

Novel Coronavirus (COVID-19)

Los Angeles County Department of Public Health Guidance for

Group Homes, Foster Family Agencies, Temporary Youth Shelter Facilities and Short-term Residential \Therapeutic Programs

The Los Angeles County Department of Public Health (DPH) is asking for your assistance to slow the spread of the novel (new) coronavirus disease 2019 (abbreviated COVID-19) in Los Angeles County. Group homes, foster homes, temporary youth shelter care facilities and short-term therapeutic programs have a particular need for careful attention to prevent spread given that:

- Children may move among sites and between home and sites;
- Sites cannot avoid all interaction of staff and children with outside visitors; and
- Assuring compliance of children, especially younger children, poses unique challenges.

WHAT THIS DOCUMENT COVERS

As a basic, first step in response to the COVID-19 outbreak, we strongly recommend that all group homes, foster family agencies (FFAs), temporary shelter care facilities (TSCFs) and Short-Term Residential Therapeutic Programs (STRTPs) review and update emergency plans and consider ways to continue essential services if onsite operations must be reduced temporarily.

This document provides general information about COVID-19, and identifies specific actions beyond that basic, first step that will help slow the spread of respiratory infections, including COVID-19.

The goals of this document are to help group homes, FFAs, TSCFs, and STRTPs develop strategies to:

- Prevent and reduce the spread of COVID-19 within your facility.
- Prevent and reduce the spread of COVID-19 between and outside of facilities.

Note that this document applies only to the types of facilities named in the title and not to resource families. Instead, resource families should refer to the [Guidance for Individuals and Households](#) on the [DPH COVID-19 website](#).

Table of Contents	Page #
General information	2
Steps to Protect the Health and Safety of Children, Youth and Staff	
1. Limit visitors; assure visibility of guidance	3
2. Screening children and youth for symptoms of COVID-19	3
3. Take steps to reduce risk of infection	4
4. When children and youth are infected	6
5. When staff are infected	7
6. Dealing with exposure	8
7. Returning to work	9
8. Reporting requirements	9
9. Guidelines for use of personal protective equipment (PPE)	9
10. Best practices for sanitation and housekeeping	10
Prevent and Reduce Spread of COVID-19 Between Facilities	11
Additional Resources	11

Novel Coronavirus (COVID-19)

Los Angeles County Department of Public Health Guidance for

Group Homes, Foster Family Agencies, Temporary Youth Shelter Facilities and
Short-term Residential \Therapeutic Programs

General Information

What is novel coronavirus?

COVID-19 is caused by a virus that has never been seen in humans before. In some ways it is like other viruses we have seen, but there are important factors that set it apart:

- Since it has never infected humans before, none of us are immune to it;
- It can be spread from person to person more easily than some other viruses;
- It can be spread by someone who doesn't have any symptoms and has no idea they are infected;
- While it causes mild or moderate symptoms in most people, it can be very serious and even fatal for people in high-risk groups.

High-risk groups

High-risk groups for COVID-19 include people over age 65, people with chronic conditions, including those that affect heart, lungs or kidneys, people who have weakened immune systems due to disease, chemotherapy or other medical treatments or conditions and people who are pregnant.

What are common symptoms of COVID-19?

People with COVID-19 have had a wide range of symptoms ranging from mild symptoms to severe illness.

Symptoms of COVID-19 may include some combination of the following:

- Fever (100.4 F or higher)
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Chills
- Congestion or runny nose
- Muscle or body aches
- Headache
- Sore throat
- Nausea or Vomiting
- Diarrhea
- New loss of taste or smell

This list of symptoms is not all inclusive. Providers or staff should consult a medical provider about the need for testing and isolation for these or any other symptoms that are severe or concerning.

If a child or youth (client) or staff member develops fever, cough, or shortness of breath, or a health care provider concludes they are likely to have COVID-19, they should stay in isolation for at least 10 days from when symptoms first appeared AND at least 24 hours after recovery. "Recovery" means that fever has gone without the use of medications and symptoms (such as cough and shortness of breath) have improved.

