

Program Flexibility Application

Please do not include any patient identifying or personnel information in your application. The information in your application is considered public information and may be disclosed as part of a public records act request.

Contact Details

Please provide the applicant's direct number should the Centralized Program Flex Unit have any questions regarding your application.

Applicant
Contact
Number *



Duration of Request

Requested
Start Date *



11/18/2024

Requested
End Date *



03/31/2026

Specify Type of
Request *



☒ Emergency ☐ Non-Emergency

- ☒ Requesting an urgent response within 24 hours to help address facility capacity concerns during a disease outbreak, patient evacuations during a natural or human-caused disaster, or another similar situation that cannot wait for a response during normal business hours.

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.

- ☐ Another natural or human-caused disaster, a crime incident, or a transportation accident 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, evacuations of patients or diversions from another hospital (LEMSA diversion has been implemented), or numerous mass casualties.
- ☐ A wildfire 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, evacuations of patients or diversions from another hospital (LEMSA) diversion has been implemented or numerous mass casualties.
- ☐ An earthquake 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, evacuations of patients or diversions from another hospital (LEMSA diversion has been implemented), or numerous mass casualties.
- ☐ A flood 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 hospitals, evacuations of patients or diversions from another hospital (LEMSA diversion has been implemented), or numerous mass casualties.
- ☐ Other

What regulation(s) are you requesting program flexibility for? ⓘ



*

Select Facility Type

General Acute Care Hospital ▼

Search Regulations by Title or Regulation Number

Selected Regulations

Nursing Service Staff, T22 DIV5 CH1 ART3-70217(I)

(I) A rural General Acute Care Hospital as defined in Health and Safety Code Section 1250(a), may apply for and be granted program flexibility for the requirements of subsection 70217(i) and for the personnel requirements of subsection (j)(1) above.

Space Conversion, T22 DIV5 CH1 ART8-70805

Spaces approved for specific uses at the time of licensure shall not be converted to other uses without the written approval of the Department.

Patient Accommodations, T22 DIV5 CH1 ART8-70809(a)

(a) No hospital shall have more patients or beds set up for overnight use by patients than the approved licensed bed capacity except in the case of justified emergency when temporary permission may be granted by the Director or his designee. Beds not used for overnight stay such as labor room beds,

recovery beds, beds used for admission screening or beds used for diagnostic purposes in X-ray or laboratory departments are not included in the approved licensed bed capacity.

Patient Accommodations, T22 DIV5 CH1 ART8-70809(b)

(b) Five percent of a facility's total licensed bed capacity may be used for a classification other than that designated on the license. Upon application to the Director and a showing that seasonal fluctuations justify, the Director may grant the use of an additional five percent of the beds for other than the classified use.

Patient Accommodations, T22 DIV5 CH1 ART8-70809(c)

(c) Patients shall not be housed in areas which have not been approved by the Department for patient housing and which have not been granted a fire clearance by the State Fire Marshal, except as provided in paragraph (a) above.

Effective January 1, 2023, HSC 1276 (e) and (f) references a new category for a program flexibility request, for a **general acute care hospital (GACH)**, that allows the facility to designate a bed, or beds, in a critical care unit as requiring a lower level of care.

Is this request related to a GACH designating a bed, or beds, in a critical care unit as requiring a lower level of care? *

☒ Yes ☐ No ☐ N/A (Non-GACH Facility)



Request Description



Accommodation of an anticipated increase in patient volumes in the medical/surgical areas of the hospital during flu season and increase in total patient volume. Santa Clara Valley Medical Center (SCVMC) has been operating at increased capacity and has been experiencing high numbers of patient admissions. SCVMC is requesting approval for program flex waiver for the use of space in Building K, 2nd floor, see attached floor map, to accommodate a significant increase in patient volumes in the medical/surgical areas of the hospital. 2K is licensed for eight (8) intensive care unit (ICU) beds,

Exhausting Available Alternatives

The provider must exhaust available alternatives before requesting increased patient accommodations. Check all that apply, none or N/A: *

- ☐ 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.
- ☐ None
- ☐ N/A
- ☐ 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, none or N/A: *

- ☒ 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.
- ☐ None
- ☐ N/A
- ☐ Other

ALTERNATIVE CONCEPT



Describe the proposed alternate method for meeting the intent of the regulation. Include the alternate concepts, methods, procedures, techniques, equipment, personnel qualifications, or the conducting of pilot projects. Include a description of the provisions for safe and adequate care so that the proposed alternative does not compromise patient care. *

- Due to increase in patient volumes in the medical/surgical areas of the hospital during flu season and increase in total patient volume, additional patient beds in Building K, K 6006, West Wing, 2nd floor, Intermediate Intensive Care Unit (IICU): Eight (8) beds: 2K117, 2K118, 2K119, 2K120, 2K121, 2K122, 2K123, and 2K124, are needed to accommodate medical-surgical/ medical-surgical telemetry patients. The facility will staff this unit with Medical-Surgical/ Med-Surgical Telemetry. Each room is single occupancy.

