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



COVID-19 COUNTY VARIANCE ATTESTATION FORM

FOR County of Modoc

## **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 <a href="mailto:Jake.Hanson@cdph.ca.gov">Jake.Hanson@cdph.ca.gov</a> to set up a time with our technical assistance team.

County Name: Modoc County

County Contact: Dr. Edward P. Richert MD/ Stacy Sphar, DNP

Public Phone Number: (530) 233-6311

## **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 reinstituting 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.

Modoc County remains at ZERO confirmed cases. Modoc County has a total population of 8841	

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

There have been no deaths related to COVID-19 in Modoc County at this time.

- 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).

Modoc County continues to provide guidance to all businesses and employers, and to include all public and private entities through our Emergency Operations Center (EOC) contact list, Co-operators meetings, County Administration, and the Modoc County Sheriff web site. We have messaged out to Modoc County essential service entities on how to obtain assistance from the EOC when necessary for accessing personal protective equipment (PPE) or other health related supplies. Modoc County Public Health has provided guidance to all citizens on the procedures for quarantine/isolation and the circumstances when these measures are appropriate. There are resources in place to support quarantined individuals to meet their essential needs. We have a program for non-congregate sheltering in place to serve ill workers that lack the ability to shelter at home. We are continuously searching and distributing new guidance for employers as it becomes available.

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

Modoc County has procured disinfectant and other essential protective gear to protect essential workers. This is made available to workers by contacting our COVID-19 hotline or emailing mhoac@modocics.org

Availability of PPE has been and will continue to be assessed by assessing the number of completed and valid resource requests for PPE received by the Medical and Health Operational Coordinator (MHOAC) each week. The MHOAC will maintain a contact list of vendors and frequently check the status of product availability for cleaning, disinfecting products, gloves, gowns, surgical masks, hand sanitizer, and N95 respirators.

- **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.

Modoc County has current testing capacity ratio of 1:1 (one test per one resident). Local testing sites have the capacity to perform >50 per day. Modoc County also has a surge plan for Public Health and EMS for drive through testing utilizing practiced mass immunization methodology.

Testing will be met through targeted surveillance of individuals utilizing State recommended tiered criteria.

The county's average daily testing for the past week utilizing state criteria is 3 per day. To date, the county has tested over 1% of the population.

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.

Everywhere in Modoc County is within 1 hour driving distance to a testing center. Testing sites are as follows:

Ft. Bidwell - Warner Mt. Indian Health

Alturas - Modoc Medical Center

Cedarville - Surprise Valley Hospital

Klamath Falls - Sky Lakes Medical Center

Fall River - Mayers Memorial Hospital

- 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.

Modoc County currently has the following trained workforce in place:

- -Primary Contact Tracers- 7 staff members.
- -Secondary Contact Tracers- 8 trained in reserve.

The county will utilize our regional Joint EPI Response Plan (JERP) through Shasta County Public Health. This plan outlines contact tracing criteria utilizing local trained staff and contracted epidemiologist via Shasta lab. Modoc County has 10 times the required workforce required for contact tracing which demonstrates sufficiency for 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.

Modoc County participates in the Project Room Key and has secured rooms at our local hotel for non-congregate housing of our homeless population. Our 2019 point-in-time count was 5. We are able to meet this capacity with the availability of our temporary housing program and wrap around services.

- 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.

There are two hospitals in Modoc County but only one will handle a surge of COVID-19 patients. Modoc Medical Center has a scalable surge plan that includes a pre-established area designated for COVID-19 suspect or positive patients. These plans include using two-halls in the hospital for private patient rooms for potential or confirmed COVID-19 patients, employing up to 2 surge tents using a 3 tiered surge plan to provide additional bed capacity. A Field Medical Station is located in Shasta County that is a resource for Region III as well

Modoc Medical Center: Licensed Bed Capacity: 16/ Surge Capacity 33
Surprise Valley Medical Center: Licensed Bed Capacity: 2/ Surge Capacity 0 due to staffing restrictions and increased risk to SNF due to being located within the hospital.

