




**OFFICIAL NOTICE: THIS PROPERTY IS UNDER**

# QUARANTINE

Pursuant to Texas Health & Safety Code § 81.084, the Harris County Public Health has reasonable cause to believe this property is or may be infested or contaminated with COVID-19, a communicable disease. This property is placed in quarantine (**20GEN1446**), and the following control measures are in effect:

  
\_\_\_\_\_  
Signature of Public Health Authority

6/4/2020  
Date

*Under Texas Health & Safety Code § 81.088, anyone who tampers with or removes this notice is subject to criminal prosecution for a Class B misdemeanor. For more information, please visit [publichealth.harriscountytx.gov](http://publichealth.harriscountytx.gov)*



Harris County  
**Public Health**  
Building a Healthy Community

**HARRIS COUNTY PUBLIC HEALTH**  
**OFFICIAL NOTICE**  
**OF QUARANTINE OF PROPERTY**

**To:**

**Sherrell Charlot**  
**Administrator**  
**Oakmont Healthcare and Rehabilitation Center of Humble**

**Address:**

**Oakmont Healthcare & Rehabilitation Center of Humble**  
**8450 Will Clayton Pkwy,**  
**Humble, TX 77338**

Notice sent by:

Personal delivery on June 4, 2020 by: \_\_\_\_\_ [name]

Document handed to: \_\_\_\_\_ [name]

or

Registered or certified mail, tracking number: \_\_\_\_\_

Pursuant to Texas Health & Safety Code § 81.084, the Harris County, Texas health authority has reasonable cause to believe property in its jurisdiction is or may be infested or contaminated with a communicable disease. Pursuant to its authority, the following property is placed in quarantine:

**Oakmont Healthcare & Rehabilitation Center of Humble**  
**8450 Will Clayton Pkwy, Humble, TX 77338**

This quarantine is in effect from the following dates, which may be modified:

*June 4, 2020 until further notified*

Harris County Public Health has posted notices on the property. Under Texas Health & Safety Code § 81.088, anyone who tampers with or removes these notices before the quarantine ends could be subjected to criminal prosecution for a Class B misdemeanor. These notices are posted in the following locations:

*All entrances of the Oakmont Healthcare & Rehabilitation Center of Humble*

The reason for the quarantine (20GEN1446) is that your property is believed to be infected by:

COVID-19

Other: \_\_\_\_\_

Harris County Public Health's basis for suspecting your property is infected is [answer all that apply]:

A report was made by \_\_\_\_\_ [name]  
on \_\_\_\_\_ [date] by [letter], [telephone], [email], [in person], [other]  
stating the information contained in the attached affidavit.

An inspection was made by \_\_\_\_\_ [investigator]  
on \_\_\_\_\_ [date] and found the information contained in the attached

affidavit to be true and correct.

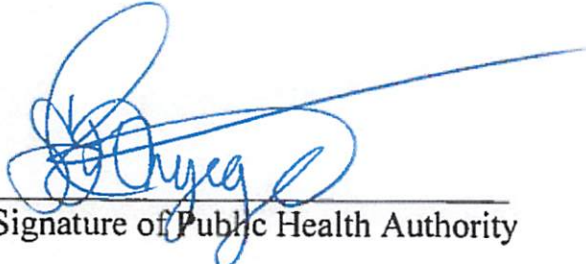
*[Attach affidavit]*

Because there is a declared public health disaster in effect for Harris County, and because your property is subject to a quarantine, Harris County Public Health requires you to:

- Post notices of quarantine on the property pursuant to Texas Health & Safety Code § 81.084.
- Destroy the property in a manner that disinfects or decontaminates it to prevent the spread of infection, as provided by Texas Health & Safety Code § 81.084.
- Fence off the perimeter of the land affected by the quarantine until the quarantine is removed, as provided by Texas Health & Safety Code § 81.084.
- Securely seal off all structures to prevent entry into the infected or contaminated area until the quarantine is removed, as provided by Texas Health & Safety Code § 81.084.
- Employ the following control measures pursuant to Texas Health & Safety Code § 81.082, as further explained in the attached affidavit:
  - Immunization

- Detention
- Restriction
- Disinfection
- Decontamination
- Isolation
- Quarantine
- Disinfection
- Chemoprophylaxis
- Preventative therapy
- Prevention and education

Because Harris County Public Health has reason to believe this property is or may be infected with a communicable disease that presents an immediate threat to the public health, if you fail to comply with this directive, Harris County Public Health may petition the county or district court for injunctive relief necessary for public health. If that occurs, you may be required to pay a bond in an amount set by the court up to the value of the property.

