

Temporary Permission for Program Flexibility and for Emergencies

When the Medical Health Coordination Center (MHCC) is activated, Providers and District Offices (DOs) will submit requests to CHCQDutyOfficer@cdph.ca.gov

This form is to be used ONLY for program flexibility requests when providers temporarily need to comply with licensing requirements by using alternative concepts, methods, procedures, techniques, equipment, or personnel.

Providers are required to submit a program flexibility request to the California Department of Public Health (CDPH), Center for Health Care Quality for approval. This form is a mechanism to expedite the request directly to the Medical Health Coordination Center (MHCC) for approval in emergency situations.

<https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/DistrictOffices.aspx>

Facility Name

Central Valley Specialty Hospital

Date of Request

6/26/2020

License Number

030000464

Facility Phone

209-248-7700

Facility Fax Number

209-846-0345

Facility Address

730 17th Street

E-Mail Address

[Redacted]

City

Modesto

State

CA

Zip Code

95354

Contact Person's Name

[Redacted]

Approval Request

Complete one form total per facility

- Staffing Other
- Tent use (High patient volume) Bed Use
- Space Conversion (other than tent use) Over bedding

Duration of Request

Start Date 6/26/2020

End Date 9/26/2020

Program Flex Request

What regulation are you requesting program flexibility for? CDPH Licensing & Certification, Title 22

Justification for the Request

- A disease outbreak (verifiable through sources such as the local emergency medical service agency (LEMSA), local Public Health Officer, CDPH Division of Communicable Disease Control, the Centers for Disease Control and Prevention) is present in the community where the hospital is located or in a contiguous area(s) causing a rapid influx (surge) of patients to the hospital. Examples of this type of surge include: Increased cases of seasonal influenza, onset of a severe acute respiratory syndrome-type or other highly contagious virus requiring acute care, an epidemic/pandemic, a bioterrorism agent, or a declared public health emergency.
- An emergency resulting in the need for increased patient accommodations has occurred in the community where the hospital is located or in a contiguous area(s) causing a rapid influx (surge) of patients to the hospital. Examples of this type of surge include: A natural or human-caused disaster, a crime incident or transportation accident resulting in numerous mass casualties, an emergency causing the evacuation of patients or diversions from another hospital (LEMSA diversion has been implemented).

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030000464

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6/26/2020

Justification for the Request

Other:

Requesting waiver for staffing, impacted by absenteeism and increased census of influx of pa

Exhausting Available Alternatives

The provider must exhaust available alternatives before requesting increased patient accommodations. Check all that apply:

- Rescheduling non-emergent surgeries and diagnostic procedures.
- Transferring patients to other beds or discharge as appropriate.
- Setting clinics for non-emergency cases (if possible).
- Requesting ambulance diversion from LEMSA, if appropriate.
- Other: Reached out to previously self termed staff, offering overtime and bonuses when app

Adequate Staff, Equipment and Space

The provider must make arrangements for adequate staffing, equipment and space for increased patient accommodations. Check all that apply:

- A plan is in place for staff if the request is for use of alternate space.
- A plan is in place for equipment if the request is for use of alternative space.
- The proposed space for care of patients provides sufficient square footage to ensure access for safe care.
- Other:

Additional Information

Provide a brief description of your conditions and explain the need for program flexibility. Provide a brief description of the alternative concepts, methods, procedures, techniques, equipment or personnel to be used, and the conditions under which this program flexibility will be used. Attach additional supporting documentation as needed.

Currently we have nineteen (19) Certified Nurse Assistants off due directly to COVID-19, seventeen (17) Licensed Vocational Nurses and six (6) Registered Nurses. We are currently experiencing a higher than normal admission rate with a decreased ability to discharge.

Concurrently, we have thirty-seven (37) patients/persons under investigation for COVID-19 exposure.

Central Valley Specialty Hospital works to accept patients from the entire central valley. As of today, nine (9) counties in our coverage area including our own, Stanislaus County, are on the COVID-19 watch list, indicating an increase in COVID-19 patients in these areas.

Additionally, CVSH has seen a significant increase in call-ins, leave of absences, and removal of COVID-19 exposure employees necessitating this waiver.

Staffing Agencies have been contacted.

Hiring is open for all Clinical/Nursing positions

- Opened up additional options for Per-Diem
- Clinical staff schedules are being accommodated given their personal circumstances affected by COVID-19 (i.e. option given for flexible hours).

[Redacted Signature]

Signature of person requesting program flexibility

Chief Clinical Operations Officer

Title

[Redacted Name]

Printed Name

NOTE: Approval for tent use, space conversion, bed use and over-bedding will be time limited and dependent on the facts presented that substantiate the emergency. Initial approval may be given verbally by the local DO; however, a signed written approval must be distributed (faxed) to the facility and filed in the facility's folder.

For CDPH Use Only

Center for Health Care Quality Approval:

Permission Granted from: **June 26, 2020** to **Sept 24, 2020**

Permission Denied: Briefly describe why request was denied in comments / conditions below:

Comments / Conditions:

Please see conditions as listed in the approval email.

CHCQ Printed Name: [Redacted]

CHCQ Staff Signature: [Redacted]

Date: [Redacted]

[Redacted Signature]

L&C District Office Staff Signature

HFEM II

Title

7/28/20

Date