

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

CDPH COVID-19 VARIANCE ATTESTATION FORM

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  _____

Position/Title _____

Date _____

Sierra County Phased Opening Plan

Sierra County has established a phased plan for reopening during COVID-19. The local plan is based on California's Pandemic Roadmap and is subject to change based on the Governor's orders. This is a phased plan that will allow a slow and steady pace to return our community to normal operations. The phased plan is necessary to continue to limit the spread of COVID-19 disease until we have developed wide spread immunity. This Plan also allows for targeted mitigation measures, as well as the regression to a prior phase should a spike in community transmission of COVID-19 occur. This plan is a living document that will align with the local and state Public Health Officer's orders. As new findings and recommendations are developed at the Federal, State and Local level this document shall evolve to provide guidance to communities throughout Sierra County.

Community support and personal responsibility is critical for this Plan to work. We ask that each resident of Sierra County make informed decisions to keep yourself and your family healthy throughout the duration of this pandemic.

Stage 1: Businesses in Stage I are the current essential workers and businesses laid out in the Governors Executive Order of March 19, 2020

Stage 2:

Individuals:

- **Anyone who is feeling ill should stay home**
- **Continue social distancing** – When in public maintain at least **6** feet from others.
- **Maintain good hygiene practices** – Washing hands, use hand sanitizer, cleaning frequently touched surfaces, covering coughs & sneezes.
- **Face covering-** required to wear a face covering in public, when social distancing is not possible and when in places of business.
- **Public Settings**
 - Require that a business would expect all patrons to comply and place adequate signage stating this demand.
 - Require all employees of a business wear a face covering.
 - Make sure you carry hand sanitizer and look for hand sanitizer offered at place of business to use on your way in and out of the door.
- **Vulnerable (high risk) individuals** – those over the age of 65 and individuals with pre-existing health conditions, are encouraged to stay at home. Households with vulnerable members should be aware that other members of the household may increase risk of transmission if resuming normal activities. Precautions should be taken to protect the vulnerable household members.

- **Non-essential travel is discouraged**
- **Residents are encouraged to participate in outdoor activities close to their home daily.**
- **Outdoor recreation may open.**
 - Physical distancing should be promoted and maintained.
 - If equipment is provided it should be cleaned after use.
- **Check with your Healthcare provider and dentist for updated services offered.**

Work & Business:

- **Returning employees to work and business should be phased in and not all at once, provide appropriate physical distancing measures, and ensure sick employees do not come to work. Please refer to OSHA guidelines: <https://dir.ca.gov/dosh/coronavirus/Health-Care-General-Industry.html>**

Changes from Stage 1:

- **Businesses such as offices, retail stores, logistics, manufacturing, landscapers, pet groomers, outdoor museums may open with a Public Health approved plan.**
 - **Owners and operators are encouraged to limit the number of staff and customers in the building at a given time.**
 - Optimally less than 6 people in a small store or office. Social distancing of at least 6 feet must be maintained if possible.
 - Ensure sick employees remain at home or go home immediately if they become ill at work.
 - Meeting rooms, break rooms and other common areas should remain closed or be limited in capacity to provide physical distancing of at least 6 feet between employees.
 - Protection and accommodations should be provided to employees who are high risk for COVID-19.
 - Consider staggering work schedules to decrease exposure. Continue encouraging telecommuting if possible.
 - Provide posted signage educating the public what is expected inside and outside the business including social distancing, face coverings and rescheduling their visit if they are sick.
 - Mark with visuals where employees and customers should be standing.
 - If not able to maintain 6 feet distancing employees and customers **MUST** wear face coverings.