  
\_\_\_\_\_  
Signature of Public Health Authority

6/4/2020  
Date





June 4, 2020

**HARRIS COUNTY PUBLIC HEALTH**

**NOTICE TO PERSON WHO OWNS OR CONTROLS PROPERTY:  
QUARANTINE OF PROPERTY ORDER (20GEN1446)**

To:  
**c/o, Sherrell Charlot, Administrator  
Oakmont Healthcare & Rehabilitation Center of Humble  
8450 Will Clayton Pkwy,  
Humble, TX 77338**

This notice is provided under the authority of Texas Health and Safety Code §81.084 relating to the application of control measures to property. I, Dr. Sherri Onyiego, am the Alternate Local Health Authority for Harris County. My title and credentials are as follows, I serve as an Alternate Local Health Authority and Interim Division Director of Nutrition & Chronic Disease Prevention Division. I received my graduate degree in 2001 from Meharry Medical College and my medical degree in 2005 from Ross University School of Medicine.

As a local health authority, I am authorized by law to issue this notice.

I have reasonable cause to believe that following properties are or may be infected or contaminated with a communicable disease: Coronavirus Disease 2019 (COVID-19):

**Oakmont Healthcare & Rehabilitation Center of Humble  
8450 Will Clayton Pkwy, Humble, TX 77338**

The information to support these measures comes from the fact that:

1. Harris County Public Health (HCPH) Assessment and Compliance Multi-Disciplinary Team (MDT) conducted on-site assessments at the property on 4/25/2020, 5/5/2020, and 6/1/2020, and
2. I received a report from HCPH MDT on 6/1/2020.

Based on this, I learned the following information:

Since late April 2020, HCPH has been working closely together in conjunction with the Texas Health and Human Services Commission (HHSC) with Oakmont Healthcare & Rehabilitation Center of Humble (also referred to as “facility”). In order to determine and identify any gaps that may exist in the reporting of communicable diseases, including novel Coronavirus Disease 2019 (COVID-19) cases and deaths, and necessary infectious disease protocols to prevent the transmission and control the outbreak in the facility.

As a result, of several onsite investigations and information reported to HCPH by Oakmont Healthcare & Rehabilitation Center of Humble, it has been determined that there are several areas of concern:

- Failure to report communicable disease (COVID-19) cases and deaths, among both patients and facility staff, on a timely basis.
- Failure to implement and adhere to infectious disease prevention control protocols and procedures which have allowed continuation of spread of COVID-19 within the facility.
- Failure to provide a Comprehensive Mitigation Plan for COVID-19 to halt disease transmission.

Based on (1) [\*DSHS COVID-19 for Nursing Facilities Guidance\*](#), (2) guidelines produced by Centers for Disease Control and Prevention (CDC) (e.g., *Coronavirus Disease 2019 (COVID-19) Preparedness Guidelines for Nursing Homes and Other Long-Term Care Settings*, *Preparing for COVID-19: Long-term Care Facilities*, *Nursing Homes Guidelines*, *Cleaning and Disinfection for Community Facilities*, and other relevant infection control guidance for COVID-19), (3) on **4/25/2020, 5/5/2020, and 6/1/2020 facility visit findings**, and (4) **based on the facility’s current number of COVID-19 confirmed cases and deaths**; you are hereby ordered immediately to **Post Notice of Quarantine on the Property**; consistent with this Order of Quarantine (also known as “Control Order”, or “Order”), the following measures that are reasonable and necessary to prevent the introduction, transmission, and spread of this disease in this county shall be implemented immediately:

