

VARIANCE TO STAGE 2 OF CALIFORNIA'S ROADMAP TO MODIFY THE STAY-AT-HOME ORDER



COVID-19 COUNTY VARIANCE ATTESTATION FORM

FOR

Background

On March 4, 2020 Governor Newsom proclaimed a State of Emergency as a result of the threat of COVID-19, and on March 12, 2020, through Executive Order N-25-20, he directed all residents to heed any orders and guidance of state and local public health officials. Subsequently, on March 19, 2020, Governor Newsom issued Executive Order N-33-20 directing all residents to heed the State Public Health Officer's Stay-at-Home order which requires all residents to stay at home except for work in critical infrastructure sectors or otherwise to facilitate authorized necessary activities. On April 14th, the State presented the Pandemic Roadmap, a four-stage plan for modifying the Stay-at-Home order, and, on May 4th, announced that entry into Stage 2 of the plan would be imminent.

Given the size and diversity of California, it is not surprising that the impact of COVID-19 has differed across the state. While some counties are still in the initial stabilization phase (Stage 1) of the pandemic response, there are a number of less affected counties. Provided these counties are able to demonstrate an ability to protect the public and essential workers, they may be in a position to adopt aspects of Stage 2 of California's roadmap at a faster pace than the state as a whole. As directed by the Governor in Executive Order N-60-20, this guidance provides information on the criteria and procedures that counties will need to meet in order to move more quickly than other parts of the state through Stage 2 of modifying the Stay-at-Home order. It is recommended that counties consult with cities and other stakeholders as they consider moving through Stage 2.

Local Variance

A county that has met certain criteria in containing COVID-19 may consider increasing the pace at which they advance through Stage 2, but not into Stage 3, of California's roadmap to modify the Stay-at-Home order. Counties are encouraged to first review this document in full to consider if a variance from the state's roadmap is appropriate for the county's specific circumstances. If a county decides to pursue a variance, the local public health officer must:

1. Notify the California Department of Public Health (CDPH) and engage in a phone consultation regarding the county's intent to seek a variance.
2. Certify through submission of a written attestation to CDPH that the county has met the readiness criteria (outlined below) designed to mitigate the spread of COVID-19. Attestations should be submitted by the local public health officer, and accompanied by a letter of support from the County Board of Supervisors, as well as a letter of support from the local hospitals or health care systems. In the event that the county does not have a hospital or health care system within its jurisdiction, a letter of support from the

relevant regional health system(s) is also acceptable. The full submission must be signed by the local public health officer.

All county attestations, and submitted plans for moving through Stage 2 as outlined below, will be posted publicly on CDPH's website.

While not required, CDPH recommends as a best practice the development of a county COVID-19 containment plan by the local public health officer in conjunction with the hospitals and health systems in the jurisdiction, as well as input from a broad range of county stakeholders, including the County Board of Supervisors.

In addition to pre-submission phone consultations, CDPH is available to provide technical assistance to counties as they develop their attestations and COVID-19 containment plans. Please email Jake Hanson at Jake.Hanson@cdph.ca.gov to set up a time with our technical assistance team.

County Name: _____

County Contact: _____

Public Phone Number: _____

Readiness for Variance

The county's documentation of its readiness to increase the pace through Stage 2 must clearly indicate its preparedness according to the criteria below. This will ensure that individuals who are at heightened risk, including for example the elderly and those residing in long-term care and locally controlled custody facilities, continue to be protected as a county progresses through California's roadmap to modify the Stay-at-Home order, and that risk is minimized for the population at large.

As part of the attestation, counties must provide specifics regarding their movement through Stage 2 (e.g., which sectors, in what sequence, at what pace), as well as clearly indicate how their plans differ from the state's order.

It is critical that any county that submits an attestation continue to collect and monitor data to demonstrate that the variances are not having a negative impact on individuals or healthcare systems. Counties must also attest that they have identified triggers and have a clear plan and approach if conditions worsen for modifying the pace of advancing through stage 2, including reinstating restrictions, in advance of any state action. Counties must also submit their plan for how they anticipate moving through Stage 2 (e.g., which sectors will be opened, order of opening etc.).

Readiness Criteria

To establish readiness for an increased pace through Stage 2 of California's roadmap to modify the Stay-at-Home order, a county must attest to the following readiness criteria and provide the requested information as outlined below:

- **Epidemiologic stability of COVID-19.** A determination must be made by the county that the prevalence of COVID-19 cases is low enough to be swiftly contained by an epidemiological response. Given the anticipated increase in cases as a result of modifications, this is a foundational parameter that must be met to safely increase the county's progression through Stage 2. The county must attest to:
 - No more than 1 COVID-19 case per 10,000 in the past 14 days prior to attestation submission date.

