

Sonoma County COVID-19 Response Transition Plan

Executive Summary

Purpose: Define when and how the County’s COVID-19 response operations transition while sustaining necessary and equitable long-term pandemic-related response and recovery activities across the County.

	Phase 1: Transition Preparations Now December 31, 2021	Phase 2: Begin Transition Implementation January 1 March 31, 2022	Phase 3: Consolidation April 1 June 31, 2022	Phase 4: Standard Operations/Recovery July 1, 2022 Ongoing
Incident/Program Management:	<ul style="list-style-type: none"> Continue response management by COVID-19 Section Leadership team. Continue weekly team, management internal calls. Continue weekly and/or bi-weekly partner calls Medical Health Operational Area Coordinator (MHOAC, hospital, Skilled Nursing Facilities/Residential Care Facilities for the Elderly (SNF/RCFE calls). Provide COVID-19 update to BOS monthly. Switch to a bi-weekly Incident Action Plan (IAP) schedule. Continue with COVID grant management activities (quarterly reports, data submissions, budget/workplan modifications, grant close-out). Continue to pursue new funding opportunities. COVID-19 After-Action-Review (AAR) kick-off. 	<ul style="list-style-type: none"> Continue response management by COVID-19 Section Leadership team. Determine how to sustain management structure for COVID-19 Section within Public Health Division until no longer warranted. Continue weekly and/or bi-weekly partner calls (MHOAC, hospital, SNF/RCFE calls). Continue weekly team, management internal calls. Continue County-wide calls, subcommittee calls (except for Health Equity, Vaccination). Switch to a monthly IAP schedule. Continue with COVID grant management activities (quarterly reports, data submissions, budget/workplan modifications, grant close-out). Continue to pursue new funding opportunities. COVID-19 Update at BOS meeting monthly until County emergency declarations are rescinded. Continue AAR process implementation. 	<ul style="list-style-type: none"> Hire/train or repurpose COVID-19 management staffing for sustained operations. Continue weekly team, management internal calls. Transition to quarterly reporting schedule. Discontinue County-wide calls, subcommittee calls (except for Health Equity, Vaccination). Transition COVID grant management activities (quarterly reports, data submissions, budget/workplan modifications, grant close-out) to permanent staffing. Continue to pursue new funding opportunities. Complete AAR process and develops final report. 	<ul style="list-style-type: none"> Permanent staffing situated within Public Health Division. Cease monthly reporting schedule. Continue grant management activities. Continue to pursue new funding opportunities. Implement and track AAR/Improvement Plan items (Public Health Preparedness (PHP)). Revise Pandemic Influenza and Infectious Disease Emergency Response departmental plans based on lessons learned from COVID response (PHP).
Metrics	<p>Current:</p> <ul style="list-style-type: none"> Case Rate: 10.1 new cases/100,000/day Test Positivity: Overall 2.6% HPI 1 2.9% Hospitalizations: slightly increasing, without staffing or equipment shortages/delays? 69.1% total pop vaccinated HPI 1 fully vaccinated 74% HPI 4 80% (<10% difference) 65+ boosters 42% 6% difference 65+ boosters between HP1 1 and 4 <p>Healthy Places Index (HPI)</p>	At this time: DHS is forecasting suggest increasing cases, hospitalizations, deaths will be likely during this phase. County will monitor data in these areas across vulnerable populations and race/ethnicities to identify trends and disparities. During this period, 0-4 y likely to become vaccine eligible	<ul style="list-style-type: none"> Case Rate ≤ 7 cases/100,000 population/day Test pos: Overall $\leq 5\%$ HPI 1 $\leq 5\%$ 75% total pop vaccinated < 10% difference vaccination rate between HPI 1 & HPI 4 $\geq 70\%$ 65y+ vaccinated (boosters) <10% difference in 65y+ booster vaccination rate between HP1 1 & HPI 4 Low and stable hospitalizations without staffing or equipment shortages/delays 	<ul style="list-style-type: none"> In order to maintain standard operations, the following metrics must be met: Case Rate ≤ 7 cases/100,000 population/day Test pos: Overall $\leq 5\%$ HPI 1 $\leq 5\%$ 80% total pop vaccinated < 10% difference in vaccination rate between HPI 1 & HPI 4 80% 65y+ vaccinated (boosters) $\leq 10\%$ difference 65y+ boosters vaccination rate between HPI 1 & 4 Low and stable hospitalizations without staffing or equipment shortages/delays Monitor data for significant case increases/health impacts in medically and socially vulnerable populations (i.e., SNF/RCFE, homeless, 65y+, racial/ethnic groups, high risk occupations)
