

• • • • Los Angeles County Department of Public Health (LAC DPH)

• • • • COVID-19 and Common Respiratory Viruses

• • • • Guidance for Community Congregate Settings

Summary of recent changes (January 6, 2025)

- Aligned COVID-19 isolation recommendations with those of general community settings.

COVID-19, flu, and respiratory syncytial virus (RSV) are common respiratory diseases that cause cough and cold symptoms. Respiratory illnesses spread more easily in congregate settings, which serve people who live in close quarters and share at least one standard room. Most people recover from these illnesses independently and without complications, but some are at [higher risk of getting very sick](#), especially in community congregate settings. This guidance outlines strategies and specific actions to help prevent and reduce the spread of respiratory infections in community congregate settings, including correctional and detention facilities, sites serving people experiencing homelessness (PEH), and community care facilities (CCFs).

Community congregate settings must also follow any applicable Cal/OSHA regulations, such as [Cal/OSHA Aerosol Transmissible Diseases \(ATD\) Standard](#). Healthcare settings within these facilities must also follow local requirements or guidelines highlighted in [Infection Prevention Guidance for Healthcare Personnel](#). Facilities licensed by the Community Care Licensing Division (CCLD) should review the California Department of Social Services (CDSS) [Provider Information Notices \(PINs\)](#) for all licensing requirements. For CCFs, where differences exist between the most current PINs, Cal/OSHA, CDPH, and LA County, CCFs are to follow the most protective guidance and requirements.

Visit DPH's [respiratory viruses](#) webpage for resources and the latest recommendations. If you have questions, contact the Community Outbreak Team at communityoutbreak@ph.lacounty.gov or call the LA County Information Line at 2-1-1, available 24 hours a day. We appreciate your efforts to keep Los Angeles County healthy.

LAC DPH Respiratory Virus Reporting Requirements

In Los Angeles County, all settings must report clusters of COVID-19 and other Acute Respiratory Illnesses (ARI) to the LA County Department of Public Health (LAC DPH) as mandated by the [LA County Health Officer Order](#).

See the LAC DPH COVID-19 & Acute Respiratory Illness (ARI) Cluster Reporting Instructions for detailed requirements. For assistance, contact communityoutbreak@ph.lacounty.gov.

Best Practices for Respiratory Illness Prevention and Response

Immunizations

Immunizations are the best way to protect against serious illness and death caused by [COVID-19](#), [flu](#), and [RSV](#). Continue to offer vaccinations onsite and strongly encourage individuals to stay up to date with their vaccinations as recommended.

Complete the LAC DPH [Mobile Vaccine Team interest form](#) to request assistance with onsite vaccination.

A client's vaccination status should not be used to determine eligibility for housing or services.

Additional resources:

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- LA County [Best Practices for Improving Vaccination in CCFs](#)
- CDC [Stay Up to Date with COVID-19 Vaccines](#)

Air Filtration and Ventilation

Increasing ventilation is one of the most effective ways to reduce the transmission of viruses spread through the air. Maximizing ventilation is particularly important in areas that are designated for isolating persons with respiratory viruses. See [CDPH Best Practices for Ventilation of Isolation Areas](#).

- Maximize airflow and filtration within the facility's HVAC system to improve air quality.
- Make sure your building's HVAC system is in good working order and frequently inspected. HVAC systems can be optimized by installing a MERV 13 filter and ensuring a minimum of five air changes per hour (ACH).
- Create directional airflow from clean areas (i.e., the corridor) to less clean areas (i.e., sick client rooms) so that infectious particles do not spread within the facility and are, if possible, exhausted directly to the outdoors.
- When mechanical filtration cannot be improved enough to meet targets or in rooms with more crowding, portable air cleaners ("HEPA air filters") should be considered. Portable air cleaners must be appropriately sized for the area where they are deployed and be oriented so that air is exhausted upwards without blowing air from one person to another.
- Improve natural ventilation (i.e., open windows when weather permits) and properly use fans.
- Decrease indoor occupancy in areas where outdoor ventilation cannot be increased.

Additional resources:

- CDPH [Interim Guidance for Ventilation, Filtration, and Air Quality in Indoor Environments](#)
- Cal/OSHA [COVID-19 Prevention Non-Emergency Regulation FAQs-Ventilation](#)
- CDC [Ventilation in Buildings](#); [Ventilation in Homes](#)

Masks and Personal Protective Equipment (PPE)

[Masks](#) help prevent the spread of COVID-19, flu, and other respiratory viruses by serving as a filter to reduce the germs you breathe in or out. When worn by a person with an infection, masks mitigate the spread of the virus to others. Masks can also protect wearers from breathing in viruses from people around them. For a mask to work well, it must have a good fit and filtration. While all masks provide some protection, well-fitting respirators (such as N95, KN95, and KF94) give the best protection.

