

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

COVID-19 VARIANCE ATTESTATION FORM

FOR SONOMA COUNTY



May 18, 2020

Background

On March 4, 2020, Governor Newsom proclaimed a State of Emergency because 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 and level of county readiness for COVID-19 has differed across the state. On May 7th, as directed by the Governor in Executive Order N-60-20, the State Public Health Officer issued a local variance opportunity through a process of county self-attestation to meet a set of criteria related to county disease prevalence and preparedness. This variance allowed for counties to adopt aspects of Stage 2 at a rate and in an order determined by the County Local Health Officer. Note that counties desiring to be stricter or move at a pace less rapid than the state did not need a variance.

In order to protect the public health of the state, and in light of the state's level of preparedness at the time, more rapid movement through Stage 2 as compared to the state needed to be limited to those counties which were at the very lowest levels of risk. Thus, the first variance had very tight criteria related to disease prevalence and deaths as a result of COVID-19.

Now, 11 days after the first variance opportunity announcement, the state has further built up capacity in testing, contact tracing and the availability of PPE. Hospital surge capacity remains strong overall. California has maintained a position of stability with respect to hospitalizations. These data show that the state is now at a higher level of preparedness, and many counties across the state, including those that did not meet the first variance criteria are expected to be, too. For these reasons, the state is issuing a second variance opportunity for certain counties that did not meet the criteria of the first variance attestation. This next round of variance is for counties that can attest to meeting specific criteria indicating local stability of COVID-19 spread and specific levels of county preparedness. The criteria and procedures that counties will need to meet in order to attest to this second variance opportunity are outlined below. It is recommended that counties consult with

cities, tribes and stakeholders, as well as other counties in their region, as they consider moving through Stage 2

Local Variance

A county that has met the criteria in containing COVID-19, as defined in this guidance or in the guidance for the first variance, may consider modifying how the county advances through Stage 2, either to move more quickly or in a different order, of California's roadmap to modify the Stay-at-Home order. Counties that attest to meeting criteria can only open a sector for which the state has posted sector guidance (see [Statewide industry guidance to reduce risk](#)). 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 health officer must:

1. Notify the California Department of Public Health (CDPH), and if requested, 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 health officer, and accompanied by a letter of support from the County Board of Supervisors, as well as a letter of support from the health care coalition or health care systems in said county.¹ In the event that the county does not have a health care coalition 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 health officer.

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

CDPH is available to provide consultation to counties as they develop their attestations and COVID-19 containment plans. Please email Jake Hanson at Jake.Hanson@cdph.ca.gov to notify him of your intent to seek a variance and if needed, request a consultation.

County Name: Sonoma

County Contact: Dr. Sundari Mase

Public Phone Number: (707) 565-4426

Readiness for Variance

The county's documentation of its readiness to modify how the county advances through Stage 2, either to move more quickly or in a different order, than the California's roadmap to

¹ If a county previously sought a variance and submitted a letter of support from the health care coalition or health care systems but did not qualify for the variance at that time, it may use the previous version of that letter. In contrast, the County Board of Supervisors must provide a renewed letter of support for an attestation of the second variance.

modify the Stay-at-Home order, 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 with specific co-morbidities, and those residing in long-term care and locally controlled custody facilities and other congregate settings, 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.

As a best practice, if not already created, counties will also attest to plan to develop a county COVID-19 containment strategy by the local 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.

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 to reinstitute restrictions in advance of any state action.

Readiness Criteria

To establish readiness for a modification in the pace or order 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:

Sonoma County has demonstrated its preparedness to accelerate into Stage 2 business reopening based on its aggressive actions to interrupt the transmission of COVID-19. The County, by and through its Public Health Officer Dr. Sundari Mase, issued its first Shelter-in-Place Order (County Order) on March 17, 2020 – two days before the State's Stay-at-Home Order (State Order) – when Sonoma County had only four positive COVID-19 cases. Not only was County Order more restrictive than the State Order, additional actions were taken beyond those required by the State, including:

- Order Closing Parks
- Blanket Quarantine and Isolation Orders
- Mandatory Facial Coverings Order
- Orders Setting Requirements for Congregate Care and Living Facilities and First Responders

Due to these quick actions and the broad compliance of the community, the County was successful in substantially flattening the curve. In addition, continued success in maintaining a low rate of transmissions has been the result of an increasingly robust testing program and aggressive contact surveillance which Sonoma instituted at an early stage.

As will be explained further below, based upon local conditions in Sonoma County, the Public Health Officer, County Board of Supervisors, local hospitals, and cities, believe we

have collectively, as a region, established our readiness for an increased pace through Stage 2 of California's roadmap to modify the State Order. The County's plan allows for those eligible businesses and workplaces, as set forth by the State, to reopen based upon a risk based approach, with strong mitigation measures in place informed by relevant CDPH guidance and industry-specific best management practices.

- **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 reintroducing features of the stay at home order and using capacity within the health care delivery system to provide care to the sick. Given the anticipated increase in cases as a result of modifying the current Stay-At-Home order, this is a foundational parameter that must be met to safely increase the county's progression through Stage 2. The county must attest to:
 - Demonstrated stable/decreasing number of patients hospitalized for COVID-19 by a 7-day average of daily percent change in the total number of hospitalized confirmed COVID-19 patients of <+5% **-OR-** no more than 20 total confirmed COVID-19 patients hospitalized on any single day over the past 14 days.