Conditions	<ul style="list-style-type: none"> In order to transition from Phase 1 to Phase 2, the following conditions must be met: <ul style="list-style-type: none"> Disease transmission is stable and manageable and meet health equity markers of health as described by the metrics above. 	<ul style="list-style-type: none"> Transition Phase 2 to Phase 3: <ul style="list-style-type: none"> Disease transmission is stable and manageable and meet health equity markers of health as described by the metrics above. 	<ul style="list-style-type: none"> Transition Phase 3 to Phase 4: <ul style="list-style-type: none"> Disease transmission is stable and manageable and meet health equity markers of health as described by the metrics above. 	

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	<ul style="list-style-type: none"> County COVID-19 Transition Framework approved. County on track to achieve vaccination goals. County postured to administer COVID booster and other vaccines. Permanent housing arrangements found for those lodged in County COVID Non-Congregate Sheltering (NCS) sites. 	<ul style="list-style-type: none"> NCS programs at Fairgrounds transitioned over to CDC. County on track to achieve vaccination goals. Warehouse demobilized. Funding sources to support permanent staffing are identified. 	<ul style="list-style-type: none"> County on track or has achieved vaccination goals. Funding sources to support permanent staffing are identified and in effect until no longer warranted. Governor terminates CA Declaration of State of Emergency. Terminate County Proclamation of State of Emergency and Declaration of Public Health Emergency. 	
Communications:	<ul style="list-style-type: none"> Continue bi-weekly communications coordination call. Continue with weekly community meetings to communicate changes to programs. Continue press conferences on an as needed basis. Maintain COVID PIO staffing. Continue to disseminate weekly COVID-19 Key Messages. Continue COVID-19 web site updates. 	<ul style="list-style-type: none"> Assess DHS needs for PIO services for direct COVID-19 Response. 	<ul style="list-style-type: none"> Begin demobilization of County COVID Communications Team. 	
Logistics:	<ul style="list-style-type: none"> Maintain logistics team staffing. Maintain warehouse staffing. Continue to fill Resource Requests (RRs) from partners (test kits, prevention kits, flyers, personal protective equipment (PPE), vaccine supplies, etc.). Identify end date to RR fulfillment except for vaccine supplies. Communicate RR fulfillment end date to partner organizations. Continue to demobilize RSS warehouse supplies. 	<ul style="list-style-type: none"> Maintain logistics team staffing. Maintain warehouse staffing through 3/31. Final PPE push to requesting facilities/programs. Continue to fill RRs from partners (test kits, prevention kits, flyers, PPE, vaccine supplies, etc.). Notify warehouse contractor (FS Global) of contract termination by 3/01/2022. Complete demobilization of warehouse supplies at RSS (lease ends April 31st). Transfer of leftover supplies to alternative warehouse (if needed). 	<ul style="list-style-type: none"> Reduce logistics team staffing. Record reconciliation and close-out. Continue logistical support for vaccine program needs. (fixed clinic sites and mobile van). 	<ul style="list-style-type: none"> Logistics team demobilized. Utilize regular departmental processes for purchasing/procurement. Utilize warehouse space currently rented by department for any leftover supplies that might be needed for disaster preparedness (PHP/EMS warehouse, etc.).