Staff, visitors, and residents/patients/detained persons should receive a clean mask upon request. Visitors should be provided with the same type of PPE used by facility staff if visiting someone in isolation. Visitors do not need a fit-tested N95 respirator but should be instructed to perform a [seal check](#).

Depending on facility type, your facility may fall under the [Cal/OSHA ATD Standard](#). Per the ATD Standard, staff must wear fit-tested N95 respirators when caring for COVID-19 cases. Ensure staff comply with the regulations that apply to your facility, including using appropriate [PPE](#) for COVID-19 care.

There may be additional masking requirements in [healthcare settings within facilities](#).

When masks are not required, individuals may choose to wear a mask without fear of discrimination or retaliation.

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Additional resources:

- CDC [Infection Control Guidance: SARS-CoV-2](#)
- CDPH [When and Why to Wear a Mask](#)
- LA County [Infection Prevention Guidance for Healthcare Personnel](#)

Health Screening

Residents/patients/detained persons

To identify individuals with cold, [flu](#), and [COVID-19](#) symptoms, facilities should conduct symptom screening upon intake and monitor for new symptoms while staying at the facility. If symptoms are identified, keep sick individuals away from others. Facilities may consider enhanced screening strategies when community transmission is high or significant transmission within the facility. Enhanced screening strategies may include asymptomatic testing for COVID-19 upon intake to facilitate early identification of infections.

Staff

Communicate self-screening for cold, flu, and COVID-19 symptoms—support staff to stay home when sick. Staff should be actively screened for symptoms when an outbreak occurs at the facility.

Signage

Post signs throughout the facility, communicating best practices and encouraging reporting of symptoms. For signage examples, see [DPH's COVID-19 Guidance for Businesses and Employers](#).

Testing and Treatment

COVID-19 treatment is available for those who test positive and can prevent them from getting very sick. To be effective, the oral medications must be started within 5 days of when symptoms begin. Individuals with cold, flu, or COVID-19 symptoms should get tested for COVID-19 and referred to a provider for timely treatment if positive.

Free and low-cost treatments are available for eligible patients. For more information, visit [Medicine to Treat COVID-19](#).

During the winter respiratory virus season (fall through early spring), consider also referring symptomatic individuals at risk for severe disease for influenza testing if they test negative for COVID-19. Antiviral medications for influenza are available by prescription for those who get sick with the flu and work best if started within two days of when symptoms begin. For more information, visit [CDC Flu Treatment](#).

Cleaning & Disinfecting Practices

Facilities should regularly clean frequently touched surfaces and objects such as door handles, stair rails, elevator buttons, touchpads, and restroom fixtures. They should also clean and disinfect surfaces when they are visibly dirty or areas where people have been ill.

Additional resources:

- CDC [Safety Precautions: Cleaning and Disinfecting for COVID-19](#)
- EPA [COVID-19 Disinfectants](#)

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- LA County [CCF Infection Prevention](#)

Required and Recommended Actions When a Person with Symptoms is Identified Onsite

Symptomatic Persons and Close Contacts

Residents/patients/detained persons

- Those with cold, flu, or COVID-19 symptoms should be masked, isolated from others to the extent possible, and tested for COVID-19. If they test negative, keep them from others and consider retesting in 2 days.
- Those who test *positive* for or are diagnosed by a healthcare provider with COVID-19 (COVID-19 case) should have a space away from others as feasible (see the [COVID-19 Isolation Onsite](#) section below).
 - A highly protective mask must be worn for 10 days after symptoms began or after testing positive if the individual must be around others.
 - Isolation may end when all the following criteria are met:
 - No fever for 24 hours without use of fever-reducing medications.
 - No symptoms or symptoms are mild and improving.
 - In some congregate settings, particularly those serving high-risk individuals, facilities may consider a 5-day minimum isolation period.
- Those who test *negative* for COVID-19 but still have symptoms of a respiratory viral illness should be kept away from others until 24 hours after the fever resolves (without fever-reducing medications), **AND other symptoms are mild and improving.**
- Close contacts of a COVID-19 case should wear a highly protective mask around others for 10 days after exposure. They should test for COVID-19 immediately after exposure and then again at least 48 hours later (between Days 3 and 5 after exposure).