 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.

Each hospital in Modoc County has procurement staff that works to source PPE needs to protect their workforce. The resource request process through the Modoc County MHOAC is in place and utilized if they are unable to locate the necessary PPE. Assessment of hospital PPE needs is accomplished through this MHOAC system as hospital staff notifies the local MHOAC if they need help locating and acquiring specific items. If the MHOAC is unable to locate the PPE locally or regionally, they then submit a resource request to the State in order to fill the need. Additionally, Public Health staff maintain a list of vendors and check status of products.

- 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:
  - o 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..

Our two Skilled nursing facilities (SNF) in Modoc County, have >14 day supply of PPE on hand for staff, with established process for ongoing procurement from non-state supply chains. Assessment of PPE is done at weekly check-ins with Public Health and our hospitals/SNFs. After the SNFs exhaust their normal channels of PPE, Modoc County cache of PPE supplies can be utilized through resource requests to the MHOAC.

 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.

Due to the rural setting and extremely low population density in Modoc County we lack many of the non-essential industries identified in Stage 2. The vast majority of businesses in Modoc are diversified to the extent that they meet essential service criteria to be open in Stage 1. The county will support efforts of school re-openings and educational activities such as 4-H and FFA in collaboration with the Health Officer. Modoc will immediately permit the opening of all sectors and spaces detailed in Stage 2 and will continue to use the State's Resilience Roadmap Guidance for support and information distribution to applicable entities. Permitted food facilities that hold a 41 or 47 license from ABC shall be permitted to operate in stage 2 in conjunction with restaurant operations. Facilities that serve alcohol and do not operate in conjunction with a permitted food facility operation shall wait until 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.

Example triggers for Modoc that could lead to slowing movement through stage 2 would be reaching local hospital surge capacity, PPE shortage for essential workers, or the inability to meet attestation readiness criteria identified in this document.

Any efforts in tightening or re-instituting business or activity restrictions would be supported by information obtained in local contact tracing. The county will inform the state of emerging concerns through the local Health Officer contacting the appropriate staff at CDPH. No other matrix for developing triggers have been developed at this time due to no positive cases.

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 <u>California Coronavirus (COVID-19) Response County variance web page</u>

Modoc County will immediately open to the full extent of Stage 2 due to the limited number of businesses and activities that exists in this stage. Modoc County will utilize the State and Federal guidance in educating the different sectors via the EOC as they are moving through Stage 2.

## **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?

CDPH	COVID-19 VARIANCE ATTESTATION FORM
Conto	act 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?
	×
Prote	cting the Vulnerable
	ow many congregate care facilities, of what types, are in the county?
Ho	ow many correctional facilities, of what size, are in the county?
	ow many homelessness shelters are in the county and what is their capacity? hat is the COVID-19 case rate at each of these facilities?
	o facilities have the ability to safely isolate COVID-19 positive individuals? To facilities have the ability to safety quarantine individuals who have been exposed?
ls '	there sufficient testing capacity to conduct a thorough outbreak investigation at each these facilities?
• Do	long-term care facilities have sufficient PPE for staff, and do these facilities have access
• Do	suppliers for ongoing PPE needs?  these facilities (particularly skilled nursing facilities) have access to staffing agencies if a 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?

	#	
30		

## **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?

-			
1			
1			
1			
4			
1			
1			
1			
1			
1			
1			
1			
1			
1			
4			
1			
1			
1			
1			
1			
1			
1			
1			

## 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 <u>Jake.Hanson@cdph.ca.gov</u>

I Or. hereby attest that I am duly authorized to sign and act on behalf of which 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 mc, 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 Edward P. Richert, mD

Signature Position/Title modoc County Health officer

NED COE 1<sup>st</sup> District

PATRICIA CULLINS 2<sup>nd</sup> District

KATHIE RHOADS 3rd District

ELIZABETH CAVASSO 4th District

> GERI BYRNE 5th District



TIFFANY MARTINEZ CLERK OF THE BOARD OF SUPERVISORS

204 S. COURT STREET ALTURAS, CALIFORNIA 96101

> (530) 233-6201 FAX (530) 233-2434

May 14, 2020

Jake Hanson
California Department of Public Health
Jake.hanson@cdph.ca.gov
P.O. Box 997377, MS 0500
Sacramento, CA 95899-7377