Finance:	<ul style="list-style-type: none"> Continue to verify that all costs associated with the COVID-19 incident meet all applicable policies and regulations including those required for FEMA reimbursement. Submit, update and monitor FEMA Public Assistance and Coronavirus Relief Fund grants. Track and submit required documentation and monitor receipt of federal reimbursement and grant funds. Continue to verify that all purchased items were received and properly disbursed. Assist logistics with purchasing. RR review for accuracy. 	<ul style="list-style-type: none"> Continue to verify that all costs associated with the COVID-19 incident meet all applicable policies and regulations including those required for FEMA reimbursement. Submit, update and monitor FEMA Public Assistance and Coronavirus Relief Fund grants. Track and submit required documentation and monitor receipt of federal reimbursement and grant funds. Continue to verify that all purchased items were received and properly disbursed. Assist logistics with purchasing. RR review for accuracy. 	<ul style="list-style-type: none"> Continue to verify that all costs associated with the COVID-19 incident meet all applicable policies and regulations including those required for FEMA reimbursement. Submit, update and monitor FEMA Public Assistance and Coronavirus Relief Fund grants. Track and submit required documentation and monitor receipt of federal reimbursement and grant funds. Continue to verify that all purchased items were received and properly disbursed. Assist logistics with purchasing. RR review for accuracy. 	<ul style="list-style-type: none"> Implement cost recovery activities. Compliance with required audits. Perform fiscal grant management including monthly burn rates and all monthly/quarterly fiscal reports.

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	<ul style="list-style-type: none"> Maintain financial records for accounting and reimbursement purposes. Perform fiscal grant management including monthly burn rates and all monthly/quarterly fiscal reports. Project response and recovery costs for 2022. 	<ul style="list-style-type: none"> Maintain financial records for accounting and reimbursement purposes. Perform fiscal grant management including monthly burn rates and all monthly/quarterly fiscal reports. 	<ul style="list-style-type: none"> Maintain financial records for accounting and reimbursement purposes. Perform fiscal grant management including monthly burn rates and all monthly/quarterly fiscal reports. Hire additional staff to assist with cost recovery, preparation for audits. 	
Alternate Care Site/Non-Congregate Sheltering Program	<ul style="list-style-type: none"> Maintain (Alternate Care Shelters (ACS)/NCS staffing. Stop referrals to NCS sites (except for trailers) by 11/01 in preparation for NCS site closures and transition of some programs (trailers at Fairgrounds (FGs) to CDC. Notify impacted ACS vendors of closure of sites and contract termination by 12/1/2021. Conduct final walk through/inspection of sites closing as of 12/31/21. Ensure completion of repair work for damages at Best Western (BW) and Holiday Inn. Schedule vendor to conduct final deep cleaning/disinfection of sites. Move equipment/supplies to DHS warehouse for ACS. Close BW ACS site. 	<ul style="list-style-type: none"> Maintain ACS/NCS staffing through 3/31/2022. Notify impacted ACS/NCS vendors of closure of sites and contract termination by 3/1/2022. ACS/NCS contract close-out. Conduct final walk through/inspection of sites. Schedule vendor to conduct final deep cleaning/disinfection of sites. Transfer administrative responsibility of trailer sites to CDC. Move equipment/supplies to DHS warehouse. Find permanent housing for NCS clients (in collaboration with IMDT) housed at the Holiday Inn and Astro hotels in preparation for closure of sites. Develop transition plan for trailers at fairgrounds in collaboration with CDC. Close Astro Hotel NCS site. Close Holiday Inn Windsor NCS site. Ensure pending invoices are closed out. Ensure inspection, cleaning, and handover of sites back to owners is complete. Identify potential funding sources and locations that could be used for COVID-19 individuals to safely isolate for COVID case management purposes. Maintain hotel isolation and support rooms for public, migrants and high risk homeless, as funding is available. 	<ul style="list-style-type: none"> ACS/NCS team demobilized. Continue to identify potential funding sources and locations that could be used for COVID-19 individuals to safely isolate for COVID case management purposes. Maintain hotel isolation and support rooms for public, migrants and high risk homeless, as funding is available. 	<ul style="list-style-type: none"> Implement new plan (hotel/food vouchers, home isolation support or other programs) to assist with safe isolation practices for marginalized populations.
