



Washington County COVID-19 Public Health Response in Partnership with HSSN

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WASHINGTON COUNTY
OREGON

Department of Health and Human Services

Roadmap ahead

- Overview of COVID-19 strike teams
- COVID-19 Preparation
- Contact Tracing Basics
- What to expect from Public Health if an exposure occurs
- Resources
- Questions

Who is most at risk for infection?

- Vulnerable populations:
 - Elderly, long-term care residents
 - People with underlying medical conditions
 - Front-line workers
 - Communities of color

COVID Response STRIKE TEAMS

- Strike teams address high risk populations within Wash. Co.
 - Long-term care facilities, workplaces, corrections/jail, agricultural settings, schools/ daycares and houseless populations
- Each strike team is comprised of
 - Public Health Nurse
 - Environmental Health Specialist
 - Epidemiologist
 - Senior Program Coordinator

COVID -19 Preparation

- Clear policies and procedures manual and training that addresses COVID-19 related material:
 - sanitation precautions and schedules
 - road map for staff who feel ill – human resources
 - clear procedures around intake processes
 - wellness checks
 - secure data collection and retention
 - clear procedure around exposure concerns
 - i.e. who is the main point of contact at the shelter that will take next steps with Public Health follow up

COVID-19 Preparation

- Following these steps can help ensure safety of those you serve and the staff onsite at your facility
- For more information, please refer to our toolkit
 - Appropriate PPE use
 - Sanitation schedules and increased attention to sanitation procedures
 - Physical lay out of your facility to encourage social distancing
 - Signage focused on public health measures such as wearing a mask, 6 ft apart, hand washing etc



Contact Tracing Basics

› Coronavirus COVID-19 Español

› Flu

› Hepatitis A

› Measles

› Norovirus

› Pertussis (Whooping Cough)

› Sexually Transmitted Infections

› Tuberculosis (TB)

› Disease Reporting for Providers

› Healthy Habits

› Should My Child Go to School?

› Long-Term Care Facility Resources

[State's Website on County and Regional Phase 2 Criteria Data](#)

BACK TO SCHOOL



EQUITY & INCLUSION



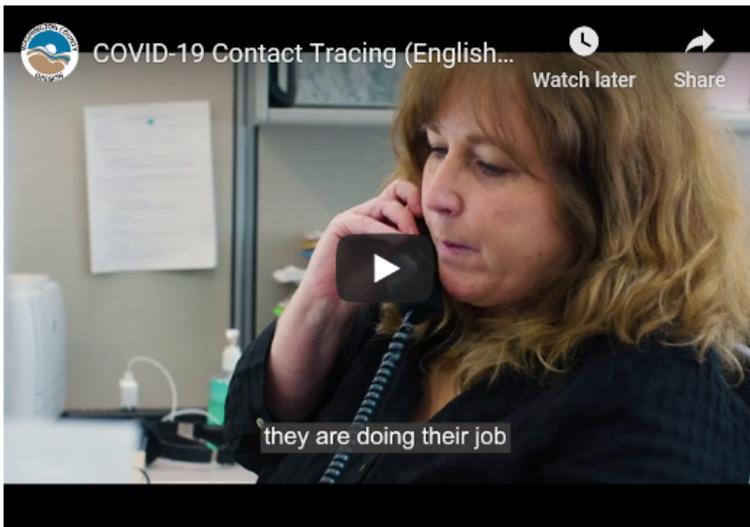
NEWS HIGHLIGHTS



TESTING SITES



CONTACT TRACING



Resources

- › [PPE and non-medical supplies available](#)
- › [Child Care Assistance](#)
- › Food Resources Guide in [English](#) and [Spanish](#)
- › Community Resource Directory in [English](#) and [Spanish](#) (Housing, health care, children and families, mental health, small business support and much more).
- › [Essential Needs Hubs](#): Local hubs have been established to support community members, provide resources, coordinate volunteers and accept donations.
- › [211Info](#): For general information regarding COVID-19 or for help getting food, paying bills or other assistance, call 211 or 1-866-698-6155. Text your zip code to 898211 (TXT211). Email help@211info.org
- › [Safe + Strong](#): Resources and updates from the Oregon Health Authority (OHA). Available in multiple languages.
- › [COVID-19 Posters](#). Available in multiple languages.