1. Resident Monitoring and Restrictions to prevent further spread of COVID-19 and put residents at risk for COVID-19 infection;

- a. Encourage residents to remain in their room. Since there are cases in the facility, restrict residents (to the extent possible) to their rooms except for medically necessary purposes.
- b. If residents must leave their room, residents should wear a facemask, perform hand hygiene, limit their movement in the facility, and adhere to strict social distancing (e.g., stay at least six feet away from others) guidelines.
- c. Under the Quarantine of Property Order, this nursing home facility will not be allowed to take residents outside of the facility except for emergency transfers to a hospital, medical treatments/services (e.g., chemotherapy or dialysis, etc.).
- d. Under the Quarantine of Property Order, this nursing home facility may discharge residents to other facilities or the resident's home, but only after approved by HCPH, while the Control Order remains in effect.
- e. Under the Quarantine of Property Order, this nursing home facility may admit residents to this facility, but only after approved by HCPH, while the Control Order remains in effect.
- f. Any unexplained febrile illness ( $\geq 99.6^{\circ}\text{F}$  for those at or above the age of 65;  $> 100.4^{\circ}\text{F}$  for those below the age of 65) of facility employees, residents, visitors or volunteers must be reported to HCPH (see below, including the epidemiologist on call after-hours) as soon as possible.
- g. If medical evaluation or care is needed for any symptomatic resident or facility employee, the facility must pre-notify the other hospital or facility of the individual's risk status and make the other facility aware of this Control Order and its contents.
- h. If emergency transportation is required, the facility must advise any emergency medical services (EMS) of the patient's risk status and make EMS personnel aware of this Control Order and its contents. The facility must also contact HCPH to provide information of any updates to these emergency medical situations at the facility and information about how the patient was transferred by EMS (e.g., name of EMS agency, contact information, etc.).
- i. Facility **must immediately notify HCPH if any resident or employee develops symptoms compatible with COVID-19.** *HCPH Epidemiology staff can be reached at 832-927-7575 (between the hours of 8:00am-5:00pm, Monday-Friday) or at 713-755-5050, if after-hours.*



## 2. Infection Control/Disinfection

a. Adhere to the latest information about COVID-19 by reviewing CDC's *Interim Infection Prevention and Control Recommendations for Patients with Confirmed Coronavirus Disease 2019 (COVID-19)* or CDC's *Persons Under Investigation for COVID-19 in Healthcare Settings*. Provide adequate and appropriate supplies for recommended Infection Prevention and Control Practices:

- i. Facility must ensure that staff have access to EPA-registered hospital-grade disinfectants to allow for frequent cleaning of high-touch surfaces and shared resident care equipment.
- ii. If there are no available EPA-registered products that have an approved emerging viral pathogen claim for COVID-19, products with label claims against human coronaviruses should be used according to label instructions.
- iii. Labels contain instructions for safe and effective use of the cleaning product, including precautions that should be taken when applying the product, such as wearing gloves and making sure there is good ventilation during use.
- iv. Ensure adequate supplies to support intensified cleaning and disinfection practices and have a plan in place to restock rapidly if needed.
- v. The facility must have infection control policies that outline the recommended Transmission Based Precautions that should be used when caring for residents with respiratory infection. (<https://www.cdc.gov/infectioncontrol/guidelines/isolation/appendix/type-duration-precautions.html>).
- vi. The facility should periodically review and implement specific Infection Practice Control guidance for healthcare facilities caring for residents with suspected or confirmed COVID-19 <https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html>.
- vii. Trash disposal bins should be positioned near the exit inside of the resident room to make it easy for staff to discard PPE after removal, prior to exiting the room, or before providing care for another resident in the same room.