- No COVID-19 death in the past 14 days prior to attestation submission date.

- **Protection of Stage 1 essential workers.** A determination must be made by the county that there is clear guidance and the necessary resources to ensure the safety of Stage 1 essential critical infrastructure workers. The county must attest to:
 - Guidance for employers and essential critical infrastructure workplaces on how to structure the physical environment to protect essential workers. Please provide copies of the guidance(s).

- Availability of supplies (disinfectant, essential protective gear) to protect essential workers. Please describe how this availability is assessed.

- **Testing capacity.** A determination must be made by the county that there is testing capacity to detect active infection that meets the state's most current testing criteria (available on CDPH website). The county must attest to:

- Minimum daily testing volume to test 1.5 per 1,000 residents, which can be met through a combination of testing of symptomatic individuals and targeted surveillance. Please provide the plan and the county's average daily testing volume for the past week. If the county does not believe a testing volume of 1.5 per 1,000 residents is merited, please provide justification for this.

- Testing availability for at least 75% of residents, as measured by a specimen collection site (including established health care providers) within 30 minutes driving time in urban areas, and 60 minutes in rural areas. Please provide a listing of all specimen collection sites in the county, whether there are any geographic

areas that do not meet the criteria, and plans for filling these gaps. If the county depends on sites in adjacent counties, please list these sites as well.

- **Containment capacity.** A determination must be made by the county that it has adequate infrastructure, processes, and workforce to reliably detect and safely isolate new cases, as well as follow up with individuals who have been in contact with positive cases. The county must attest to:
 - Sufficient contact tracing. For counties that have no cases, there should be at least 15 staff per 100,000 county population trained and available for contact tracing; for counties with small populations, there must be at least one staff person trained and available. Please describe the county's contact tracing plan, including workforce capacity, and why it is sufficient to meet anticipated surge.

- Availability of temporary housing units to shelter at least 15% of county residents experiencing homelessness in case of an outbreak among this population requiring isolation and quarantine of affected individuals. Please describe the county's plans to support individuals, including those experiencing homelessness, who are not able to properly isolate in a home setting by providing them with temporary housing (including access to a private bathroom), for the duration of the necessary isolation or quarantine period.

- **Hospital capacity.** A determination must be made by the county that hospital capacity, including ICU beds and ventilators, and adequate PPE is available to handle standard health care capacity, current COVID-19 cases, as well as a potential surge due to COVID-19. If the county does not have a hospital within its jurisdiction, the county will need to address how regional hospital and health care systems may be impacted by this request and demonstrate that adequate hospital capacity exists in those systems. The county must attest to:
 - County (or regional) hospital capacity to accommodate a minimum surge of 35% due to COVID-19 cases in addition to providing usual care for non-COVID-19 patients. Please describe how this surge would be accomplished, including surge census by hospital, addressing both physical and workforce capacity.

- County (or regional) hospital facilities have a robust plan to protect the hospital workforce, both clinical and nonclinical, with PPE. Please describe the process by which this is assessed.

- **Vulnerable populations.** A determination must be made by the county that the proposed variance maintains protections for vulnerable populations, particularly those in long-term care settings. The county must attest to:
 - Skilled nursing facilities (SNF) have >14 day supply of PPE on hand for staff, with established process for ongoing procurement from non-state supply chains. Please list the names and contacts of all SNFs in the county along with a description of the system the county has to track PPE availability across SNFs..

- **Sectors and timelines.** Please provide details on the county's plan to move through Stage 2. This should include which sectors and spaces will be opened, in what sequence, on what timeline. Please specifically indicate where the plan differs from the state's order. Please note that this variance should not include sectors that are part of Stage 3.

- **Triggers for adjusting modifications.** Please share the county metrics that would serve as triggers for either slowing the pace through Stage 2 or tightening modifications, including the frequency of measurement and the specific actions triggered by metric changes. Please include your plan for how the county will inform the state of emerging concerns and how it will implement early containment measures.

- **Your plan for moving through Stage 2.** Please provide details on your plan for county to move through opening sectors and spaces that are part of the State's plan for Stage 2. A reminder, that this variance only covers those areas that are part of Stage 2, up to, but not including Stage 3. For additional details on sectors and spaces included in Stage 2, please go to the [California Coronavirus \(COVID-19\) Response County variance web page](#)

COVID-19 Containment Plan

While not mandatory, CDPH strongly recommends that counties requesting a variance to increase the pace through Stage 2 create a county COVID-19 containment plan as noted above. While not exhaustive, the following areas and questions are important to address in any containment plan.