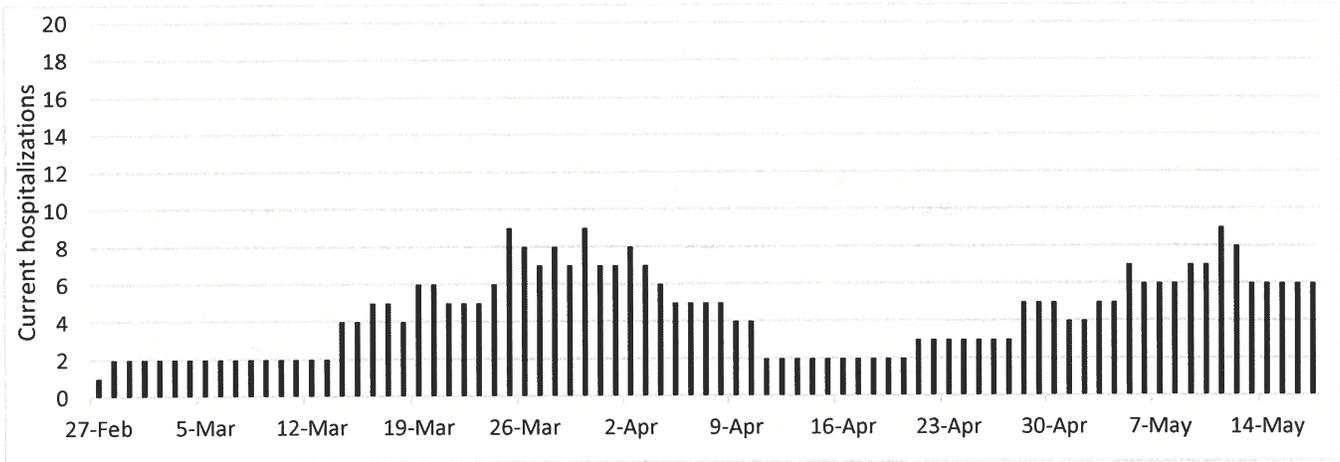
In the past 14 days, the number of confirmed COVID-19 patients has remained below 20 on any single day.

Confirmed COVID-19 patients hospitalized in Sonoma County over the past 14 days



Sonoma County's COVID-19 hospitalization numbers have consistently remained below 20 since the beginning of the event in February, 2020.

Confirmed COVID-19 patients hospitalized in Sonoma County, February-May, 2020



- o 14-day cumulative COVID-19 positive incidence of <25 per 100,000 -OR- testing positivity over the past 7 days of <8%.

NOTE: State and Federal prison inmate COVID+ cases can be excluded from calculations of case rate in determining qualification for variance. Staff in State and Federal prison facilities are counted in case numbers. Inmates, detainees, and staff in county facilities, such as county jails, must continue to be included in the calculations.

Facility staff of jails and prisons, regardless of whether they are run by local, state or federal government, generally reside in the counties in which they work. So, the incidence of COVID-19 positivity is relevant to the variance determination. In contrast, upon release, inmates of State and Federal prisons generally do not return to the counties in which they are incarcerated, so the incidence of their COVID-19 positivity is not relevant to the variance determination. While inmates in state and federal prisons may be removed from calculation for this specific criteria, working to protect inmates in these facilities from COVID-19 is of the highest priority for the State.

- o Counties using this exception are required to submit case rate details for inmates and the remainder of the community separately. N/A

There is epidemiological stability of COVID-19 in Sonoma County due to the fact that the prevalence of COVID-19 cases is relatively low and can be swiftly contained by planned mitigation measures. In the past 14 days, the testing positivity rate has remained below 8%, with an average positivity rate of 2%.

Seven Day Testing Positivity Rates in Sonoma County

Date	May 7	May 8	May 9	May 10	May 11	May 12	May 13
% Positive	2%	1%	1%	1%	2%	1%	6%
Number of positive tests	14	5	1	2	12	9	11
Number of tests conducted	875	754	117	381	555	678	175

Updated May 17, 2020. Access to test results in CalREDIE is delayed by 3-5 days.

Over the past 14 days, Sonoma County successfully increased testing from a 7-day average of 223 test/day to 476 tests/day. While, as expected, increased testing has found additional COVID-19 positive cases, the percentage of daily positive tests (positivity) remained stable at 2-4%. These figures indicate the strength of Sonoma County's contact tracing and containment capabilities.

Over three-quarters (77%) of positive cases in Sonoma County have been among close contacts of existing cases. Sonoma County is following a comprehensive strategy to identify and test all close contacts of cases and will continue to see a high number of infections in this group.

The rate of COVID-19 cases due to community transmission in Sonoma County is 0.32/10,000 residents. Monitoring to ensure positivity remains stable will inform the level of community transmission in the population. Currently, the prevalence of COVID-19 cases due to community transmission in Sonoma County appears low enough to be swiftly contained by an epidemiological response including aggressive contact tracing and isolation of positive cases.

- **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, as a separate attachment, copies of the guidance(s).

The County's Public Health Orders include comprehensive protocols to protect essential workers in alignment with CDPH guidance documents (<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Guidance.aspx>; <https://covid19.ca.gov/industry-guidance/>). All orders are available at <https://socoemergency.org/emergency/novel-coronavirus/health-orders/>. In addition, the Shelter in Place Orders (and amendments) include a comprehensive Social Distancing Protocol (https://socoemergency.org/wp-content/uploads/2020/05/Appendix-A_05-01-2020extended.pdf), as well as Construction Field Safety Requirements (https://socoemergency.org/wp-content/uploads/2020/05/Appendix-B_05-01-2020.pdf). Separate, specific orders have also been issued for congregate care and living facilities and first responders (<https://socoemergency.org/order-of-the-health-officer-congregate-care-living-facilities/>).

Further, in partnership with the County of Sonoma and the Department of Health Services, the Economic Development Board has compiled the Coronavirus Business Resources Guide. This includes industry-specific guidance, potentially available funding for working capital for small business, public health information links, workforce resources and how to help employees affected by Coronavirus. This written guidance can be accessed at <http://sonomaedb.org/Business-Assistance/Coronavirus-Business-Resources/>.