Seek immediate medical attention for a child or staff member by calling 911 for any of these COVID-19 emergency warning signs:

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion or inability to arouse
- Bluish lips or face

When calling 911, notify the operator that the individual who is sick might have COVID-19. The person you are calling about should be placed in a setting apart from other people and should be given a cloth face covering

Novel Coronavirus (COVID-19)

Los Angeles County Department of Public Health Guidance for

Group Homes, Foster Family Agencies, Temporary Youth Shelter Facilities and Short-term Residential \Therapeutic Programs

to wear before medical help arrives. Anyone who is assisting that child or adult should have appropriate personal protective equipment (see Section 8) while waiting for emergency personnel to arrive.

How is COVID-19 spread?

Like other respiratory illnesses, such as influenza, human coronaviruses are most commonly spread to others by an infected person who has symptoms. Spread occurs through:

- Droplets produced when an infected person coughs or sneezes. Singing and talking can also produce droplets.
- Close personal contact, such as caring for an infected person.
- Touching an object or surface with the virus on it, then touching mouth, nose, or eyes before hand washing.

COVID-19 is new and we continue to refine our understanding of how it spreads and how long it takes for people to become sick. As information changes, we will keep you informed. We encourage you to visit the [DPH Coronavirus webpage](#) for resources, including a variety of documents providing an overview of COVID-19 prevention and care, [Frequently Asked Questions for Workplace Managers](#) and [Guidance for Care of Children with Symptoms of COVID-19](#). Additional resources are noted through this document where relevant.

Steps to Protect the Health and Safety of Children, Youth and Staff

Prevent and Reduce Spread of COVID-19 Within Your Shelter

1. Limit visitors; assure visibility of guidance	<ul style="list-style-type: none">• Restrict entry into the site. Only children and youth, essential staff and other essential personnel should be going in and out of the facility.• Require anyone seeking entry to wear a cloth face covering. Only children under 2 or individuals with chronic conditions that make a face covering unsafe may enter without a cloth face covering.<ul style="list-style-type: none">– Individuals over the age of 2 who cannot wear a cloth face covering may enter wearing a plastic face shield with a cloth barrier tucked in below the shield.• Post a copy of this guidance near the entry to your place of business or home. If site is a place of business, post additional copies in or near a main office (if there is one) and in or near any room used by staff for breaks or meals.• Provide training for all staff (including volunteers, part-time staff and/or consultants working on site) concerning hand washing/use of sanitizer, need for cloth face coverings, and site policies related to the guidelines that follow.
2. Screen children and youth for symptoms of COVID-19	<ul style="list-style-type: none">• Assess all children/youth at admission and at least once per day for symptoms of acute respiratory illness. These may include feeling feverish, a new cough, or difficulty breathing. Remind children and youth to report any new respiratory symptoms to staff.• If feasible, take temperatures with a scanning or disposable thermometer at admission and at least once per day. A temperature of 100.4 °F or higher is

Novel Coronavirus (COVID-19)

Los Angeles County Department of Public Health Guidance for Group Homes, Foster Family Agencies, Short-term Residential Therapeutic Programs

	<p>considered a fever for screening purposes. Contact the health care provider for any fever in a child less than one month of age.</p> <ul style="list-style-type: none">Given the current outbreak, any child or youth with symptoms of respiratory illness should be presumed to have COVID-19. It is not necessary for the child/youth to have had laboratory testing to confirm diagnosis in most cases. <p>Any child or youth with symptoms of COVID-19 or a positive test result at entry is required to be cared for in isolation for at least 10 days plus 24 hours following recovery. Guidelines for isolation are described below, under the heading “When children or youth are infected.”</p> <ul style="list-style-type: none">As part of screening, ask child, youth or caretaker if the child has had close contact with an infected person.<ul style="list-style-type: none">Close contact is defined as contact within 6 feet of an infected person (a person with symptoms of COVID-19 or positive COVID-19 test result) for 15 minutes or more.Anyone who had contact with body fluids and/or secretions of an infected person (they were coughed on/sneezed on, shared utensils or saliva) or provided direct clinical care to an infected person without wearing a surgical mask or gloves, also needs to be in quarantine.The contact may have occurred at any time from 2 days before the infected person was symptomatic OR had a positive test, up to the point at which the infected person is considered well enough to end their isolation period. <p>Any child or youth who meets criteria for close contact is required to quarantine for 14 days. Guidelines for quarantine are described below, under the heading “When children or youth are infected...”</p>
3. Take steps to reduce risk of infection	<p>Hygiene</p> <ul style="list-style-type: none">Instruct all staff on the importance of infection control and use of face coverings.Educate children and youth about the need for frequent handwashing and other preventive practices at admission.Post age appropriate signs reminding children and youth of the need for frequent handwashing, especially before and after meals, before and after toileting, and after sneezing, coughing or nose blowing.Make it easy for staff and children and youth to practice good hand hygiene. Make sure bathrooms are well stocked with soap and disposable towels.Post reminders in all bathrooms to wash hands with soap and water for at least 20 seconds and to dry hands on a single-use or personal towel.In any areas where handwashing is not feasible, staff and older children should use hand sanitizer containing at least 60% alcohol. Note, however, cautions about use