Staff, non-healthcare

- Those with cold, flu, or COVID-19 symptoms should be excluded from work while sick. They should test for COVID-19.
- Those who test *positive* for or are diagnosed by a healthcare provider with COVID-19 (COVID-19 case) must be excluded from the workplace until they meet the criteria below for leaving isolation.
 - Isolation may end when all the following criteria are met:
 - No fever for 24 hours without use of fever-reducing medications.
 - No symptoms or symptoms are mild and improving.
 - A highly protective mask must be worn for 10 days after symptoms began or after testing positive if the individual must be around others.
- Those who test *negative* for COVID-19 should not return to work until 24 hours after the fever resolves (without fever-reducing medications) AND other symptoms are mild and improving.
- Close contacts may continue to work if they wear a highly protective mask around others and remain asymptomatic. They should test for COVID-19 immediately after exposure and again at least 48 hours later (between Days 3 and 5 after exposure).

Staff in healthcare areas

Refer to [COVID-19 Infection Prevention Guidance for Healthcare Personnel](#) for staff in healthcare areas that test positive for or are diagnosed by a healthcare provider with COVID-19.

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COVID-19 Positive Individuals Onsite

Facilities should accept individuals with COVID-19 or another respiratory virus. When a person has symptoms or tests positive for COVID-19 at intake or during their stay, they should be kept away from others for the duration of their isolation period to the greatest extent possible.

Ideally, the individual would be placed in a private room or cohort with other COVID-19 cases to avoid further spread within the facility. Provide a separate bathroom or ensure a shared restroom can be effectively cleaned after use.

If a designated space for isolation is unavailable, reduce transmission within the facility by following best practices above. Ensure an ample supply of surgical masks or respirators, optimize ventilation in the infected individual's area, and maximize the physical distance between infected patients and others.

For guidance on improving indoor air quality in isolation areas, including creating directional airflow to limit transmission, see [CDPH's best practices](#).

Additional Considerations

Correctional and detention facilities:

- High-risk persons with symptoms or exposed persons should be housed where they can get close medical monitoring, even if this is not within their current housing module or floor.
- Isolate individuals within their current housing module or floor, provided they can be separated from uninfected individuals and receive indicated medical monitoring.
- Separate individuals in single cells with solid walls (i.e., not bars) when possible.
- If unable to separate in single cells, cohort with others needing to be isolated in large, well-ventilated cells with solid walls and a door that closes fully. Arrange beds to allow for at least six feet between individuals.
- Intersperse empty single cells between cells occupied by cases when possible.

Sites serving PEH:

If an individual with COVID-19 cannot be isolated or cohorted on site, and the Department of Mental Health (DMH) or Department of Health Services (DHS) is the funder, consult with these funders for placement options. For LAHSA-funded providers, consult other [LAHSA Interim Housing programs available in your area](#).

Additional Resources

LA County Department of Public Health

- [COVID-19 Quick Links](#) and [COVID-19 Sitemap](#)
- [COVID-19 Community Care Facilities](#)
- COVID-19 testing and laboratory reporting: [Provider and Laboratory Reporting Guidelines for COVID-19](#)
- [Influenza \(Flu\)](#) and [Flu Vaccine](#)
- [Respiratory Syncytial Virus \(RSV\)](#)
- [Respiratory Viruses](#)

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- [RESP WATCH](#): viral respiratory surveillance for LA County
- [Los Angeles Health Alert Network](#): communications to health care professionals regarding local or national disease outbreaks and emerging health risks

California Department of Public Health

- [State Public Health Officer Order for COVID-19 Disease Control and Prevention](#)
- [COVID-19 Isolation Guidance for the General Public](#)
- [COVID-19 Testing Guidance](#)
- [Respiratory Virus Prevention](#)

California Occupational Safety and Health

- [COVID-19 Prevention Non-Emergency Regulations](#)

California Department of Social Services

- [Provider Information Notices \(PINs\) by Program](#)
- [ASC COVID-19 PINs by Topic](#)
- [CRP COVID-19 PINs by Topic](#)

Centers for Disease Control and Prevention

- [COVID-19 Prevention](#)
- [Influenza \(Flu\)](#)
- [Respiratory Syncytial Virus \(RSV\) Infection](#)

U.S. Department of Housing and Urban Development (HUD)

- [Approach to Winter Planning](#)