To support health and safety during reopening, County of Sonoma partnered with IBM to develop an app, called SoCo COVID-19 Check that can be downloaded through the Apple App Store to allow employees to self-check their health and symptoms of COVID-

19 so that they can stay home if they are exhibiting any symptoms. A self-certification website is linked to the app so that employers can ensure each employee's health screening has been completed. The app enables employers to monitor the health of their staff and allows the county to oversee a broader set of public health data to inform its response (data will be stored in IBM's cloud and does not identify individual users).

In addition, County of Sonoma Environmental Health staff are operating a phone resource line and offering technical assistance through presentations and one-on-one consultation to support employers in understanding how to structure the physical environment to protect essential workers. All of these steps to protect essential workers are informed and aligned with State Guidance issued by CDPH.

All guidance documents are listed in Exhibit A.

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

In preparation for the possibility of a surge, County of Sonoma has procured over 1,907,750 units of Personal Protective Equipment (PPE). As of May 13, 2020, 628,856 units had been distributed to health care partners. The County is using multiple data sources to assess what types and quantities of supplies may be needed over the next 30, 60 and 90 days, including:

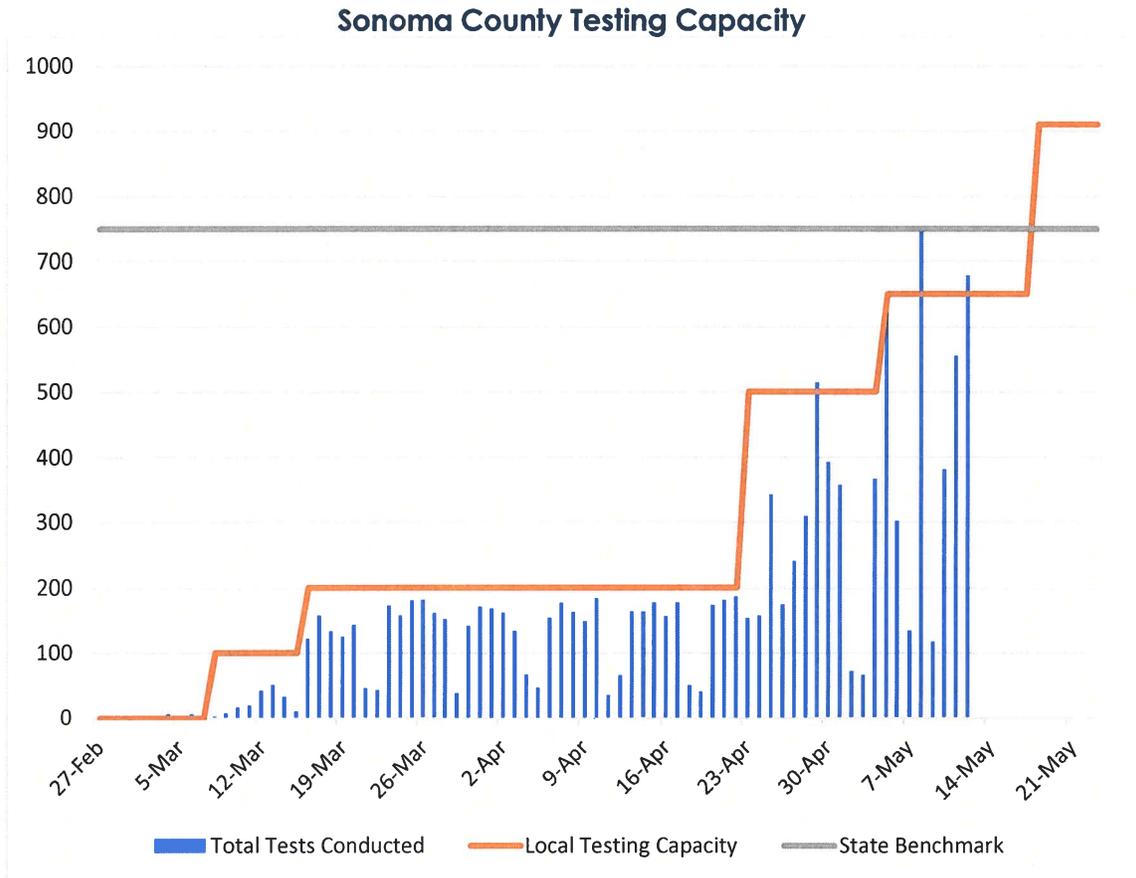
- Daily California Department of Public Health polling data regarding PPE supplies remaining at hospitals and SNFs
- County of Sonoma PPE Burn Rate survey distributed to health care system partners regarding daily burn rates and procurement sources
- Analysis of warehouse data and resource requests
- Self-certification by businesses as to current supplies and access to order more through non-Government supply chains.

PPE Burn Rate survey responses indicate that hospitals currently have more than a 30 day supply of gloves, masks, gowns and N95 respirators. The Department Operations Center Logistics team is utilizing burn rate estimates to procure enough supplies to meet health partner PPE needs for 90 days, factoring in a potential surge (multiplying projected need by 1.5).

- **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 capacity to test 1.5 per 1,000 residents, which can be met through a combination of testing of symptomatic individuals and targeted surveillance. Provide the number of tests conducted in the past week. A county must also provide a plan to reach the level of testing that is required to meet the testing capacity levels, if the county has not already reached the required levels.

Sonoma County's testing capacity is on track to exceed the State's goal of 750 tests/day based on Sonoma County's population of 494,336 (U.S Census Bureau, 2019) and expanded testing sites. As of May 14, 2020, 12,252 tests had been conducted. To reach

a testing volume of 1.5 per 1,000 residents, Sonoma County should have the capacity to conduct at least 750 tests per day. The County has been steadily increasing its testing capacity through the addition of drive-through testing sites, a partnership with UCSF to process test results, field surveillance, and the addition of two OptumServe State testing sites. Starting May 18th, the OptumServe sites will double their daily capacity bringing Sonoma County's testing capacity to over 900 tests per day. From May 4 through May 10, the 7-day average tests per day increased by over 45% - from 324 to 476.