### 3. Medical Event and Required Reporting

- a. Identify and manage severe illness in any residents and staff.
- b. Provide a daily [Tracking Line List](#) to HCPH MDT of all residents and staff.
- c. All confirmed cases of COVID-19 and persons under investigation for COVID-19 among residents and staff must be reported to HCPH.<sup>1</sup>
- d. **Notification of suspected or confirmed cases of COVID-19 to HCPH immediately but no later than within 24 hours is required.**
- e. **Notification of deaths related to COVID-19 to HCPH immediately but no later than within 24 hours is required.**

### 4. Personal Protective Equipment (PPE)

- a. Facility must train staff on indications for and [proper use of N95 respirators](#).
- b. It is required that the facility implement a respiratory protection program in accordance with the appropriate OSHA and NIOSH certification standards.
- c. Fit testing of all staff shall be completed within 7 days of the receipt of this Quarantine of Property Order.
- d. Develop and implement “just-in-time” fit testing plan for larger scale evaluation, training, and fit testing of employees as necessary during this pandemic, if utilizing temporary or contract staff.
- e. New staff will be fit tested as soon as practical (however, no later than 3 days) after their first day of working at the facility.
- f. Limit respirators during training by determining which staff do and do not need to be in a respiratory protection program and, when possible, allow limited re-use of respirators by individual staff for training and then fit testing.
- g. Implement qualitative fit testing to assess adequacy of a respirator fit to minimize destruction of N95 respirator used in fit testing and allow for limited re-use by staff.
- h. Enforce universal surgical mask wearing when not caring for patients and N95 respirators use for all staff when caring for patients.
- i. Ensure that all staff who will have contact with infectious materials in their work placements have been trained to correctly manage, don, doff,

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<sup>1</sup> <https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/provider-portal/long-term-care/nf/covid-response-nursing-facilities.pdf>



and dispose of PPE relevant to the level of contact they will have with confirmed and suspected COVID-19 cases and have access to appropriate PPE.

- j. Create and implement a Gown Policy & Procedure as part of the PPE policy that clearly outlines the proper use of cloth gowns as to eliminate transmission of infectious material between resident rooms.

#### 5. Staff management/screening

- a. Ensure that COVID-19 screening is conducted as outlined by the [CDC Guidelines for Symptoms](#) and that the staff member temperature be taken by front desk staff and recorded within the same survey.
- b. It is required that the results of these surveys be reviewed at the start of each shift by management to ensure responses are screened.
- c. It is required that any answer of “yes” to symptoms or any answer of “100.4 and above” be flagged for immediate isolation, review and a prompt to ask the employee to report to their supervisor.

#### 6. Communication messaging

- a. HCPH will assist in providing the most current and updated guidance regarding social distancing, hand hygiene, etc., and the facility shall review and maintain signage to reflect this guidance in accordance with HCPH, HHSC, Texas Department of State Health Services (DSHS), and CDC, etc.<sup>2</sup>

#### 7. Visitor screening

- a. Restrict all visitors except for compassionate care situations (end-of-life).
- b. Restrict all volunteers and non-essential healthcare providers, including consultant services (e.g., barber, hairdresser).
- c. Implement universal use of source control for everyone in the facility. Essential visitors must pass symptom screen and temperature check before entrance, as above.

#### 8. Testing

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<sup>2</sup> <https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/provider-portal/long-term-care/nf/covid-response-nursing-facilities.pdf>

- a. *While it is primarily the responsibility of the facility to test its residents and staff in a timely manner*, in order to determine the active status of viral spread in the facility at present, HCPH Testing Strike Team will be on-site to conduct testing (specimen collection and processing) of all residents and staff for COVID-19 within 24-48 hours after this quarantine of property order is served.
- b. The facility will need to register all residents and staff for testing prior to HCPH Testing Strike Team arrival.
- c. The facility will need to obtain consent and power of attorney consent for residents if applicable for testing prior to HCPH Testing Strike Team arrival. *HCPH can provide the consent forms to the facility prior to testing if necessary.*
- d. The testing will be conducted at the facility in partnership with facility medical staff over the course of specimen collection for testing.
- e. HCPH will secure results for testing within 5-7 days, and in the meantime, facility will adhere to all protocols to mitigate further spread of COVID-19 in its facility.