Why Contact Tracing is Important

What We Know:

- Individuals who have contracted COVID-19 are contagious, or actively shedding live virus, for two days BEFORE symptoms begin and UP TO 10 DAYS AFTER.
- Individuals exposed to COVID-19 can develop symptoms between 2-14 days after exposure.

When individuals quarantine or isolate during these time periods, we break the chain of transmission and prevent further community spread.

- For those who test positive but are asymptomatic, “symptom onset” is day of positive test result.
- Re-testing of confirmed positive cases within 90 days of initial infection is not recommended.

Contact Tracing Terminology

- Positive Case:
 - An individual with a confirmed positive lab test through an FDA approved testing site. Individuals can have associated symptoms or be asymptomatic.
- Presumptive Case:
 - An individual with known close contact to a confirmed positive case within the past 14 days PLUS at least two acute illness symptoms* AND no more likely diagnosis
- Isolation:
 - Staying at home, in a specific room, away from other people and pets. Using a separate bathroom is possible. This is the recommendation for all positive or presumptive cases.
- Self-Quarantine:
 - Staying at home, or in a designated separated space, monitoring self daily for signs and symptoms related to COVID19, and maintaining a distance ≥ 6 feet from others at all times.



COVID-19 Case Reporting

Routes in which we Receive Reports of Positive or Suspect Cases:

- Self Reporting

By Phone:

- During business hours: 503-846-8123

- 24/7 Access: 503-846-3594

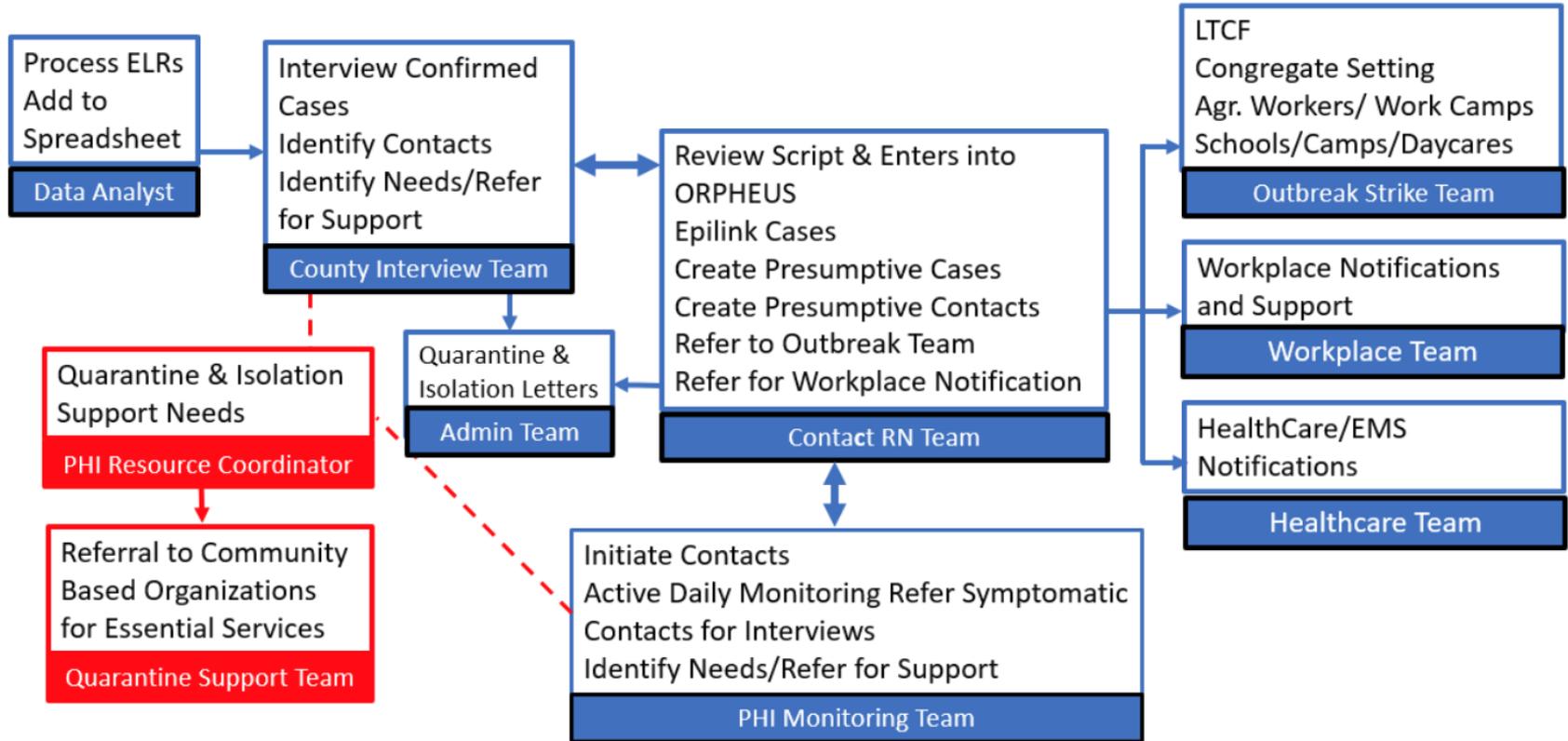
Email: HHSPublicHealth_DCAP@co.washington.or.us