Re: Modoc County's Request for Variance Stage 2 of California's Roadmap to Modify the Stay-At-Home Order

Dear Mr. Hanson:

In accordance with Governor Newsom's Executive Order N-60-20 and the May 7, 2020 guidance issued by the California Department of Public Health, the Modoc County Board of Supervisors submits the following letter of support.

Upon the Board of Supervisors consulting with the Modoc County Health Officer, Dr. Richert and the Interim Director of Health Services, Stacy Sphar, the Modoc County Board of Supervisors has been updated on the efforts that have been and will be taken to mitigate the spread of COVID-19.

Due to this informative consultation, the Modoc County Board of Supervisors provides this letter of support for the written attestation submitted by Dr. Richert, Modoc County Health Officer, to the California Department of Public Health. The Board of Supervisors feels that the County has met the readiness criteria outlined by the California Department of Public Health to increase the pace at which the County advances through Stage 2 of the Governor's Pandemic Roadmap. The Board of Supervisors supports the reopening of businesses and spaces in the County in the most expeditious manner possible, consistent with protection of the public and essential workers and in alignment with the State.

Sincerely,

Elizabeth Cavasso, Chair

Elizabeth Cavasa

Modoc County Board of Supervisors



May 12, 2020

Chief Executive Officer Kevin Kramer

#### **Board Members**

Jim Cavasso Chair

Richard Steyer Vice Chair

Stacey Todd Secretary

Carol Madison Treasurer

> De Funk Member

Contact Information

District 228 W. McDowell Avenue Alturas, CA 96101 (530) 233-7022

Hospital

228 W. McDowell Avenue Alturas, CA 96101 (530) 233-5131

#### Clinic

229 W. McDowell Avenue Alturas, CA 96101 (530) 233-7052

Warnerview SNF 225 W. McDowell Avenue

Alturas CA 96101 (530) 233-7066

Physical Therapy

120 S. Main Street, Suite A Alturas, CA 96101 (530) 233-7054

**Medical Staff** 

228 W. McDowell Avenue Alturas, CA 96101 (530) 233-5131 ext. 1412

**Last Frontier Pharmacy** 

120 S. Main Street, Suite B Alturas, CA 96101 (530) 233-4884

www.modocmedicalcenter.org

Stacy Sphar Modoc County Health Services 441 North Main Street Alturas, CA 96101

RE: Letter of Support to Move to Stage 2 Reopening

Dear Stacy:

This letter is being written to document our support for moving to Stage 2 of reopening Modoc County. We have reviewed All Facilities Letter (AFL)-17 from the California Department of Public Health (CDPH) to the County Government, which speaks to the requirements that must be met prior to moving through Stage 2 of reopening the County. This letter will address the components of that guidance that directly apply to our organization.

## **Testing Capacity**

AFL-17 specifies that we should have testing availability for at least 75 percent of the residents of Modoc County within a 60-minute drive. Our facility currently has approximately 600 UTMs and swabs, with additional UTMs available from County Health Services as well. The hospital in Cedarville, California also has some testing media. In addition to the testing media that is available within the County, we know of surrounding areas that are also offering testing that would be within a 60-minute drive for much of our County, including facilities in Klamath Falls, Oregon; Fall River Mills, California; and Susanville, California. We are not certain how many UTMs are available and on hand at each of these locations. At Modoc Medical Center (MMC), we are attempting to procure testing supplies for our BioFire PCR Instrument so that we can improve the turnaround time and availability of testing in the County. The reagents for this machine are not available at this time and the manufacturer is telling us we may not be able to begin procuring these supplies until the end of May or middle of June.

