touched surfaces and objects daily.
- Recommend that participants minimize close contact (e.g., recommending no hand shaking or hugging)
- Promote messages that discourage people who are sick from attending events.
- Create refund policies or remote participation capability such as live stream that permit participants the flexibility to stay home when they are sick, need to care for sick household members, or are at high risk for complications from COVID-19.
- Provide COVID-19 prevention supplies at your events, to the extent supplies are available. Plan to have extra supplies on hand for event staff and participants, including sinks with soap, hand sanitizers, and tissues. Promote proper and frequent hand hygiene.
- Isolate staff or participants in a designated space who become ill with symptoms consistent with COVID-19 at the event and provide a clean disposable procedure facemask, to the extent available, to wear for those who become ill. It is not necessary to distribute masks to healthy participants.
- Implement a strategy to prevent the theft of prevention supplies.
- CDPH does not recommend cancelation of community events at this time if no COVID-19 cases exist within the community.

**Scenario II: CDPH recommends for mass gatherings and large community events in counties with evidence of community transmission, organizers should follow these steps:**

- Event organizers should:
  - Anticipate that some non-essential events may need to be modified (e.g., conducted as a video webinar), canceled, or postponed.
  - Consider canceling non-essential events primarily for or attended by older adults and people with chronic medical conditions at higher risk for severe illness.
    - Stay informed about the local COVID-19 situation. Get up-to-date information about COVID-19 activity in California on the California
    - Discuss event details with local health officials and prepare to implement

- an emergency contingency plan based on their specific guidance.
- Collaborate and coordinate with event and community partners including the local public health department, hotels where participants are staying, airlines, the event venue, and other partners.
  - Use event messaging and communications to provide COVID-19 updates and to promote everyday preventive health messages to your participants and staff.
  - If a mass gathering or large community event does take place, in addition to basic prevention messages, CDPH recommends that event organizers should:
  - Instruct any participants or event staff to not attend if they have any respiratory symptoms (cough or runny nose) or fever regardless of the presumed cause.
  - Remind participants and staff to not attend if they have travelled within the past 14 days to an area identified by the CDC as having a Level 3 Travel Health Notice due to COVID-19.
  - Recommend that participants and staff at higher risk of severe illness not Attend.
  - Ensure that event venues are well ventilated and are adequately equipped with facilities for hand washing and supplies including hand sanitizer that contains at least 60% alcohol, tissues, and trash baskets.
  - Increase the frequency of cleaning commonly used areas with detergent and water followed by a disinfectant that is EPA-approved for emerging viral pathogens.

Disinfectants for Use Against SARS-CoV-2: <https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2>

- Encourage participants to minimize close contact (e.g., recommend no hand shaking or hugging).
- Maintain a registration list of participants and staff; this will significantly assist local public health in contact tracing in the event a COVID-19 case should later be identified as having attended the event.
- Promote messages that discourage people who are sick from attending events. Create refund policies that permit participants the flexibility to stay home when they are sick, need to care for sick household members, or are at high risk for complications from COVID-19.

- Isolate staff or participants in a designated space who become ill with symptoms consistent with COVID-19 at the event and provide a clean disposable procedure facemask to wear for those who may become ill. It is not necessary to distribute masks to healthy participants. Establish procedures to help sick participants or staff leave the event as soon as possible without use of public transportation, shared rides, or taxis.
- Provide alternative options for attending the event via phone, video, or web applications.