Novel Coronavirus (COVID-19)

Los Angeles County Department of Public Health Guidance for Group Homes, Foster Family Agencies, Short-term Residential Therapeutic Programs

of hand sanitizer by young children without direct adult supervision. (See <https://www.cdc.gov/handwashing/hand-sanitizer-use.html>.)

- More Hand Sanitizer Safety Tips:
 - Keep all hand sanitizers out of the reach of children and supervise their use.
 - Seek immediate medical attention if children or youth have swallowed hand sanitizer or are experiencing symptoms after repeated use of these products and contact your poison center (1-800-222-1222) for advice.
 - Also note that some hand sanitizers have been found to contain methanol (wood alcohol). Methanol can cause serious health problems such as blindness, and even death. For the latest information, check the FDA's [Methanol Contaminated Products List](#). If your product is on this list, stop using it immediately.
 - Signs and symptoms of methanol poisoning include headache, blurred vision or blindness, nausea, vomiting, abdominal pain, loss of coordination, and decreased alertness.
- Make tissues available, and remind staff and children cover coughs and sneezes with a tissue, and then dispose of the tissue and clean hands immediately. If tissues are not available, they should sneeze or cough into an elbow, rather than a hand.
- Minimize the sharing of objects such as toys, games, clothes, cups, utensils, food, and drink.

Physical distancing

- When possible children, youth and staff need to stay at least 6 feet away from anyone else.
- Re-arrange common areas to avoid having more than 10 seats in an enclosed space and so seats are at least 6 feet apart and facing away from one another.
- Beds and cribs for children should be placed at least 6 feet apart, when possible, and positioned head-to-toe, with heads positioned as far apart as possible (see [Guidance on Bed Positioning](#)).
- Avoid close contact between individuals at meals.
 - Eliminate any large group meals. Stagger meals if necessary so groups can be kept small.
 - If feasible and weather permits, serve meals outdoors in areas that allow for physical distancing.
 - Serve the same group of children and youth together at each meal to reduce transmission risk.
- Limit any in-person group activities that may be offered at your site. One-to-one interactions between staff and children/ youth should be kept to a minimum and arranged so preventive guidelines (distance of 6 feet, no physical contact (such as hugs, no sharing of objects, etc.) can be followed whenever possible.

Novel Coronavirus (COVID-19)

Los Angeles County Department of Public Health Guidance for Group Homes, Foster Family Agencies, Short-term Residential Therapeutic Programs

4. When children or youth are infected...

Separate children/youth with COVID-19 (based on symptoms and/or test result) from other children

- Individuals with symptoms or a positive test result need to be isolated from others to avoid spread and allow for appropriate care of the symptomatic person. This is true whether or not they have been tested for COVID-19.

Rapidly move children/youth who present with fever and/or respiratory symptoms into a separate sick area that is isolated from the rest of the facility

- Ideally, it should be a separate building, room, or designated area, away from non-symptomatic children/youth. A separate bathroom is also optimal.
- Place clear signage outside whatever area(s) you designate for isolation, so staff, other children/youth know to maintain distance from those areas.
- If there is no way for infected children/youth to reside in separate rooms or buildings, partitions (e.g., linens, dressers, etc.) should be constructed to create as much of a barrier as possible between symptomatic and non-symptomatic children/youth.
- A designated restroom should be identified and reserved for use by infected individuals only. If this is not possible, cleaning after the room has been used by a infected person is essential.
- If infected children/youth need to move through areas used by children/youth without symptoms, they should wear a surgical mask and minimize their time in these areas. Young children who are infected (symptomatic and/or with a positive test result) should be accompanied by adults when it is necessary for them to be outside the area designated for isolation.
- Infected children/youth should eat meals separately from uninfected children/youth.
- If dining space must be shared, stagger meals so infected children/youth are not eating with uninfected children/youth and clean after use by each group to reduce transmission risks.
 - Mobile screens (or other ways to form partitions – linens, etc.) can be used to permit isolation when separate meals are not feasible in shared spaces.
- Minimize the number of caregivers or staff members who have face-to-face interactions with children/youth who are known to be infected, provide instructions to all staff to prevent disease spread. Section 8, below, provides guidance on use of Personal Protective Equipment for staff who must have contact with an infected children/youth.
- Child/youth isolation may be discontinued when the following conditions are met:
 - At least 10 days has passed since symptoms first appeared AND at least 24 hours after “recovery,” defined as resolution of fever without the use of fever-reducing medications and improvement of symptoms (such as cough and shortness of breath).