- Provide as many services as feasible with limited contact for example:
 - Online orders with in store pickup
 - Limiting number of customers in a lobby or waiting area
 - Staggering appointments
- Clean frequently touched surfaces with appropriate disinfectant.
- Provide for frequent hand washing and/or make hand sanitizer readily available to both employees and customers.
- **Restaurants may open for limited dine in options.**
 - Provide posted signage educating the public what is expected inside and outside the business including social distancing, face coverings and rescheduling their visit if they are sick.
 - Mark with visuals where employees and customers should be standing.
 - Tables must allow for appropriate physical distancing of **6** feet.
 - No more than half capacity should be reached.
 - Take out options should continue to be promoted.
 - Clean frequently touched surfaces with appropriate disinfectant.
 - Provide for frequent hand washing and/or hand sanitizer readily available to both employees and customers.

What should remain closed:

- Hair salons, nail salons, barbers and massage therapists
- Short term rentals and lodging
- Bars
- Hot springs and pools
- Organized youth sports
- Organized Camps
- Churches, synagogues, mosques, temples
- Skilled nursing facilities should be closed to non-essential visitors.

The Medical Health Operational Area Coordination Team (MHOAC) will daily evaluate and monitor:

- Local and regional data (cases, hospitalizations, EMS capability) monitored daily. Region III bed polling reviewed daily.
- Local healthcare facilities will continue to provide weekly situation reports
- Local and regional testing and trends will be monitored daily
- Case investigation and contact tracing will be conducted
- Coroner reports will be reviewed

Should an increase in illness occur, targeted mitigation measures will be employed as determined by the MHOAC Team. This could include one or more of the following:

- Contact CDPH COVID Hotline which is available 24/7 at (510)255-8922
- Increased monitoring of exposed contacts
- Stricter quarantine of contacts
- Increased recommended use of PPE
- Recommended reduction in worksite staff
- Sanitation of a specific facility
- Closure or partial closure of a specific facility
- Recommended reduction in social gatherings
- **Should the number of positive COVID cases increase to 3 cases, the public will be asked to return to stricter protocols and Stage 2 would be delayed.**
- **Should no significant increase in cases occur over a period of at least 30 days; then we will consider advancing into Stage 3 ONLY with California Department of Public Health approval.**

Stage 3

Changes from Stage 2:

- **Businesses such as bars, hair salons, nail salons, barbers, massage therapists, may open with a Public Health approved plan.**
 - **Owners and operators are encouraged to limit the number of staff and customers in the building at a given time.**
 - Social distancing of at least 6 feet must be maintained if possible.
 - For example, a salon has 3 chairs or booths, consider opening only 1 at one time to allow for physical distancing.
 - Ensure sick employees remain at home or go home immediately if they become ill at work.
 - Meeting rooms, break rooms and other common areas should remain closed or be limited in capacity to provide physical distancing of at least 6 feet between employees.
 - Protection and accommodations should be provided to employees who are high risk for COVID-19.
 - Consider staggering work schedules to decrease exposure. Continue encouraging telecommuting if possible.

- Provide posted signage educating the public what is expected inside and outside the business including social distancing, face coverings and rescheduling their visit if they are sick.
- Mark with visuals where employees and customers should be standing.
- If not able to maintain 6 feet distancing employees and customers **MUST** wear face coverings.
- Provide as many services as feasible with limited contact for example:
 - Limiting number of customers in a lobby or waiting area
 - Staggering appointments
- Clean frequently touched surfaces with appropriate disinfectant.
- Provide for frequent hand washing and/or hand sanitizer readily available to both employees and customers.

** Licensed providers such as cosmetology, dental, medical etc. should refer to State Licensing Board and National Associations for guidelines, provisions, and requirements related to their particular profession.*

- **Lodging and short term rentals may open.**

- Provide posted signage educating the public what is expected inside and outside the business including social distancing, face coverings and rescheduling their visit if they are sick.
- Mark with visuals where employees and customers should be standing.
- Clean frequently touched surfaces with appropriate disinfectant.
- Provide for frequent hand washing and/or hand sanitizer readily available to both employees and customers.

- **Travel may resume**

- **Bars may open** maintaining at least **6** feet from others, diminished occupancy and cleaning frequently touched surfaces.