- Testing availability for at least 75% of residents, as measured by the presence of 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 and indicate if there are any geographic areas that do not meet the criteria and plans for filling these gaps if they exist. If the county depends on sites in adjacent counties, please list these sites as well.

Free, accessible testing is available to all residents generally less than 30 minutes from their homes. Residents can find a testing site near their location by searching a test locator site developed by County of Sonoma. Testing is available at least five days per week at the following locations:

Sonoma County Community, State, and Health Care System Testing Sites

Provider	Location	Who is eligible?	Contact	Testing Capacity
County of Sonoma Public Health Drive Thru Testing	3313 Chanate Rd. Santa Rosa, CA 95404	Health care workers with or without symptoms; first responders with or without symptoms; symptomatic people older than 65; symptomatic people with underlying health conditions; and all essential workers, with or without symptoms. All testing is free.	Appointment only; call 707-565-4667. Testing offered seven days per week.	300 tests daily
County of Sonoma Public Health	625 5 th St, Santa Rosa 95401	Close Contacts of positive COVID-19 cases	Appointment only. Scheduled by contact tracing team	30 tests daily
OptumServe	Santa Rosa High School	Free testing available to all residents regardless of immigration status	Appointments are available on weekdays, and can be made at https://lhi.care/covidtesting . Residents without internet access can call 1-888-634-1123	132 tests daily; expanding to 264 tests per day 5/18
OptumServe	Petaluma Campus Santa Rosa Junior College	Free testing available to all residents regardless of immigration status	Appointments are available on weekdays, and can be made at https://lhi.care/covidtesting . Residents without internet access can call 1-888-634-1123	132 tests daily; expanding to 264 tests per day 5/18
Hospitals, clinics, health care providers	Multiple	Symptomatic individuals	Please contact your health care provider.	Variable

- o Please provide a COVID-19 Surveillance plan, or a summary of your proposed plan, which should include at least how many tests will be done, at what frequency and how it will be reported to the state, as well as a timeline for rolling out the plan. The surveillance plan will provide the ability for the county to understand the movement of the virus that causes COVID19 in the community through testing. [CDPH has a community sentinel surveillance system that is being

implemented in several counties. Counties are welcome to use this protocol and contact covCommunitySurveillance@cdph.ca.gov for any guidance in setting up such systems in their county.]

Sonoma County's Surveillance Plan is still being finalized. Components of the plan include:

- Plans in place to increase capacity to perform 1,000 tests per day (2 tests per 1,000 residents) by June 30, 2020
 - Reporting: Sonoma County will notify CDPH when it reaches its goal of 1,000 tests/day. In addition, daily testing numbers are reported on Sonoma County's public dashboard which can be accessed at: <https://sonomacounty.maps.arcgis.com/apps/MapSeries/index.html?appid=21a1653b79ba42039ff22bcb85fa5b19>
 - Epidemiological support to analyze testing data, identify case clusters, monitor trends in COVID-19 prevalence and inform strategic testing and case finding
 - Plans to engage in representative community sampling to test for the presence of COVID-19 antibodies.
 - Timeline: Plan to be drafted by early June and implemented during June-August, 2020 (or for as long as need indicates).
- **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:
 - Enough contact tracing. There should be at least 15 staff per 100,000 county population trained and available for contact tracing. Please describe the county's contact tracing plan, including workforce capacity, and why it is sufficient to meet anticipated surge. Indicate which data management platform you will be using for contact tracing (reminder that the State has in place a platform that can be used free-of-charge by any county).

For Sonoma County's population of 494,336, this criteria means we need at least 75 trained contact tracing staff. **A team of approximately 70 County staff and retired doctors and nurses are effectively managing current contact tracing needs as the team works to build additional capacity in the event of a surge. By 6/15, the County will have 150 trained staff and by 7/15 will have 230 contact tracing staff.** Capacity building activities to date include the following activities:

- 100 individuals were trained to assist on 03/29/2020.
- California Department of Public Health selected Sonoma County as a pilot county to expand contact tracing capacities. The State is offering database support and training (starting 05/07/2020) for a new cohort of contact tracers.
- Through partnership with the State training/resources, local non-profit organizations, and County staffing, the County will train up to 200 additional contact tracing personnel and 50 case interviewers. The need will be met through a combination of reassignment of existing County staff, collaborations with community partners, retired and other health professional volunteers, community volunteers, and possibly temporary hires if required to meet long-term needs.

- All new staff/volunteers will be required to complete the State contact training/case interviewing 5-day course prior to starting their work. A minimum commitment of 12-16 hours per week will be required to maintain quality and efficiency. There will be a phased scale-up as volunteers are trained and oriented to County and State systems for data collection and client follow-up. By the end of May, we anticipate onboarding the first 15 new staff/volunteers to test the team configuration and refine the system. Once the State case/contact management platform is available to the County in the next two weeks and training materials are available online, scale-up will proceed rapidly.
 - We anticipate an additional 100 contact tracers to come on board in June, followed by an additional 85 in the first half of July, so the County will be fully staffed to handle any surge in cases. Current staff serving as contact tracers will move into case interviewer positions and will be replaced as contact tracers by new staff. Ongoing recruitment and training is anticipated to backfill positions as staff/volunteers return to work or cease participation.
 - Approximately 20 nurses are currently performing initial case interviews and more than 20 volunteers are following contacts to cases.
 - On average, each case yields about 5 contacts (range 0-more than 30). Contacts to positive cases are encouraged to seek testing. Contact testing for individuals without insurance or a medical home are tested through Sonoma County Public Health. This testing can accommodate up to 30 tests per day, Monday through Friday.
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- 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 separate bathroom, or a process in place that provides the ability to sanitize a shared bathroom between uses), for the duration of the necessary isolation or quarantine period. Rooms acquired as part of Project Roomkey should be utilized.