Novel Coronavirus (COVID-19)

Los Angeles County Department of Public Health Guidance for Group Homes, Foster Family Agencies, Short-term Residential Therapeutic Programs

	<ul style="list-style-type: none">• If a child has a positive test result but is not symptomatic, the isolation period starts with the date of the test and continues for 10 days after. Caregivers or staff should keep a daily log of all children/youth in isolation to monitor symptoms and determine when criteria are met for ending the child's/youth's isolation.• If a child or youth who fits into a high-risk group (has a chronic condition, pregnant) is symptomatic or has had a positive test at admission or during a stay, call their primary care provider. If their symptoms worsen, notify a staff member to call 911. When calling 911, staff members should notify the dispatcher that this child/youth has COVID-19 symptoms. <p>Seek immediate medical attention by calling 911 for any of these COVID-19 emergency warning signs:</p> <ul style="list-style-type: none">• Trouble breathing• Persistent pain or pressure in the chest• New confusion or inability to arouse• Bluish lips or face <p>If possible, separate children/youth at high risk</p> <ul style="list-style-type: none">• If feasible, designate a separate area for non-infected, non-exposed children/youth who would be at high-risk if infected (chronic medical problem, pregnant). This is intended to protect the child/youth at high risk from infection. However, if separate areas are not possible, use partitions or other means to keep high risk children/youth separate from others.• This area should be separate from low-risk, non-symptomatic, non-symptomatic quarantine, and symptomatic or known COVID-19 positive children/youth.• Consider placing high-risk children/youth in separate rooms or shared rooms with a maximum of 10 beds even when there are no suspected or confirmed cases of COVID-19 at the site.
5. When staff are infected	<p>Infected Staff</p> <ul style="list-style-type: none">• Caregivers/staff should monitor their own health daily and stay home and self-isolate if sick. Staff should also be instructed to stay home if they have tested positive even if they do not have symptoms.• Staff arriving with or developing symptoms of COVID-19 should be instructed to go home to self-isolate. They should be reminded to call their health care provider should symptoms worsen.<ul style="list-style-type: none">– Information on self-isolation can be found on the DPH website at: http://publichealth.lacounty.gov/acd/ncorona2019/covidisolation/.• Infected staff caring for themselves at home may discontinue home isolation only when the following conditions are met:

Novel Coronavirus (COVID-19)

Los Angeles County Department of Public Health Guidance for Group Homes, Foster Family Agencies, Short-term Residential Therapeutic Programs