AFL-17 also specifies that we should be testing at a daily rate of 1.5 per 1,000 residents in the County. We have recently expanded our testing protocol at our facility to include testing of some asymptomatic staff members and inmates. Over the last seven days, we have tested 17 people for COVID-19 at our facility. I do not believe that the County is testing at the recommended rate referenced above, however at this time we are testing all symptomatic people in the community. We are also testing asymptomatic inmates, Skilled Nursing Facility traveling staff and asymptomatic patients receiving surgery. We feel that this testing protocol will allow us to identify COVID-19 in the community quickly so that contact tracing can be conducted within a reasonable amount of time and the potential spread of COVID-19 in the County can be minimized. We are also considering implementation of drive-through testing within the community over the next couple of weeks to increase our testing volumes in the County. We believe we may be able to hit this threshold if we implement that testing strategy.

Stacey Sphar May 12, 2020 Page 2

## **Hospital Capacity**

AFL-17 recommends that we be able to care for a surge of 35 percent above our capacity to care for regular inpatients. Our Surge Plan would allow us to care for up to ten confirmed COVID-19 patients in our facility and an additional 23 outside if we needed to utilize exterior tents in a surge situation. We have the infrastructure, oxygen, etc. ready to go to support this Surge Plan. Our typical census in the hospital averages approximately four patients per day. We, therefore, exceed the recommendation of CDPH in AFL-17 regarding caring for potential or confirmed COVID-19 patients during a surge.

AFL-17 also requires for hospital facilities to have a robust plan to protect the hospital workforce with Personal Protective Equipment (PPE). We have an adopted PPE Plan for our organization that has been in place for some time. We feel it allows us to adequately protect our staff from potential exposure to COVID-19. It also utilizes screening and mask wearing requirements for patients to help reduce the potential of spread in our facilities.

AFL-17 requires that we have greater than a 14-day supply of PPE for our Skilled Nursing Facility staff. We do have this on hand and have also instituted a Reopen Plan that requires us to keep a minimum amount of PPE on hand in case of a future surge, which will allow us to keep sufficient PPE available for our Skilled Nursing Facility.

## **Acute Care Surge**

AFL-17 also encourages us to have some items in place related to caring for patients in hospitals. Those items are related to reporting hospital capacity, being self-sufficient for PPE needs, testing all hospital inpatients and tracking and responding to occupational exposure. We are reporting our hospital capacity, census, ICU beds, ventilator availability, staffing and surge capacity daily. We have only relied upon the Medical Health Operational Area Coordinator (MHOAC) for certain PPE during this incident. We currently have an adequate stock of masks, gloves, goggles, gowns, and other PPE and feel that we can be self-sufficient with PPE moving forward, dependent upon supply and demand of PPE items, which has been unpredictable throughout this pandemic. PPE inventory levels are updated on a weekly basis and monitored to ensure an adequate supply remains available to our organization. We have also moved outside of our normal supply chain to acquire this PPE at higher levels. Our new testing protocols include testing of all hospital inpatients, which we are currently doing. We also do have employee health protocols that would dictate how we respond to occupational exposures.

Overall, we feel that we have plans in place that would allow us to support moving to Stage 2 of reopening the County. We have a little work to do to try to meet the testing parameters that CDPH has recommended and will try to approach this differently moving forward in order to increase testing in our community. Outside of that one concern, we feel we can meet the recommendations outlined by CDPH in AFL-17, that strictly apply to our organization, as outlined above. Please let me know if you have any further questions. You can reach me by phone at 530-233-5883 or by email at k.kramer@modocmedicalcenter.org. Thank you.

Regards,

We m

Kevin Kramer Chief Executive Officer Modoc Medical Center



May 13, 2020

Stacy Sphar Interim Health Services Director Modoc County Health Services 441 N. Main Street Alturas Ca. 96101

Re: Support for Modoc County's Request for Variance to Move to Stage 2 of COVID 19 Roadmap

Surprise Valley Health Care District (SVHCD), which operates Surprise Valley Community Hospital (SVCH) in Cedarville Ca. supports Modoc County's request for Local Variance to increase the pace at which it advances through Stage 2.