Testing

- Is there a plan to increase testing to the recommended daily capacity of 2 per 1000 residents?
- Is the average percentage of positive tests over the past 7 days <7% and stable or declining?
- Have specimen collection locations been identified that ensure access for all residents?
- Have contracts/relationships been established with specimen processing labs?
- Is there a plan for community surveillance?

Contact Tracing

- How many staff are currently trained and available to do contact tracing?
- Are these staff reflective of community racial, ethnic and linguistic diversity?
- Is there a plan to expand contact tracing staff to the recommended levels to accommodate a three-fold increase in COVID-19 cases, presuming that each case has ten close contacts?
- Is there a plan for supportive isolation for low income individuals who may not have a safe way to isolate or who may have significant economic challenges as a result of isolation?

Protecting the Vulnerable

- How many congregate care facilities, of what types, are in the county?
- How many correctional facilities, of what size, are in the county?
- How many homelessness shelters are in the county and what is their capacity?
- What is the COVID-19 case rate at each of these facilities?
- Do facilities have the ability to safely isolate COVID-19 positive individuals?
- Do facilities have the ability to safely quarantine individuals who have been exposed?
- Is there sufficient testing capacity to conduct a thorough outbreak investigation at each of these facilities?
- Do long-term care facilities have sufficient PPE for staff, and do these facilities have access to suppliers for ongoing PPE needs?
- Do these facilities (particularly skilled nursing facilities) have access to staffing agencies if and when staff shortages related to COVID-19 occur?

Acute Care Surge

- Is there daily tracking of hospital capacity including COVID-19 cases, hospital census, ICU census, ventilator availability, staffing and surge capacity?
- Are hospitals relying on county MHOAC for PPE, or are supply chains sufficient?
- Are hospitals testing all patients prior to admission to the hospital?
- Do hospitals have a plan for tracking and addressing occupational exposure?

Essential Workers

- How many essential workplaces are in the county?
- What guidance have you provided to your essential workplaces to ensure employees and customers are safe in accordance with state/county guidance for modifications?
- Do essential workplaces have access to key supplies like hand sanitizer, disinfectant and cleaning supplies, as well as relevant protective equipment?
- Is there a testing plan for essential workers who are sick or symptomatic?
- Is there a plan for supportive quarantine/isolation for essential workers?

Special Considerations

- Are there industries in the county that deserve special consideration in terms of mitigating the risk of COVID-19 transmission, e.g. agriculture or manufacturing?
- Are there industries in the county that make it more feasible for the county to increase the pace through stage 2, e.g. technology companies or other companies that have a high percentage of workers who can telework?

Community Engagement

- Has the county engage with its cities?
- Which key county stakeholders should be a part of formulating and implementing the proposed variance plan?
- Have virtual community forums been held to solicit input into the variance plan?
- Is community engagement reflective of the racial, ethnic, and linguistic diversity of the community?

Relationship to Surrounding Counties

- Are surrounding counties experiencing increasing, decreasing or stable case rates?
- Are surrounding counties also planning to increase the pace through Stage 2 of California's roadmap to modify the Stay-at-Home order, and if so, on what timeline? How are you coordinating with these counties?
- How will increased regional and state travel impact the county's ability to test, isolate, and contact trace?

In addition to your county's COVID-19 VARIANCE ATTESTATION FORM, please include:

- Letter of support from the County Board of Supervisors
- Letter of support from the local hospitals or health care systems. In the event that the county does not have a hospital or health care system within its jurisdiction, a letter of support from the relevant regional health system(s) is also acceptable.
- County Plan for moving through Stage 2

All documents should be emailed to Jake Hanson at Jake.Hanson@cdph.ca.gov

I _____, hereby attest that I am duly authorized to sign and act on behalf of _____. I certify that _____ has met the readiness criteria outlined by CDPH designed to mitigate the spread of COVID-19 and that the information provided is true, accurate and complete to the best of my knowledge. If a local COVID-19 Containment Plan is submitted for _____, I certify that it was developed with input from the County Board of Supervisors/City Council, hospitals, health systems, and a broad range of stakeholders in the jurisdiction. I acknowledge that I remain responsible for implementing the local COVID-19 Containment Plan and that CDPH, by providing technical guidance, is in no way assuming liability for its contents.