The efforts of the Homeless Taskforce, composed of City and County staff, succeeded in exceeding the 15% State goal of addressing the needs of unsheltered and sheltered homeless individuals in Sonoma County with an emphasis on persons over 65 years old and those most vulnerable to COVID-19 based upon underlying medical conditions. Additionally, the taskforce provides guidance to homeless system of care providers in collaboration and in partnership with healthcare. A primary objective of the Taskforce is to provide services to individuals experiencing homelessness to increase their safety during the COVID emergency, including hygiene facilities, food and temporary shelter.

This Taskforce has secured hotel rooms/trailer units with full services including food, transport, basic health services and monitoring for isolation/quarantine for at least 152 medically vulnerable homeless individuals. At single occupancy, these placements would represent approximately 5% of the overall homeless population of 2,951 as last

estimated in 2019. However, data informing this effort includes an analysis of social service utilization and emergency department data by the California Policy Lab found that there are over 41,000 individuals in Sonoma County with a history of hospitalization for COVID-19 risk factors, such as respiratory illnesses. Almost one-third are over the age of 65 and at least 1,625 are also housing unstable. The 152 placements represent 9.4% of this medically vulnerable homeless population.

Additional placements available that help Sonoma County reach the stated benchmark include the Sonoma County Alternate Care Sites which offer 256 isolation/quarantine rooms for individuals with COVID-19 tests pending and 90 placements for COVID 19 positive patients. With contract amendments in the event of a surge, these spaces can expand to 324 and 150 beds respectively, providing a combined Alternate Care Site surge capacity of 474 beds. The combined Non-Congregate Care site and Alternate Care Site capacity is 626 beds—**capacity to serve 21% of the total homeless population, and 38.5% of the most medically vulnerable unhoused. All spaces procured have access to a separate bathroom, or a process in place that provides the ability to sanitize a shared bathroom between uses.**

In addition to providing isolation/quarantine spaces, County homeless outreach workers are conducting street and shelter outreach to notify homeless residents of resources available and to offer enrollment in ACCESS Sonoma. The goal of ACCESS is to identify the most vulnerable residents in the community—those experiencing chronic unemployment, homelessness and housing insecurity and who have behavioral health and substance use issues who may also receive services that intersect with agencies in the criminal justice system—and helps them receive the support they need through coordinated cross-sector case management.

- **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 COVID-19 positive patients at a volume of at a minimum surge of 35% of their baseline average daily census across all acute care hospitals in a county. This can be accomplished either through adding additional bed capacity or decreasing hospital census by reducing bed demand from non-COVID-19 related hospitalizations (i.e., cancelling elective surgeries). Please describe how this surge would be accomplished, including surge census by hospital, addressing both physical and workforce capacity.

Sonoma County has the hospital capacity and professional health care staff to accommodate in excess of a 35% surge in COVID-19 cases. On a daily basis the County assesses COVID-19 hospitalizations, hospital bed availability, ICU capacity, and ventilators available. Local hospitals have the internal surge capacity to expand staffed beds by 37.3%. Sonoma County hospitals report 707 licensed beds (67 of which are licensed ICU beds) and the internal physical and staffing ability to add 264 beds through surge.

In addition, the Sonoma County Alternate Care Sites offer 256 isolation/quarantine rooms for individuals with COVID-19 tests pending and 90 placements for COVID 19 positive patients. With contract amendments in the event of a surge, these spaces can expand to 324 and 150 beds respectively, providing a combined Alternate Care Site surge capacity of 474 beds. The Alternate Care Site is being staffed by Petaluma Health Center personnel.

According to an Emergency Medical Services (EMS) survey of 41 health care entities (clinics, hospitals, skilled nursing facilities, dialysis, emergency medical services, fire services, and law enforcement) in April 2020, the health workforce in Sonoma County consists of 17,919 health professionals.

To date, there have been 32 COVID-19 related hospitalizations (representing 9% of positive cases). At present, hospitals are at 63% capacity and ICU beds are 76% full. Should Sonoma County be permitted to ease restrictions, the County would watch hospital capacity closely and work with hospitals to cease elective procedures and/or divert more patients to alternate care facilities should they reach 85% or more of their regular operating capacity.

- o 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.

Hospital personal protective equipment (PPE) needs are being monitored by the County of Sonoma and the California Department of Public Health (CDPH). Hospitals report their PPE and staffing supply needs daily to CDPH and this information is shared with the County of Sonoma. The County is also surveying hospitals about their PPE burn rate, or how quickly they utilize provided PPE, to inform the amount of PPE the County should obtain for distribution in the next 30, 60 and 90 days to protect health workers in the event of a COVID-19 surge. The table below displays PPE requested by health care partners and distributed by the County since March.

PPE Description	Total PPE Requested by Op Area	Total Individual Units Shipped
N95 Masks - Adult	101,814	111,456
N95 Masks - Small	16,670	21,960
Surgical / Procedure Masks	166,710	165,150
Safety Glasses	2,564	3,792
Safety Goggles	5,627	1,380
Face Shields	3,298	4,867
Surgical Gowns (All Sizes)	28,564	8,578

Tyvek Suits / Coveralls (All Sizes)	21,706	22,804
Nitrile Gloves (All Sizes)	456,048	281,236
Infrared Thermometers	268	98
Booties	-	2,900
Hand Sanitizer	712	4,535
TOTAL	803,981	628,856

(Updated: 05/13/2020)

PPE Burn Rate survey responses indicate that hospitals currently have more than a 30 day supply of gloves, masks, gowns and N95 respirators. The Department Operations Center Logistics team is utilizing burn rate estimates to procure enough supplies to meet health partner PPE needs for 90 days, factoring in a potential surge (multiplying projected need by 1.5).