Hotline:	<ul style="list-style-type: none"> Provide guidance to the public on testing and vaccine services. Provide access to internet-based services, specifically testing and vaccination appointments for those who lack access to the internet. Guide organizations through state and local regulations, health orders, and resources. Provide test results when available via the County of Sonoma laboratory 	<ul style="list-style-type: none"> Provide guidance to the public on testing and vaccine services. Provide access to internet-based services, specifically testing and vaccination appointments for those who lack access to the internet. Guide organizations through state and local regulations, health orders, and resources. Provide test results when available via the County of Sonoma laboratory 	<ul style="list-style-type: none"> Inform public of hotline demobilization date. Provide referral number (211) for community members to call to obtain information on resources available for COVID-19. Demobilize hotline staff. 	<ul style="list-style-type: none"> Provide information on COVID resources via SoCo web pages. Provide referral information to call 211 or other community resource referral numbers.

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	<ul style="list-style-type: none"> Direct households impacted by Covid-19 to resources, specifically; financial assistance, legal assistance, housing, and rent payment support, food, and alternative care sites for those who do not have a place to isolate themselves safely during a Covid-19 infection. Continue operating Spanish hotline. 	<ul style="list-style-type: none"> Direct households impacted by Covid-19 to resources, specifically; financial assistance, legal assistance, housing, and rent payment support, food, and alternative care sites for those who do not have a place to isolate themselves safely during a Covid-19 infection. Continue operating Spanish hotline. Identify hotline operations end date. Work with Communications Team to provide resources and referral information on contacting 211 on SoCo website. 		
Public Health Lab Support:	<ul style="list-style-type: none"> Maintain COVID staffing support for Public Health Laboratory (PHL). Obtain approval and begin process to hire PHL Deputy Director. 	<ul style="list-style-type: none"> Maintain COVID staffing support for PHL. 	<ul style="list-style-type: none"> Maintain COVID staffing support for PHL. 	
Case Investigations/Contact Tracing:	<ul style="list-style-type: none"> Maintain mission critical response operations and ensure timely case, outbreak, and contact tracing investigations. Assure that hot spot risks are minimized in vulnerable places, such as SNFs, jails, unhoused. Assure that schools, workplaces and other essential places have established preventative measures. Continue incremental demobilization of temp staff to align with average case volumes. 	<ul style="list-style-type: none"> Maintain mission critical response operations and ensure timely case, outbreak, and contact tracing investigations. Assure that hot spot risks are minimized in vulnerable places, such as SNFs, jails, unhoused. Assure that schools, workplaces and other essential places have established preventative measures. Continue incremental demobilization of temp staff to align with average case volumes. Disband topical teams and have them assume all responsibilities for outbreak containment, case investigation, and contact tracing and divide some to support field/testing work 	<ul style="list-style-type: none"> Maintain mission critical response operations and ensure timely case, outbreak, and contact tracing investigations. Assure that hot spot risks are minimized in vulnerable places, such as SNFs, jails, unhoused. Assure that schools, workplaces and other essential places have established preventative measures. Continue incremental demobilization of temp staff to align with average case volumes. Topical teams disbanded. 	<ul style="list-style-type: none"> Embed team of COVID CI/CT in Disease Control and reassess the need to maintain the team annually. Develop a training program to teach employees and volunteers how to conduct effective contact tracing. Closely monitor key disease transmission and preparedness indicators.
Testing:	<ul style="list-style-type: none"> Continue support to state testing sites (LHI/Optum Serve) until end of state contract. Continue support to private testing (Curative, Molecular Matrix and Fox Home Health). County field services team continues outbreak and surveillance testing. 	<ul style="list-style-type: none"> Continue support to state testing sites (LHI/Optum Serve) until end of state contract. Continue support to private testing (Curative, Molecular Matrix and Fox Home Health). County field services team continues outbreak and surveillance testing. 	<ul style="list-style-type: none"> Continue support to state testing sites (LHI/Optum Serve) until end of state contract. Continue support to private testing (Curative, Molecular Matrix and Fox Home Health). County field services team continues outbreak and surveillance testing. 	<ul style="list-style-type: none"> Demobilize field services team.