I understand and consent that the California Department of Public Health (CDPH) will post this information on the CDPH website and is public record.

Printed Name _____

Signature Dean M. Kelaita

Position/Title _____

Date _____



CALAVERAS COUNTY

BOARD OF SUPERVISORS

891 Mountain Ranch Road

San Andreas, California 95249

(209) 754-6370

FAX (209) 754-6733

May 12, 2020

Dr. Sonia Y. Angell
State Public Health Officer and
Director of California Department of Public Health
P.O. Box 997377, MS 0500
Sacramento, CA 95965

Dr. Angell,

Per the requirements defined by Dr. Angell in the May 7, 2020, *Variance to Stage 2 of California's Roadmap to Modify the Stay-at-Home Order: Guidance to County Governments*, the Calaveras Board of Supervisors would like to convey support for the variance attestation of the County Public Health Officer, Dr. Dean Kelaita. The County has had 13 cases in the last two months with none active and fortunately zero deaths.

We would also like the Governor and the State to consider the state order of emergency and giving control back to the counties in accordance with state law. Every county has a unique set of circumstances across the state. Calaveras along with many rural counties are unique in that we are geographically, socially distanced to a certain capacity. We do not endure the issues of urban areas.

As the State and Governor have acknowledged, a one size fits all does not fit with the diversity in California, geographically, urban, rural and so on. It is not a loss of life we are currently dealing with in Calaveras County; it is a loss of livelihoods. As with many of our brother and sister counties in the state we believe we can move forward in a more expeditious manner through the different levels of opening in a safe manner mindful of health and livelihood at the same time.

Merita Callaway, Chair

Cc: Calaveras County Board of Supervisors
Dr. Dean Kelaita, County Public Health Officer

Gary Tofanelli
District 1
286-9002

Jack Garamendi
District 2
286-9003

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District 3
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Dennis Mills
District 4
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768 Mountain Ranch Road
San Andreas, CA, 95249
209.754.3521
marktwainmedicalcenter.org

May 8, 2020

Christopher Edgerly
Dean Kelaita, M.D.
Calaveras County Public Health Dept.
891 Mountain Ranch Road
San Andreas, CA 95249

Dear Chris and Dr. Kelaita,

We appreciate all the support and cooperation from County Public Health in this unusual event and remain partnered to provide quality and timely care to the community. Pursuant to a request from the State for assurances on healthcare preparedness, this letter serves as our ongoing commitment to stay ready for consequences of COVID 19 infections. The hospital's Emergency Operations, Surge, and Infectious Illness emergency plans for the hospital and community healthcare clinics are, and will continue to be, in effect until directed otherwise by the State or the County. Our bed availability will remain at a 35% surge capacity and our laboratory will continue to test for and support diagnostic testing for COVID exposures. While the Dignity Health system remains capable of COVID 19 testing any additional support for testing kits and/or additional laboratory services would be appreciated. If you have any questions please feel free to contact me directly.

Respectfully,

A handwritten signature in black ink, appearing to be "Doug Archer", with a long horizontal line extending to the right.

Doug Archer
President, CEO
Mark Twain Medical Center
Doug.Archer@DignityHealth.org
(209) 754-2515



County of Calaveras

County Administrative Office

Albert G. Alt, Ed.D. • County Administrative Officer
Judy Hawkins • Deputy CAO-Human Resources/Risk Mgmt. Division
891 Mountain Ranch Road • San Andreas, CA 95249
209.754.6303 • FAX 209.754.6333 • HR@co.calaveras.ca.us

Date: April 24, 2020

To: All Department Heads

From: Judy Hawkins, Deputy CAO/Director of Human Resources & Risk Management

RE: County Provided Face Coverings for Voluntary Use

Management Objectives and Goals:

Combined with physical distancing and frequent handwashing, face coverings may reduce the risk of infection posed by people who are infected and without symptoms. Calaveras County is providing face coverings to all employees and volunteers.

The County will be providing expired N95 masks which should only be relied on as a barrier and is not intended to be used as full respiratory protection.

Distribution:

Each Department Head, or their designee, will be provided face coverings/masks for their department. Each employee will be provided a face covering/mask with two backups for a total of 3.

Enforcement:

Face coverings may be worn while on County property, in County vehicles or while conducting County business.

To be successful, this new approach will require support from all of us across the County and require the following:

- Strict adherence to extended use/reuse of masks
- Meticulous adherence to hand hygiene
- Proper mask use and hygiene including wearing the mask as directed to cover the mouth and nose
- Strict avoidance of manipulation/touching the mask to reduce the risk of contamination.
- Proper storage of the mask

It will be the responsibility of management to support and encourage voluntary use.