- **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 ongoing work with Skilled Nursing Facilities within their jurisdiction and describe their plans to work closely with facilities to prevent and mitigate outbreaks and ensure access to PPE:
 - Describe your plan to prevent and mitigate COVID-19 infections in skilled nursing facilities through regular consultation with CDPH district offices and with leadership from each facility on the following: targeted testing and patient cohorting plans; infection control precautions; access to PPE; staffing shortage contingency plans; and facility communication plans. This plan shall describe how the county will (1) engage with each skilled nursing facility on a weekly basis, (2) share best practices, and (3) address urgent matters at skilled nursing facilities in its boundaries.

A formal plan is still under development (to be completed within the next two weeks). However, it should be noted that the County of Sonoma has weekly conference calls with the Skilled Nursing Facilities (SNFs) to monitor for any issues arising and has engaged in extensive and ongoing surveillance testing of SNF patients and staff. In addition, County Emergency Medical Services staff are working with SNF leads to develop a containment plan including transferring any patients who test positive for COVID-19 to a single SNF facility to help prevent spread. Currently Sonoma County does not have any cases in a SNF resident and no outbreaks associated with SNF staff.

- 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 must track PPE availability across SNFs.

Names and Contacts of Skilled Nursing Facilities in Sonoma County

Skilled Nursing Facility	Point of Contact (POC)	POC Email address
Sonoma Postacute Care	Emmanuel Tatah	Administrator@sonomapostacute.com
Vineyard Post Acute	Vineyard Post Acute	Shane.blood@providencegroup.com
Creekside Rehabilitation And Behavioral Health	Donald Atterberry	Datterberry@thekek.com
Healdsburg Senior Living Community	Rob Matthews, Ed Or Lacey Ernst, Rn, Don	Ed.healdsburg@pacificseniorliving.com or dn.healdsburg@pacificseniorliving.com
Arbol Residences Of Santa Rosa	Jennifer Abramson	Abramsonjennifer@arbolsantarosa.com
Santa Rosa Post Acute	Arwin Bulaun	Arwin.bulaun@santarosapostacute.com
Valley Of The Moon Post Acute	Mike Empey	Mempey@ensignservices.net
Vineyard Post Acute	Arlene E. Fandinola, Dsd/lp	
Petaluma Post-Acute Rehab	Derrick Whitacre	Dwhitacre@aspenskiilledhealth.com
Friends House	Clara Allen	Callen@covia.org
Empres Post Acute Rehabilitation	Constance Smith	Csmith3@empres.com
Healdsburg District Hospital D/P Snf	Celia Palacio	Cpalacio@nschd.org
Sonoma Post Acute	Tanner Wilson	Tanner.wilson@sonomapostacute.com
Broadway Villa Post Acute	Michael Empey	Mempey@ensignservices.net
Hillcrest Post Acute	Brett Moore	Bmoore@westharborhc.com
Summerfield Healthcare Center	Jenae Prince	Jenprince@ensignservices.net
Spring Lake Village	Kristin Hermanson	Khermanson@covia.org
Arbol Residences Of Santa Rosa	Jennifer Abramson	Abramsonjennifer@arbolsantarosa.com
Apple Valley Post-Acute Rehab	Barbie Robles	Brobles@applevalleyrehab.com
Cloverdale Healthcare Center	Dolores Perryman	Doperryman@ensignservices.net
Sonoma Postacute Care	Emmanuel Tatah	Administrator@postacute.com
Windsor Care Center Of Petaluma	Tracey Mease, Administrator	Petadmin@windsorcares.com

To monitor the needs of Skilled Nursing Facilities (SNFs), the County reviews the supply needs of the facilities based on regular polling completed by the California Department of Public Health. In addition the County distributed a PPE burn rate survey to the SNFs inquiring about their regular supply chains, current stock of PPE, and the rate at which they were depleting that stock (results from this survey are still pending).

Field Surveillance Among Vulnerable Populations in the Community

Public Health Field Surveillance does outreach to homeless, incarcerated and long term care residents. If and when there is an exposure (close contact with a COVID-19 positive staff member or resident) or outbreak (greater than 3 residents or staff members) the Field Surveillance team responds with wider (sometimes entire facility) testing with additional support from American Medical Response (AMR) and Kaiser if needed.

Population under surveillance	Tests Completed
Skilled Nursing Facility/Post Acute Hospital	579
Homeless	84
Jail/Juvenile Hall	129
Residential Care Facilities/Board & Care/Group	146
Hospice	35
Total	973

(Enhanced surveillance testing, PH Disease Control as of 5/4/2020)

Per surveillance by the state of California

https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/SNFsCOVID_19.aspx

as of May 11 there have been no outbreaks in SNFs and minimal cases in other residential care facilities in Sonoma County. This area remains a key focus of public health efforts and a priority for surveillance and supplies.

Monitoring COVID-19 Among Older Adults

Individuals 65 years and older are currently under-represented in the proportion of positive cases in the county.

Age Category	Cases	% of Cases	% of Population
0-17 yrs	31	11.4%	19.7%
18-49 yrs	140	51.5%	39.7%
50-64 yrs	62	22.8%	21.0%
65+ yrs	39	14.3%	19.6%
Total	272	100%	100%

(Last updated: 05/08/2020)

Latinx Community Outreach

Similar to State and National trends, the Latinx community in Sonoma County has been disproportionately impacted by COVID-19.

All Cases associated with COVID-19 by Race and Ethnicity, as of 5.10.20

Race/ethnicity	Number of cases	Percent of cases	Percent of population
Hispanic/Latino	139	58.9%	27.2%
White, non-Hispanic	77	32.6%	64.7%
Asian/Pacific Islander, non-Hispanic	13	5.5%	5.1%
Other^, non-Hispanic	7	3.0%	3.0%

Cases: 309 total, 73 (24%) missing race/ethnicity

^Black/African American, American Indian/Alaska Native, and Other

The County of Sonoma is using a comprehensive approach—involving data collection, monitoring, and expanded outreach—to help prevent and mitigate impacts of COVID-19 in the Latinx community.