- Lab Report:

Public Health receives reports from medical offices and labs. This is a state mandated reportable disease.

- Cases Identified Through Contact Tracing

Work Flow For Covid-19 Contact Tracing





Shelter COVID-19 Reporting Form

WCHD Lead:				State EPI:			
Date:		Time: <input type="checkbox"/> am <input type="checkbox"/> pm		Taken By:			
Name of Caller:				Position:			
Facility Name:				Facility Fax #:			
Facility Address:							
Point of Contact:				Position:			
Email Address:				Phone #:			
First Onset of Illness:		Date:		Time: <input type="checkbox"/> am <input type="checkbox"/> pm		Duration: (hrs)	
Resident information:							
# of ill residents:			# of ill residents tested and or pending				
Total # of residents in facility:			Total # residents on affected wing/floor				
Are ill residents isolated to room/private area? <input type="checkbox"/> Y <input type="checkbox"/> N			Last date of gatherings/group activities				
Description of gathering:							
Name of ill Residents * Note Clinical Symptoms and Pre-Existing Conditions/Risk Factors							
Name	DOB	Location in facility	Hospital ized	COVID Testing	Positive Lab	Symptom Onset	Last Day @ facility
			<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N		
			<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N		
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			<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N		
Staff Information							
# of ill Staff:			Total # of Staff at facility:				
Ill Staff excluded from work? <input type="checkbox"/> Y <input type="checkbox"/> N (Recommendation: 72 hrs, no sx)							
Do you use agency or volunteer staff? <input type="checkbox"/> Y <input type="checkbox"/> N			Does staff float/work at other shelters or facilities? <input type="checkbox"/> Y <input type="checkbox"/> N				
Name of Ill Staff * Note Clinical Symptoms and Pre-Existing Conditions/ Risk Factors							
Name	DOB	Area Worked	Hospital ized	COVID Testing	Positive Lab	Symptom Onset	Last Day Worked
			<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N		
			<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N		





**CONGREGATE SHELTER AND DAY CENTER
COVID-19 RESPONSE TOOLKIT**

April 14, 2020

Close Contacts Case Log

AutoSave On Shelters Outbreak Master Spreadsheet.xlsx - Saved Kelsey Streeter KS

File Home Insert Page Layout Formulas Data Review View Help Search

Clipboard Font Alignment Number Styles Cells Editing

Calibri 11

Normal Bad Good Neutral Calculation

Check Cell Explanatory... Input Linked Cell Note

AutoSum Fill Clear Sort & Find & Filter Select

A8

	A	B	C	D	E	F	G	H	I	J	K
1	Staff or Shelter resident with exposure to Covid positive person	Date of Birth	Sex	Phone number	Email	Location in shelter (if applicable)	Date of last exposure	Currently Symptomatic? (Y/N)	Symptoms	Covid test?	Other notes/ information
2	(Name)	mm/dd/yyyy	M/F	(999) 999-9999	(Email)	Location in shelter (if applicable)	mm/dd/yyyy	Y/N	ex) cough, fever, sore throat	positive, negative, pending, not tested	Other notes/ information
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COVID -19 Resources

Click here to connect with County website resources for
COVID related community resources
Testing sites in Washington County
Contact Tracing information

Click here to connect to Oregon Health Authority

Click here to connect to Centers for Diseases Control and Prevention

Click Here to connect to CDC Contact Tracing infographic

Click Here to connect to OHA Investigative Guidelines



Questions?