- **Congregate settings may open** with appropriate physical distancing & hygiene protocols:

- Hot Springs and Pools
- Camps
- Organized youth activities including sports
- Churches, synagogues, mosques, temples
- Weddings
- Funerals

The Medical Health Operational Area Coordination Team (MHOAC) will daily evaluate and monitor:

- Local and regional data (cases, hospitalizations, EMS capability) monitored daily. Region III bed polling reviewed daily.
- Local healthcare facilities will continue to provide weekly situation reports
- Local and regional testing and trends will be monitored daily
- Case investigation and contact tracing will be conducted
- Coroner reports will be reviewed

Should an increase in illness occur, targeted mitigation measures will be employed as determined by the MHOAC Team. This could include one or more of the following:

- Contact CDPH COVID Hotline which is available 24/7 at (510)255-8922
 - Increased monitoring of exposed contacts
 - Stricter quarantine of contacts
 - Increased recommended use of PPE
 - Recommended reduction in worksite staff
 - Sanitation of a specific facility
 - Closure or partial closure of a specific facility
 - Recommended reduction in social gatherings
 - Closure or partial closure of congregate settings
 - Return to takeout only options for restaurants
 - Cancellation of non-essential travel
- **Should the increase in community spread of illness be significant, the public will be asked to return to stricter protocols and Stage 3 would be delayed.**
 - **Should no significant increase in cases occur over a period of 30 days, then we will enter Stage 4 ONLY with California Department of Public Health approval.**

Stage 4

Changes from Stage 3:

- **All businesses may resume normal business and capacities.**
- **Skilled nursing facilities can resume normal visitation procedures.**
- **Physical distancing restrictions and face coverings removed.**

Should an increase in illness occur, targeted mitigation measures will be employed as determined by the MHOAC Team. This could include one or more of the following:

- Increased monitoring of exposed contacts
- Stricter quarantine of contacts
- Increased recommended use of PPE
- Recommended reduction in worksite staff
- Sanitation of a specific facility
- Closure or partial closure of a specific facility
- Recommended reduction in social gatherings
- Closure or partial closure of congregate settings
- Return to takeout only options for restaurants
- Cancellation of non-essential travel
- **Should the increase in community spread of illness be significant, the public will be asked to return to stricter protocols and stage 4 will be delayed.**

DRAFT

Sierra County Resilience Roadmap

Below is the list of business activities/sectors that fall within and outside Stage 2. The goal is to open the state as safely as possible which includes 1) limiting movement across the state especially within jurisdictions with higher confirmed cases and 2) delaying opening of environments in which there is prolonged close contact with people from across geographic areas.

Stage 2	Not Permitted in Stage 2
<p><i>Early Stage 2 Opening (Whole State)</i> <i>May 8, 2020</i></p> <ul style="list-style-type: none"> • Curb-side Retail • Manufacturers • Logistics 	<ul style="list-style-type: none"> • Personal services such as nail salons, tattoo parlors, gyms and fitness studios
<p><i>Expanded Stage 2 with Attestation (Variance)</i> <i>May 15, 2020</i></p> <ul style="list-style-type: none"> • Destination retail, including shopping malls and swap meets. 	<ul style="list-style-type: none"> • Hospitality services, such as bars, wineries, tasting rooms and lounges
<ul style="list-style-type: none"> • Personal services, limited to: car washes, pet grooming, tanning facilities, and landscape gardening. 	<ul style="list-style-type: none"> • Entertainment venues with limited capacities, such as movie theaters, gaming facilities, and pro sports
<ul style="list-style-type: none"> • Office-based businesses (telework remains strongly encouraged) 	<ul style="list-style-type: none"> • Indoor museums, kids museums and gallery spaces, zoos and libraries
<ul style="list-style-type: none"> • Outdoor museums and open gallery spaces 	<ul style="list-style-type: none"> • Community centers, including public pools, playgrounds, and picnic areas
<ul style="list-style-type: none"> • Childcare for non-essential workers 	<ul style="list-style-type: none"> • Limited-capacity religious services and cultural ceremonies
	<ul style="list-style-type: none"> • Nightclubs
	<ul style="list-style-type: none"> • Concert venues
	<ul style="list-style-type: none"> • Live audience sports
<p><i>Expanded Stage 2 with Attestation (Variance)</i> <i>May 20, 2020</i></p>	<ul style="list-style-type: none"> • Festivals
<ul style="list-style-type: none"> • Dine-in restaurants (other amenities, like bars or gaming areas, are not permitted) 	<ul style="list-style-type: none"> • Theme parks
	<ul style="list-style-type: none"> • Hotels/lodging for leisure and tourism – non-essential travel
	<ul style="list-style-type: none"> • Higher Education