Plan elements include:

- Focused testing, health education, and resource outreach to the Latinx community through four pop-up testing events in May, 2020 in Santa Rosa, Petaluma, Sonoma Valley and Healdsburg.
 - Tracking and reporting COVID-19 cases by race/ethnicity using epidemiological standards in order to identify disparities and any increased risks.
 - Tracking and monitoring social determinants of health data particularly relevant to this crisis, including: unemployment, health status, etc.
 - Developing and communicating mitigation strategies that reduce transmission to and within the Latinx community.
 - Developing strategies to mitigate the known impacts to the Latinx community (e.g. job loss, reduced wages, exacerbated health conditions, mental health, etc.)
 - Increasing outreach regarding health/safety and prevention messaging, as well as for available support made available to Latinx community through local, state and federal government programs, as well as community based efforts.
 - Continuing coordination with Latinx community partners and leaders in order to ensure responsiveness of the plan.
- **Sectors and timelines.** Please provide details on the county's plan to move through Stage 2. These details 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. Any sector that is reflective of Stage 3 should not be included in this variance because it is not allowed until the State proceeds into Stage 3. For additional details on sectors and spaces included in Stage 2, please see <https://covid19.ca.gov/industry-guidance/> for sectors open statewide and <https://covid19.ca.gov/roadmap-counties/> for sectors available to counties with a variance.

As of May 15, 2020, the State Early Stage 2 sectors are open in Sonoma County. Following the posting of this Attestation by CDPH, the County proposes to open:

- Dine-in Restaurants – *Outdoor Seating Only*: Operations must be in compliance with current State-issued guidance and County guidance which is at least as restrictive as the State-issued guidance;
- Childcare – Broadened to include Summer Day Camps: Operations must be in compliance with current State-issued guidance and County child care facility requirements which are at least as restrictive as State-issued guidance;
- Drive-In/Drive-Thru religious services, ceremonial services, and movie theaters: Operations must be in compliance with any State-issued guidance and guidance developed or approved by the Public Health Officer which is at least as restrictive as State-issued guidance;
- Curbside libraries: Until State-issued specific guidance is issued, operations must be in compliance with State-issued guidance for delivery of packages to ensure items are safe for handling; and
- Wineries, Breweries, Tasting Rooms – *Outdoor Seating/Tasting with Meal Only*: Operations must be in compliance with CDPH Dine-In Restaurants Guidance (<https://covid19.ca.gov/pdf/guidance-dine-in-restaurants.pdf>) and additional guidance currently being developed in consultation with neighboring counties and stakeholders which will be at least as restrictive as State-issued guidance.

Should the State revise the list of allowable sectors in Stage 2 to include wineries, breweries, tasting rooms (tastings without food), Sonoma County would be ready to open and operate in compliance with any State-issued guidance and guidance approved by the Public Health Officer. Sonoma County understands that this is not currently part of Stage 2 sectors.

To follow at a later date when determined appropriate by the Public Health Officer and in alignment with any State-issued guidance:

- Dine-In Restaurants – *Indoor Seating*;
- Destination Retail; and
- Schools with Modifications.

In addition, the County will consider allowing other businesses and activities in Stage 2 as the State may continue adding to its eligible businesses and activities in this Stage.

State guidance and checklists are rapidly being made available for Stage 2 workplaces, which the County has made, and will continue to make, separately available through its websites. The County incorporates by reference those guidance and checklists at <https://covid19.ca.gov/roadmap/>. The County's Economic Development Board, in partnership with local business stakeholders, has also developed best management practices for various Stage 1 and Stage 2 industries which can be found at <http://sonomaedb.org/Business-Assistance/Coronavirus/Business-Management-Plans/>. As additional guidance

documents are available, the County will continue posting them to our websites. A list of current orders and guidance document is included in Exhibit A.

In addition, the County's actions also will be informed by pandemic resource documents, such as the CDC's Implementation of Mitigation Strategies for Communities with Local COVID-19 Transmission. This resource makes the point that community mitigations should be guided by the local characteristics of the disease transmission, demographics, and public health and healthcare system capacity. The County's actions will also be guided by Johns Hopkins' Public Health Principles for a Phased Reopening during COVID-19: Guidance for Governors. As that reference notes, the results of reopening decisions, such as further progression into Stage 2, will take two to three weeks to be reflected in metrics. Further, if case counts, hospitalizations, and deaths go up in that time, further actions in reopening should be paused, and steps should be taken to get control of rising numbers. Finally, possible actions might include changes to case and contact tracing, taking specific actions to respond to any outbreaks, and the re-imposition of various Shelter-In-Place restrictions focusing first on those businesses and activities that are more likely to result in transmission and therefore pose higher risks to public health.

- 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, or a summary of your plan, for how the county will inform the state of emerging concerns and how it will implement early containment measures.