Conservation of PPE:

Calaveras County has an adequate, but not inexhaustible, stock of face coverings/masks for staff and volunteers.

In an effort to maintain the supply, conservation of masks is essential. We have no way to predict how long this pandemic will affect us. In an effort to ensure face covering/masks continue to be available, we need to make all efforts to conserve our supply. Soiled, saturated, or torn face covering/masks should be disposed of as routine trash.

Distribution of Face Coverings/Masks:

4/27/20 thru 5/1/20 - Face coverings/masks will be delivered to all departments and off-site locations. A box will be delivered outside of each department and the department will receive notification of the delivery. Risk Management will provide a delivery schedule so departments will know when to expect their face coverings/masks.

Colleen Rodriguez

From: Judy Hawkins
Sent: Tuesday, March 10, 2020 3:40 PM
To: CCGALL
Subject: Employee Information Regarding COVID-19 (Coronavirus)

Dear County Employees:

As we see what is happening with COVID-19 in California and nationally, the public risk remains relatively low in Calaveras County. It is also important to be aware that in addition to concerns about COVID-19, flu season is also at its peak. For these reasons, I must emphasize to all employees that if you are feeling flu like symptoms or symptoms associated with COVID-19, you should follow the CDC's guidelines and stay home from work to self-monitor your symptoms. If you feel that you have been exposed to COVID-19, you are urgently asked to call the Calaveras County Public Health hotline at 1-800-754-8889. The County is following the lead of the Public Health Department and we urge all employee's and members of the public to go to the Calaveras County Public Health website to get the most up to date information on COVID-19:

<https://publichealth.calaverasgov.us/Novel-Coronavirus>.

As a reminder, we advise County employees to take the following steps to protect themselves and their families from infection:

1. Take preventive measures such as frequent hand washing with soap and water for at least 20 seconds or use an alcohol-based sanitizer.
2. Cover your coughs and sneezes, avoid touching your face.
3. Stay home if you are sick. Employees may use any accrued leave available, once sick leave has been exhausted, should they need to stay home due to illness. This includes Probationary employees within their first 6 months of employment.
4. Get your flu shot to protect against flu or symptoms similar to COVID-19.
5. If you feel sick, please call your primary care physician or use an online service such as **Live Health Online** ([Click to go to website](#)), the cost is the same as a doctor office co-pay. You do not have to be enrolled in the County's Healthcare program to use Live Health Online, the average co-pay is \$49 for non-members.

The Human Resources Department has also added a page on their Employee Resources Tab, found on the County website, which has information provided by Anthem BlueCross on frequently asked questions. Please [Click Here](#) to review the information.

As a County organization we will continue working together to assure we are taking all necessary steps to be prepared.

Sincerely,

Judy Hawkins

Deputy CAO/Risk & Human Resources Director
County of Calaveras

891 Mountain Ranch Road
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(209) 754-6303
(209) 754-6333 Fax

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County of Calaveras

County Administrative Office

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Judy Hawkins • Deputy CAO-Human Resources/Risk Mgmt. Division
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MEMO

DATE: April 6, 2020
TO: Department Heads
FROM: Judy Hawkins, Deputy CAO/Director, Human Resources & Risk Mgmt. 
RE: Employee Symptomatic at Work

Colleagues,

This memo outlines what to do if an employee shows up to work coughing and has sniffles which can be symptoms of COVID-19 at work. You need to ensure that you are consistent in how you handle each situation.

Symptoms of COVID-19 are fever, cough or shortness of breath. If an employee shows up at work with symptoms or develops these symptoms during the work day they can be sent home and can use any accrued leaves or advanced sick leave. In more serious cases where the employee becomes under the care of a doctor, emergency paid sick leave and FMLA (SDI) will be available to the employee.

If the employee is off work due to symptoms of COVID-19, they should not return until they have been fever free for 3 days (72 hours without fever reducing medications) AND show an improvement in respiratory symptoms AND at least 7 days have passed since the onset of symptoms. An employee may self certify that they are symptom free. If the symptoms are mild and the employee can work from home then that may be the best option for 7 days. If the employee had tested positive for COVID-19, they must have a doctor's release to return to work after 14 days has passed from the date of the positive test result.

Please make sure that you are coordinating with Human Resources so we can make sure that the employee receives the appropriate leave paperwork. You can email Human Resources at HumanResources@co.calaveras.ca.us or call 754-6303 (option #2).