Additional Information



Provide any additional information as desired.

Service Description:

This unit provides acute medical-surgical care, including patients requiring telemetry monitoring for patients, requiring definitive diagnosis of an acute medical condition. The interdisciplinary team provides collaborative planning, treatment and

education. The medical services admitting to the unit include general medicine with surgical overflow, In addition, the nurses care for transient ischemic attack (TIA) patients. Care provided includes all routine nursing care including but not limited to

vital signs, assessment of patient condition, wound assessment and dressing changes, distribution of medications, management of chronic conditions not related to admission diagnosis (i.e., diabetes).

Nurses are holistic in their approach

addressing all issues including psychosocial, spiritual along with medical concerns This unit provides

acute surgical care, including patients requiring telemetry monitoring for patients requiring definitive diagnosis of an acute medical or surgical condition. The interdisciplinary team provides collaborative planning treatment and education. 4 Surgical is primarily a surgical unit that takes overflow medicine

patients. Common services on 4 Surgical

include trauma, general surgery, urology, ENT and plastic surgery. Care provided on 4 Surgical includes all routine nursing care including but not limited to VS, assessment of patient condition, wound assessment and dressing changes,

administration of medications, management of chronic conditions not related to admission diagnosis (i.e. diabetes). The nurses are holistic in their approach addressing all issues including psycho/social/spiritual along with medical concerns.

4 Surgical also includes the use of telemetry for medical/surgical patients that have a history of cardiac issues or exhibited some cardiac abnormality during surgery or for trauma patients requiring monitoring for potential cardiac complications of trauma.

- There will be a be 8 total beds with 4 beds Tele capability in CMR- 70217(a)10

-Medical/Surgical telemetry patients; same procedures done in med/surg units for patients admitted to the units.

-Nurse-to-patient staff ratio plan:

The regulation for staffing a telemetry unit is 70217(a)(10) "1:4 or fewer at all times.

The regulation for staffing a med/surg unit is 70217(a)(11) "1:5 or fewer at all times.

(staffing according to the telemetry unit regulations 70217(a)(10) "1:4 or fewer at all times; to accommodate only med/surg (non-telemetry) patients, then the staffing would fall under the med/surg staffing regulation 70217(a)(11) "1:5 or fewer at all times).

-The facility will staff this unit with Medical-Surgical/ Med-Surgical Telemetry competent nurses and according to Section 70217(a) (8) – Nursing Service Staff – Title 22, California Code of Regulations, and delivery of quality patient care.

-Nurse-to-patient ratios will be maintained as per Federal and State requirements.
Please attach any supporting documentation for the request.

-More than one document may be uploaded here.
More than one document may be uploaded here. The hospital will provide and unit orientation, provide documentation of this orientation and ensure competence of the staff



SCVMC Building K 2nd Floor As Builts.pdf

-Hours of operation are 24 hours.

-Unit orientation for staff before the assignment will be provided.



AD-2 Part II Scope of Nursing Service and Plan for Nursing Care.pdf

-Care and services will be provided by the current policies and procedures.

-Medications will be dispensed per hospital & pharmacy protocols via Pyxis dispensing system.



ADT EAU without Tele (2).docx

-Unit medication storage and emergency equipment will be appropriate for medical-surgical patients.

-The facility will follow all appropriate infection prevention measures.



STD 850 Prepopulated.pdf

-There is no anticipated impact on patient flow.

Date Attached: Nov 18, 2024

-No temporary or interim life safety measures will be required.

-Space for equipment and staff, such as a crash cart, nursing station, and patient bathroom access:



Revise and Update

Add updates to the original application.
The hospital will ensure medical gases, call light, space, and related equipment to meet the patient's designated level of care.

The hospital will ensure Medical-Surgical-Telemetry leadership oversight for the patients.

The hospital will continue to provide necessary care in accordance with patient needs and make all reasonable efforts to act in the best interest of patients.

The hospital will ensure compliance with nursing unit requirements per T22 Section 70049.

The hospital will ensure signage is visible placed to clearly designate the flexed space.

I agree to submit this application and certify under penalty of perjury



that my answers are correct and complete to the best of my

knowledge. I also certify that:
The hospital will ensure hospital policies and procedures to include infection control mitigation are followed.

- I understand the questions and statements on this application.

The hospital will ensure patient privacy is maintained and implement a plan to allow visitors.

- I understand the penalties for giving false information.

The hospital will develop a safety plan (including transferring patients to and from toileting and shower areas) for the Medical-Surgical-Telemetry patients toileting and showering needs.

- I understand that this acknowledgment has the same legal effect and

can be enforced in the same way as a written signature.

- I am authorized to submit this application on behalf of the licensee.

- This application does not include any patient identifying or personnel information.

This Information provided on this form is mandatory and is necessary for waiver approval. It will be used to determine whether to approve the request for a waiver. **The information in your application is considered public information and may be disclosed as part of a public records act request.***



I acknowledge and agree to the above Terms of Acceptance