	<ul style="list-style-type: none">- At least 10 days have passed since symptoms first appeared AND at least 24 hours since “recovery,” defined as resolution of fever without the use of fever-reducing medications and improvement of symptoms (such as cough and shortness of breath).
6. Dealing with Exposure	<p>Separate children and youth exposed to COVID-19 from other children</p> <ul style="list-style-type: none">• Children/youth who do not screen positive for symptoms of COVID-19 (as described above) and have not had a positive test but have come in close contact with an infected person must be placed in quarantine for 14 days.<ul style="list-style-type: none">- If your site has capacity to provide the child/youth with shelter for 14 days, they may remain at your site. As in the case of infected children/youth, they should be kept apart from other children/youth.- If your site does not have capacity for self-quarantine, the procedure is the same as for an infected child/youth:<ul style="list-style-type: none">○ As in the case of an infected child/youth, if it is not feasible to find an alternative placement, the child/youth may remain on site but separated from other children/youth to the extent feasible. A distance of 6 feet must be kept between the exposed child/youth and others and they must be instructed on the need to wash hands frequently and avoid sharing of any objects.- Exposed children/youth who are sent elsewhere to quarantine or are in quarantine at your site, may only rejoin the general population at your site when the 14-day quarantine period is over.<ul style="list-style-type: none">○ If a child/youth begins to show symptoms during the quarantine period or tests positive, the guidelines for isolation described above apply. The child’s/youth’s isolation period must be counted from the start of symptoms or date of positive test if no symptoms rather than the start of their quarantine period. <p>Exposed staff</p> <ul style="list-style-type: none">• Staff who have come in close contact with an infected child/youth or anyone else must be sent home to quarantine or, if already residing onsite, and feasible, placed in onsite quarantine for 14 days.• The guidelines for staff quarantine are the same as those for children/youth (see, above). Guidance for home quarantine can be found at: http://publichealth.lacounty.gov/acd/ncorona2019/covidquarantine/.• However, in times of <u>extreme workforce shortage</u>, staff who have not developed symptoms and have not had a positive test who were exposed can continue to work PROVIDED they wear a surgical mask at all times while at work for 14 days.<ul style="list-style-type: none">- Non-symptomatic caregivers/staff who were exposed and continue to work should self-monitor for symptoms of COVID-19. They should self-monitor for



Novel Coronavirus (COVID-19)

Los Angeles County Department of Public Health Guidance for Group Homes, Foster Family Agencies, Short-term Residential Therapeutic Programs

	<p>symptoms twice daily, once before coming to work and the second, twelve hours later.</p>
<p>7. Returning to Work</p>	<p>Returning to Work after Isolation</p> <ul style="list-style-type: none"> • If a staff person is sent home, provide a mask, maximize external ventilation in the vehicle and give the person the DPH Guidelines for self-isolation. • A staff person who is sent home for isolation may return to the site after: <ul style="list-style-type: none"> – At least 10 days since symptoms first appeared AND at least 24 hours since “recovery,” defined as resolution of fever without the use of fever-reducing medications and improvement of symptoms (such as cough and shortness of breath). An example of what this means: <ul style="list-style-type: none"> ○ Staff person sent home with symptoms that were mild and only lasted a day, would still need to remain away from the site for the minimum 10 days from the start of symptoms.
<p>8. Reporting Requirements</p>	<p>When Should Cases Be Reported?</p> <ul style="list-style-type: none"> • If two or more children/youth or staff at the site become sick with acute respiratory illness within 72 hours, and to report a confirmed case of COVID-19, call the Department of Public Health Acute Communicable Disease Program at 213-240-7941 during daytime hours or 213-974-1234 (After Hours Emergency Operator). A Public Health Nurses (PHN) may visit the site to consult on additional measures for separation and to screen close contacts.
<p>9. Guidelines for Use of PPE</p>	<p>Personal Protective Equipment (PPE)</p> <ul style="list-style-type: none"> • Non-medical face coverings should be worn by staff and children/youth in all settings where other people are present. It is important to note that face coverings are not a substitute for always practicing physical distancing and frequent handwashing. Face coverings protect others from possible infection on the part of the wearer; they offer limited protection for the wearer. For guidance on use of face coverings, see Guidance for Cloth Face Coverings. • Infected individuals (children/youth or staff) should be given surgical face masks to wear whenever they are around other people. • Quarantined individuals (children/youth or staff who reside on-site or are working after exposure due to a staff shortage) should also be given surgical face masks to wear whenever they are around other people. • If there are circumstances in which staff provide direct clinical care to isolated or quarantined children/youth (delivering meals to bedside, administering medications, or performing a physical exam or procedures), they should put on a surgical mask, gloves, eye protection and gown. • Necessary PPE should be made available in clinical care areas for staff performing clinical duties.



Novel Coronavirus (COVID-19)

Los Angeles County Department of Public Health Guidance for Group Homes, Foster Family Agencies, Short-term Residential Therapeutic Programs