#### 9. Post-Testing Cohort Plan

- a. HCPH and facility management will devise a new resident cohort plan based upon the test results received and in conjunction with any cases or reported deaths.
- b. Cohort Plan to include but not limited to:
  - i. Establishing a *COVID + Unit* that is sealed off from all clean areas and not in a high-traffic hallway.
  - ii. Establishing a *COVID – Unit* that is easily accessed from the front entrance of facility in order to reduce any possible transmission or cross-contamination with COVID + Unit
  - iii. Establishing a sealed off *Observation Unit* to be used for residents who are leaving the facility for other medical treatment and returning (such as dialysis, etc.).
  - iv. *Cohort patients*: group together patients who are infected with COVID-19 to confine their care to one area.
  - v. *Cohort staff*: assign designated teams of staff to provide care for all patients with suspected or confirmed COVID-19.
  - vi. Implement protocols for cohorting ill residents with dedicated staff and limit use of this staff with other non-COVID-19 residents.

10. Physical spacing

- a. Enforce strict “physical” distancing among residents, with 6 feet of spacing with each bed in shared rooms. “Physical” distancing should be the standard as HCPH recognizes the use of virtual strategies such as video, etc., to ensure social and emotional support for residents while still ensuring their health and safety by their physical separation.
- b. After test results are obtained, the facility shall implement a population density evaluation to determine where density loads should be managed or decreased to ensure physical spacing in consultation with HCPH.
- c. After test results are obtained, determinations will be made regarding the use of non-porous barriers as noted in the guidance recommendations issued by HCPH to facility on 6/3/2020.

11. Postmortem care and Terminal cleaning

- a. It is required that each room be terminally cleaned once a resident is no longer occupying the room.
- b. It is required that the following checklist be used to document this cleaning: [CDC Terminal Cleaning Checklist](#).
- c. It is also required that an excel spreadsheet document this cleaning be kept using the [CDC Environmental Cleaning Excel Sheet](#).
- d. Facility should wait 24 hours after terminal cleaning before moving residents according to cohort plan devised in consultation with HCPH.
- e. Facility should develop and be ready to implement a contingency plan for managing an increased need for postmortem care and disposition of deceased residents.
- f. Facility should identify an area in the facility that could be used as a temporary morgue.



As a result of this information, I have reason to believe this property is or may be infected with a communicable disease that presents an immediate threat to the public's health, as defined by Texas Health & Safety Code § 81.084. The communicable disease I believe has contaminated this property is:

- COVID-19
- Other: \_\_\_\_\_

Under Texas Health & Safety Code § 81.084, this requires that the property identified above be quarantined as follows:

- Post notices of quarantine on the property.
- Destroy the property in a manner that disinfects or decontaminates it to prevent the spread of infection.
- Fence off the perimeter of the land affected by the quarantine until the quarantine is removed.
- Securely seal off all structures to prevent entry into the infected or contaminated area until the quarantine is removed.

This further requires the imposition of the following control measures under Texas Health & Safety Code § 81.082:

- Immunization
- Detention
- Restriction
- Disinfection

- Decontamination
- Isolation
- Quarantine
- Chemoprophylaxis
- Preventative therapy
- Prevention and education

These measures are to be completed as follows:

Unless otherwise indicated, all requirements of this order shall be in place no later than 7 days following the date of the quarantine of property.

The quarantine and control measures can be lifted when the following conditions have occurred:

The quarantine of property will be lifted upon the submission and approval of a Comprehensive Mitigation Plan for COVID-19 to halt disease transmission, a 14 day period of no ongoing transmission, new or suspected cases of COVID-19 after this quarantine of property order is served, consistent timely reporting of confirmed and suspected cases of COVID-19, deaths, infectious disease control procedures to reduce and control the spread of COVID-19 within the Oakmont Healthcare & Rehabilitation Center of Humble.

Further, Affiant sayeth not.”

Signed on

6/4/2020



Signature

Sherri D. Onyiego MD, PhD  
Alternate Public Health Authority