

Temporary Permission for Program Flexibility and for Emergencies

When the MHCC is activated, Providers and DO's 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 (CHCQ) 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 Windsor Care Center of Cheviot Hills			Date of Request 7-23-2020; Requesting effective back to 7-10-2020	
License Number 910000090			Facility Phone 310-836-8900	Facility Fax Number 424-345-8785
Facility Address 3533 Motor Ave.			E-mail Address chvadmin@windsorcares.com	
City Los Angeles	State CA	Zip Code 90034	Contact Person Name [REDACTED]	

Approval Request

Complete one form total per facility

Duration of Request

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

Start Date: **July 10, 2020**
 End Date: **October 8, 2020**

Program Flex Request

What regulation are you requesting program flexibility for? **CCR 22 §72329; §72329.2; H&S Code §1599.1(a) 72329.1**

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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Justification for the Request

Other:

On March 04, 2020 Gov. Gavin Newsom declared a State of Emergency to make additional resources available, formalize emergency actions already underway across multiple state agencies and departments, and help the state prepare for broader spread of COVID-19. Our Facility is experiencing COVID-19 related issues that directly impact our staffing related to, surge of patients or staffing shortages resulting from COVID-19 and impacts including, increased community spread and school closures. Is for those reason and the addition information provided below, that we respectfully request a waiver from the state mandated staffing ratios of 3.5 / 2.4. Alternatively, we are requesting a waiver from the 2.4 CNA NHPPD requirement, which at least allows us greater flexibility to deal with the current crisis by replacing CNA hours with Licensed Nurse hours.

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 alternate 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.

CCR 22 §72329; §72329.2; H&S Code §1599.1(a)

Our facility is experiencing COVID-19 related issues that is directly impacting our staffing levels. (as described below/facility specific)

In addition to the steps taken below, the facility experienced a severe COVID-19 outbreak from March 20, 2020 to June, with an additional smaller outbreak with presumed COVID-19 positive cases in July. During the initial outbreak, the facility implemented the use of Registry (contracted with over 5 different companies) and needed the assistance of the National Guard until the beginning of June. We had 56 patients test positive and nearly 30 employees. Not all of the employees that have recovered have come back to the facility and we had one employee pass away from COVID-19 related exposure at work. These have made it difficult to hire and retain. We are making strides and have been able to hire 5 CNA's in a one month period and 3 LVN's during the same period. This has helped, but we still have a need. We are having a 2 week long virtual job fair and are still working with various Registry companies.

Steps the facility has taken (and continues to take) include:

1. Implementing the facility's Staff Recall Policy and staffing contingency plans.
2. Asking nursing personnel to work extra hours or pick up extra shifts.
3. Working with staffing agencies to supplement facility staffing, while also working hard to limit staff who might be working at (and potentially transferring the disease from or to) other facilities.
4. Restricting entry to the facility and access to the patients to only essential personnel and regular screening of essential personnel.
5. Utilizing non-CNA's/LN's to supplement the services provided by nursing personnel (hospitality aides working closely with CNA's, department heads helping with meals, staff from other departments answering call lights and assisting with services that do not require a CNA or Licensed Nurse, etc. . .).
6. Finding and sponsoring people to attend CNA certification courses to grow the pool of available CNA's in the coming months.
7. Supporting staff by providing food/meals/gift cards/thank you notes/etc. . . during the emergency.
8. Following the CDC Crisis Capacity Staffing Strategies for COVID-19.
9. Continue to comply with unusual occurrence reporting requirements specified in Title 22 of the California Code of Regulations section 72541.
10. Report any substantial staffing or supply shortages that jeopardize resident care or disrupt operations.
11. We will continue to provide necessary care in accordance with residents' needs and make all reasonable efforts to act in the best interest of residents.
12. Follow our disaster response plan.
13. Follow infection control guidelines from the Centers for Medicare and Medicaid Services (CMS) and the CDC related to COVID-19.
14. Comply with directives from our local public health department, to the extent that there is no conflict with federal or state law or directives or CDPH AFLs.
15. Registry contracts obtained and have had several registry employees provide care.
16. Implemented hiring bonuses for staff and people who refer hired staff.
17. Implementing a 2 week long virtual hiring fair.

This list is not exhaustive/all-inclusive. Additional information can be provided if requested. The waiver will only be relied on when necessary and at all times the facility will continue to work hard to ensure patients receive the appropriate level of care.

[Redacted Signature]

Signature of person requesting program flexibility

[Redacted Name]

Printed name

ADMINISTRATOR

Title

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: 07/10/2020 to 10/10/2020

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

Comments / conditions:

This is approved with the condition that the facility implements its' Mitigation Plan and use registry (Staffing agencies) before flexing staffing regulations. The facility must meet a NHPPD of 3.2.

CHCQ Printed Name:

CHCQ Staff Signature: _____

Date:

[Redacted Signature]

L&C District Office Staff Signature

Program Manager

Title

07/29/2020

Date