	<ul style="list-style-type: none"> • Ensure that all employees clean their hands, including before and after contact with children/youth, after contact with contaminated surfaces or equipment, and after removing PPE items. • Make sure tissues are available and all sinks are well-stocked with soap and paper towels for hand washing. Hand sanitizer should be available to staff and children/youth where soap and water washing is not feasible.
<p>10. Best Practices for Sanitation and Housekeeping</p>	<p>Cleaning Practices</p> <ul style="list-style-type: none"> • Routinely and effectively clean and disinfect all frequently touched hard surfaces and objects, such as doorknobs, bannisters, countertops, faucet handles, and phones. • Environmental cleaning should be done with EPA-registered healthcare disinfectant consistent with recommended wet contact time. <i>Reference: California Department of Public Health AFL for Environmental Infection Control for the Coronavirus Disease 2019 (COVID-19) (02/19/20)</i> <ul style="list-style-type: none"> – If EPA-registered disinfectant is not available, you may make your own disinfectant by mixing 1 tablespoon of 2% chlorine bleach solution in 1 quart of water. – Alcohol-based disinfectants may be used if > 60% alcohol and contact time is per label instructions. – Refer to precautions noted on page 5 of this document concerning risks associated with hand sanitizer for children. – Refer to Guidance on Cleaning in Group Settings at: http://www.publichealth.lacounty.gov/media/Coronavirus/docs/protection/GuidanceCleaning-English.pdf. <p>Supplies</p> <ul style="list-style-type: none"> • Provide adequate supplies for good hygiene, including easy access to clean and functional handwashing stations, soap, paper towels, and alcohol-based hand sanitizer (especially near food areas and restrooms). • Hand hygiene stations (sinks with antibacterial soap and alcohol gel products) should be readily available throughout the facility, especially at the entrances of the facility. • Make sure tissues are available and all sinks are well-stocked with soap and paper towels for hand washing. • Educate and remind children/youth to perform proper hand hygiene throughout the day, particularly after using the restroom and prior to eating their meals. • Position a trash can near the exit inside any child/youth rooms to make it easy for employees to discard items such as gloves, surgical masks, and gowns.



Novel Coronavirus (COVID-19)

Los Angeles County Department of Public Health Guidance for Group Homes, Foster Family Agencies, Short-term Residential Therapeutic Programs

NOTE: DPH Environmental Health Specialists can provide technical assistance to your site on sanitation and cleaning practices if needed. An Environmental Health Specialist can be requested by calling Environmental Health Program at (626) 430-5201.

Prevent and Reduce Spread of COVID-19 Between Facilities

Transportation

- Limit transport of all children/youth to essential purposes only. Non-essential transportation should be postponed or cancelled.
- When transportation of symptomatic children/youth is necessary:
 - Symptomatic children/youth should NOT be transported with non-symptomatic children/youth.
 - Have symptomatic children/youth wear surgical masks.
 - Avoid transporting multiple symptomatic children/youth together. When it is unavoidable and multiple children/youth need to be transported simultaneously, appropriate physical distancing (at least 6 feet) should be practiced both for children/youth and the driver. The children/youth should be placed on the opposite side of the car from the driver in the seat farthest away from the driver's seat.
 - If possible, vehicle windows should be rolled down to improve ventilation in the car.
 - Transporting vehicles should be outfitted with plastic tarps or coverings over the seats that can be cleaned and appropriately disinfected after each transport.
 - Include supplies for good hygiene, including tissues, trashcans or trash bags for disposal of used tissues, and alcohol-based hand sanitizer in vehicles used to transport children/youth.
 - If you plan to transfer the child/youth to higher level of care due to worsening respiratory status, notify EMS or other transporter that the child or youth has an undiagnosed respiratory infection.

Guidance for Drivers

- Drivers of symptomatic children/youth should take appropriate precautions, including wearing personal protective equipment, including mask, gloves, eye protection and gown.

Additional Resources

- LAC DPH coronavirus website: <http://www.ph.lacounty.gov/media/Coronavirus/>
- Los Angeles Health Alert Network: The Department of Public Health (DPH) emails priority communications to health care professionals through LAHAN. Topics include local or national disease outbreaks and emerging health risks. <http://publichealth.lacounty.gov/lahan/>
- [FAQ](#)
- [What You Should Know \(Infographic\)](#)
- [Mental Health](#)
- [Staying at Home If You Are Sick - Poster](#)

Novel Coronavirus (COVID-19)

Los Angeles County Department of Public Health Guidance for Group Homes, Foster Family Agencies, Short-term Residential Therapeutic Programs

- [Handwashing](#)
- [What to Do If I Am Exposed](#)

If you have questions and would like to speak to someone call the Los Angeles County Information line at 2-1-1 which is available 24 hours a day.

We appreciate your commitment and dedication to keeping Los Angeles County healthy.