May 8, 2020

Dr. Sonia Y. Angell
PO Box 997377
MS 0500
Sacramento, CA 95899-7377

Re: Sierra County COVID-19 Reopening Plan Attestation – Hospital Capacity Requirement

Dr. Sonia Y. Angell,

Sierra County is a frontier county located within California Medical/Health Mutual Aid Region 3. The county is comprised of approximately 3000 residents and does not have a hospital. As a result, Sierra County citizens/visitors receive hospital care from surrounding jurisdictions (primarily Nevada and Plumas counties). Sierra County participates in a Tri-County Health Care Coalition (Tri-HCC) with Plumas and Lassen Counties. Four (4) hospitals are part of the Tri-County Health Care Coalition; three (3) in Plumas and one (1) in Lassen.

Region 3 RDMHC/S and Nevada County through shared MHOAC Program roles, are continually monitoring hospital utilization and surge capacities in Plumas, Lassen and Nevada counties. As of the date of this letter, there are no COVID-19 positive patients currently admitted to any of the six (6) hospitals in Nevada, Plumas or Lassen counties. Further, the most recent hospital polling for these three counties, conducted on May 7, 2020, indicates capacity well beyond 35% Surge.

The current regional hospital data indicates that adequate capacity exists for Sierra County residents/visitors (both COVID-19 and non-COVID-19 patients) in the event of an unexpected patient surge event. Further, there is significant additional hospital capacity throughout the remaining Region 3 Medical/Health Mutual Aid Region counties at this time (including approximately 500 available ICU and medical/surgical hospital beds as of May 7, 2020).

Finally, we have verified all of the acute care hospitals in the Tri-County Health Care Coalition; Banner Lassen Medical Center, Seneca Healthcare District, Plumas District Hospital and Eastern Plumas Health Care, have robust plans in place to protect the hospital workforce, both clinical and nonclinical, with appropriate PPE. Plans are assessed via situational status reporting to/from the applicable MHOAC programs within each County, as well as ongoing hospital polling (which includes PPE availability).

Sincerely,

A handwritten signature in blue ink, appearing to read 'Lori Beatley', with a long, sweeping flourish extending to the right.

Lori Beatley
Lead HPP Coordinator
Tri-County Health Care Coalition
Plumas, Lassen and Sierra County

SIERRA COUNTY

Board of Supervisors
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Downieville, California 95936
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May 11, 2020

California Department of
Public Health
Dr. Sonia Angell

Re: Support for Sierra County Plan and Attestation Statements

Dear Dr. Angell,

On May 5, 2020 the Sierra County Board of Supervisors met with Sierra County's Public Health Officer and Department Head to review and discuss the enclosed Sierra County Phased Opening Plan. We have been educated on the contents of the enclosed Attestation to our readiness to activate California's Resilience Roadmap Expanded Stage 2. This Attestation outlines the business sectors that can begin the road to economic recovery.

The Sierra County Board of Supervisors has approved the Sierra County Phased in Opening Plan in a cooperative effort with our Public Health Department and Health Officer. It is our understanding this plan is a living document that will require regular updates that will address necessary changes to deal with COVID-19 containment and align with Governor Newsom and the California Department of Public Health's guidance.

Please accept this letter of support for Sierra County's Attestation to the County's Readiness for Variance.

Respectfully,

Jim Beard
Chairman
Sierra County Board of Supervisors

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