Field Outreach & Education:	<ul style="list-style-type: none"> Provide flyers, prevention kits, and outreach/education at vaccine/testing sites. Provide gift cards to unhoused populations at vaccine/testing sites. Assess and implement outreach strategies in areas/populations with low vaccine rates, Support CURA and Raizes Collective to continue outreach, education, emergency financial assistance, and case management. 	<ul style="list-style-type: none"> Provide flyers, prevention kits, and outreach/education at vaccine/testing sites. Provide gift cards to unhoused populations at vaccine/testing sites. Assess and implement outreach strategies in areas/populations with low vaccine rates, Train community health workers (CHWs) on COVID outreach/education via the Community Health Workers for COVID Response and Resilient Communities (CCR) program. 	<ul style="list-style-type: none"> Provide flyers, prevention kits, and outreach/education at vaccine/testing sites. Phase out gift card program. Assess and implement outreach strategies in areas/populations with low vaccine rates. Continue to train cadre of CHWs on COVID outreach/education via the Community Health Workers for COVID Response and Resilient Communities (CCR) program. 	<ul style="list-style-type: none"> Sector activities integrated into Community Health Workers for COVID Response and Resilient Communities (CCR) program and existing departments, where appropriate Continue CHW focused work through additional contracts and grant funding

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		<ul style="list-style-type: none"> Continues SOW of the CURA Contract and Raizes Collective. 		
Vaccine Mission:	<ul style="list-style-type: none"> Increase mobile/pop-up vaccine clinics with vaccine providers and CBOs Plan and execute operating procedures for the Mobile Vaccine Team (MVT) to support prioritized populations/communities Continue to operate fixed sites in collaboration with partners (Fox Home Health, Optum Serve, etc.) Provision of flu and Tdap vaccines in tandem with COVID vaccine clinics. Continue vaccinations of homebound patients in collaboration with Fox Home Health and the Partnerships Health Plan of California (PHP) Increase school vaccine clinics. Plan and support partners to implement a pediatric vaccine program. Support partners to implement booster shot programs. Supply Federally Qualified Health Centers(FQHCs) with free state nurse staffing. 	<ul style="list-style-type: none"> Continue planning pop-up vaccine clinics. Standardize the MVT's operating procedures. Operate the LHI/Optum Serve Rohnert Park fixed site until contract termination on 03/31/2022; continue vaccine operations at the Roseland fixed site w/ Fox Home Health. Continue providing vaccines to homebound patients in collaboration with Fox Home Health and PHP. Continue the planning of school clinics for pediatric and adolescent patients. Utilize the planning process for school clinics to solidify a pediatric vaccine program in Phases 3 and 4. Support partners to implement booster shot programs. Supply FQHCs with free state nurse staffing until 01/31/2022. Downscale funding for admin staffing from Judy Walker to \$10,000/month on 03/31/2022. 	<ul style="list-style-type: none"> Decrease capacity to plan pop-up vaccine clinics. Transition MVT operations into the COVID-19 Unit/disease management. MVT clinics to be planned on a case-by-case basis. Transition/Demobilize vaccine operations at the Roseland fixed site w/ Fox Home Health Refer remaining homebound patients to Fox Home Health for vaccinations Continue planning school clinics and finalize the operating procedures/processes for a pediatric vaccine program Create a planning and operations document for future pandemic responses; formalize a training program for future management and staff 	<ul style="list-style-type: none"> Demobilize the Vaccines Team and MVT; limited capacity to plan pop-up vaccine clinics MVT operations folded into the COVID-19 Unit/disease management Refer remaining patient populations (i.e. unstably housed, homebound, pediatrics) to the COVID-19 Unit Train new COVID-19 management staff with the finalized training program and planning/operations document. Also turn over state/federal reporting to this staff.