Modoc County has met the criteria and continues to develop procedures that counties need to move more quickly than other parts of the state through Stage 2 of the State Public health Officer's Stay-at-Home order. Of particular importance to SVHCD relative to readiness criteria are: Testing Capacity, Containment Capacity, Hospital Capacity, Vulnerable Populations, and Triggers for Adjusting Modifications.

## **Testing Capacity**

SVCH currently tests primarily patients who present to the Clinic and ER that are symptomatic for COVID 19. We have prophylactically tested four of our skilled nursing residents over the last month. SVCH has performed 23 tests to date; we currently have 40 tests in inventory. Our medical staff would like county wide testing for asymptomatic residents that meets and exceeds 1.5 per 1000 residents. Such testing would need to be facilitated by County Health Services as SVCH testing resources are limited. Medical Staff realizes the challenges of providing community testing given the nation-wide shortage of tests: however, recent reports from CDPH regarding increased availability are encouraging, and hopefully a community testing plan can be developed by Modoc County Public Health.

## Containment Capacity

Modoc County Public Health has done an excellent job developing containment procedures and criteria even though there has been no confirmed case of COVID 19 in the county to date.

## **Hospital Capacity**

Surprise Valley Community Hospital *does* have a plan to address a surge in suspected and confirmed COVID 19 cases; however, our plan does not include an on-campus area for suspected or positive patients. Our current and active protocol is to triage and test patients who present with signs and symptoms prior to entering the ER or Clinic. Patients with mild symptoms are triaged home to await testing results. Patients with low acuity and whose SPo2 is <92% with co-morbid factors, and who

require care exceeding home isolation resources will be transferred to a regional Alternate Care Site (ACS) if they meet ACS admission criteria. Patients with low acuity without co-morbid factors are triaged home and monitored by our providers, usually by phone contact. Patients with high acuity or are at high risk for rapid onset of complications are tested and transported to an acute higher level of care receiving facility equipped to handle seriously ill or rapidly deteriorating conditions. Skilled Nursing residents who may be symptomatic are isolated in their own rooms pending testing unless they meet the SPo2 <92% threshold described above, then they are considered for transport to an ACS, or to higher level of acute care. SVCH does not intend to burden the resources of Modoc Medical Center regarding the disposition of our patients.

There are no ICU beds, Respiratory Therapists or other Specialists and few ventilators required to treat acutely ill COVID patients in Modoc County. It is our Medical Staff's opinion that to keep acutely ill patients who are sick enough to be hospitalized will only result in the most dismal outcomes for the patient, and will severely compromise the health and well-being of our SNF patients and our staff.

# Vulnerable Populations

SVHCD operates a Distinct Part Skilled Nursing Facility (SNF) located within the main hospital building. Protecting our SNF residents is our top priority. We have suspended all visitation to the SNF, Acute, and ER areas. All hospital and clinic staff, including administrative and ancillary personnel are screened daily prior to beginning work, as well as essential delivery or maintenance technicians who must enter the patient care areas. Any local, state or federal staff who must have contact with our residents are also screened and are limited to individual contact with the resident.

SVCH has sufficient PPE that surpasses the 14-day supply requirements. Modoc County Public Health has immediately responded to any resource request we have made. We maintain a daily inventory of PPE and report our status via the CHA reporting site and CDPH SNF survey.

## **Triggers for Adjusting Modifications**

In addition to the trigger points that Modoc County has cited in the Attestation form, SVHCD hopes that the county will include provisions to slow Stage 2 progress if the population demonstrates excessive behaviors that may increase the chances of a surge of COVID 19 patients.

Modoc County has been, because of its rural location, fortunate to have been lightly impacted by the COVID 19 pandemic. Its rural location also poses many unique challenges to maintain our equally unique position of being, to date, one of three counties that remain COVID free. Through diligence, inter agency cooperation and community awareness that relaxed shelter in place practices must be responsibly applied, the County will continue to remain COVID 19 safe.

Sincerely

William Bostic

Interim Administrator

Surprise Valley Health Care District

l about