

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

Wagner Heights Nursing and Rehabilitation

Date of Request

7/1/20

License Number

1100000355

Facility Phone

209-477-5252

Facility Fax Number

209-629-9476

Facility Address

19289 Branstetter Pl

E-Mail Address

[Redacted]

City

Stockton

State

CA

Zip Code

95209

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 July 1, 2020

End Date Sept 29, 2020

Program Flex Request

What regulation are you requesting program flexibility for? Title 22 - section 72329.1 and 72329.2

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).

- If you are seeking a staffing waiver, has your facility laid off any clinical staff within the previous 60 days? If so, please explain (**Note:** Attach supporting documentation if necessary)

No

Justification for the Request

- Other:

We are experiencing challenges meeting 3.5/2.4 requirements as the result of implementing CDC and CDPH guidance advising work restrictions for symptomatic employees and actual or suspected COVID-19 exposure instances (explained below); and continued school

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: _____

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.

We are experiencing challenges meeting 3.5/2.4 requirements as the result of implementing CDC and CDPH guidance advising work restrictions (quarantine) for all staff presenting with unexplained fever or undiagnosed respiratory symptoms; or, recent medium to high risk exposure to a confirmed case of COVID-19 case (even if asymptomatic). Our facility (Wagner Heights) is experiencing staffing shortages and is having difficulty recruiting replacement workers for the following reasons.
 Since March, 18 employees took leaves-of-absences, so that they only worked at one SNF at one time. (Despite our efforts to retain by paying bonuses and increasing hours.) With staff on LOA's we had to create 12-hr shifts for our Welcome (isolation) Unit. In addition to LOAs, and in the last 60 days, 14 CNAs and 6 Nurses have resigned with another 10 clinicians taking leaves of absence. Additionally, many other key non clinical staff have resigned.

In total, Nursing Hours were at 3.52 for the month of June with a significant amount of overtime thusly causing stress, fatigue and burnout with our nurses. As mentioned, any part-time staff employed at other SNF's were asked to select our facility to work exclusively or placed on LOA's as we cannot use people working in two SNFs. We have shifted staff Med. Records, ADON, Case Managers, MDS's to manage COVID education and testing weekly. We've increased Housekeeping hours, not counting in PPD hours, to be sure we get the deep cleaning daily that is needed. We added door screeners 24-7, and a FT Infection Preventionist position, that are not included in daily hours. Cohorting requirements is an all-consuming project to properly manage Residents/patients in the Welcome Unit, along with staffing to Isolation areas, that do not cross over other areas of the facility, including Housekeeping/Laundry staff. Our Recruiting dept. is helping to recruit for CNA's, (12-14) on PM's and Noc shift alone, with referral bonus's in place to attract and recruit. Nursing dept. is very challenging, with CNA's not wanting to apply during the pandemic. Other staff are simply not interested in coming back until their CARES reimbursement ends. We are contracted with 10 agencies (Harvard Partners, HDG Staffing, Judge Technical Staffing, Maxim, Merritt Search Group LLC, Nursource, Platinum Healthcare Staffing, Prime Time Staffing, RehabAbilities Staffing, and Ro Health) to aide in clinical recruiting efforts. We are experiencing a surge of patients requiring isolation due to actual and suspected COVID-19.

[Redacted Signature]

Executive Director

Signature of person requesting program flexibility

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: July 1, 2020 to Sept 28, 2020

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

Comments / Conditions:

approval is limited to the regulation of 72329.2 and excludes 72329.1

CHCQ Printed Name: [Redacted]

CHCQ Staff Signature: [Redacted]

Date: 7/21/2020

[Redacted Signature]

HFSM II

Title

7/21/2020

Date