Sonoma County will continue to measure and monitor various indicators that will serve as triggers for either slowing the pace through Stage 2, tightening modifications through amendments to its Shelter-at-Home Order, or engaging in other surveillance and interventions. The County is creating a dashboard of various indicators that allow for real-time public health surveillance that will soon be live. These indicators and others being monitored include:

Indicator	Frequency of measurement	Current	Consider implementing restrictions or taking precautionary measures
Rate of cases per 10,000	Weekly	2.1	4
Case fatality rate	Daily	1.1%	5%
Proportion of cases due to community exposure	Weekly	19%	30%
Contact tracing staffing	Weekly	70	<75 staff or fewer staff than needed to

CDPH COVID-19 VARIANCE ATTESTATION FORM

			manage contact tracing needs
Doubling rate	Weekly	30 days	20 days
Percent positive tests	Weekly	3.4%	>8%
Average weekly testing volume of at least 750 tests per daily	Weekly	446 test per day average	<750
Percent of cases ever hospitalized	Daily	9%	15%
Proportion of cases among adults 65 and older	Weekly	14.3%	21%
Number of cases in Skilled Nursing Facilities	Weekly	0	5
Number of cases among homeless population	Weekly	2	5
Ventilators available	Daily	24% occupied	50% occupied
Hospital census	Daily	63% occupied	85% occupied
ICU Bed Availability	Daily	76% occupied	90% occupied
PPE supply in hospitals	Daily	>30 day supply	<14 day supply
PPE supply in Skilled Nursing Facilities	Daily	Still under assessment	<14 day supply

If community case transmission is increasing and healthcare capacity is decreasing, the County will consider reinstating Shelter-In-Place measures. The County reserves the right to modify the above indicators and community mitigations as it deems fit in order to protect the public health and community from the impacts of increased COVID-19 transmission. The County will inform the State of any modifications to its indicators and any emerging concerns by requesting monthly calls with CDPH staff to provide an overall status update.

- **COVID-19 Containment Plan**

Please provide your county COVID-19 containment plan or describe your strategy to create a COVID-19 containment plan with a timeline.

As Sonoma County pursues this variance allowing eligible business and workplaces within the county to advance further into Stage 2, the County remains steadfastly committed to collectively protecting the public and essential workers. The County has actively engaged with its nine incorporated cities, hospitals and healthcare communities, operational area partners (including special districts and schools), businesses, nonprofits,

and diverse community groups on all aspects of this health emergency response. With input from these partners and stakeholders, the County is developing a comprehensive reopening and containment plan to protect the health and safety of our community to be completed within the next two weeks.

In addition and as discussed under *Sectors and Timelines*, above, the County's actions also will be informed by pandemic resource documents, such as the CDC's Implementation of Mitigation Strategies for Communities with Local COVID-19 Transmission. This resource makes the point that community mitigations should be guided by the local characteristics of the disease transmission, demographics, and public health and healthcare system capacity. The County's actions will also be guided by Johns Hopkins' Public Health Principles for a Phased Reopening during COVID-19: Guidance for Governors. As that reference notes, the results of reopening decisions, such as further progression into Stage 2, will take two to three weeks to be reflected in metrics. Further, if case counts, hospitalizations, and deaths go up in that time, further actions in reopening should be paused, and steps should be taken to get control of rising numbers. Finally, possible actions might include changes to case and contact tracing, taking specific actions to respond to any outbreaks, and the re-imposition of various Shelter-In-Place restrictions focusing first on those businesses and activities that are more likely to result in transmission and therefore pose higher risks to public health.

The County's plan will incorporate the *Triggers for Adjusting Modification* above, along with any additional metrics established by the State and address each of the areas and questions below.

While not exhaustive, the following areas and questions are important to address in any containment plan and may be used for guidance in the plan's development. This containment plan should be developed by the local 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. Under each of the areas below, please indicate how your plan addresses the relevant area. If your plan has not yet been developed or does not include details on the areas below, please describe how you will develop that plan and your timeline for completing it.

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 <8% 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?

Please see response under *Testing Capacity*, above. The County is continuing to develop additional details in coordination with all stakeholders.

Contact Tracing

- How many staff are currently trained and available to do contact tracing?

CDPH COVID-19 VARIANCE ATTESTATION FORM

- 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?

Please see response under *Containment Capacity*, above. The County is partnering with Community Action Partnership to train their bilingual case managers to assist in contact tracing efforts. The County is continuing to develop additional details in coordination with all stakeholders.

Living and Working in Congregate Settings

- 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?
- Is there a plan to track and notify local public health of COVID-19 case rate within local correctional facilities, and to notify any receiving facilities upon the transfer of individuals?
- Do facilities have the ability to adequately and 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 facilities have policies and protocols to appropriately train the workforce in infection prevention and control procedures?
- Does the workforce have access to locations to safely isolate?
- Do these facilities (particularly skilled nursing facilities) have access to staffing agencies if and when staff shortages related to COVID-19 occur?

Please see responses under *Vulnerable Populations*, above. The County is continuing to develop additional details in coordination with all stakeholders.

Protecting the Vulnerable

- Do resources and interventions intentionally address inequities within these populations being prioritized (i.e. deployment of PPE, testing, etc.)?
- Are older Californians, people with disabilities, and people with underlying health conditions at greater risk of serious illness, who are living in their own homes, supported so they can continue appropriate physical distancing and maintain wellbeing (i.e. food supports, telehealth, social connections, in home services, etc.)?

Please see responses under *Vulnerable Populations*, above. The County is continuing

to develop additional details in coordination with all stakeholders.

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?

Please see response under *Hospital Capacity*, above. The County is continuing to develop additional details in coordination with all stakeholders.

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?

Please see response under *Protection of Essential Workers*, above. The County is actively engaged with employers and businesses to develop appropriate health and safety protocols through the Business Recovery Task Forces established by the Economic Development Board. In addition, the County has procured over 2,500 thermometers to help businesses conduct employee health assessments and is working with the State to provide PPE to essential workers. The County is continuing to develop additional details in coordination with all stakeholders.

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?

Sonoma County has a vibrant and diverse agricultural heritage -- producing everything from wine grapes, fresh eggs, fruits and vegetables, to wool, meats and a wide variety of milk products. The County in coordination with agricultural stakeholders is in the process of developing sector-specific guidance for employers' to use best practices to protect the agricultural workers, customers and others involved in the industry from the risk of COVID-19 transmission. We are also closely coordinating with similar jurisdictions, including Napa County, on best management

practices for wineries and tasting rooms.

As discussed above, the County and the Economic Development Board are actively engaged with employers and businesses to develop additional guidance documents by sector.

Community Engagement

- Has the county engaged 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?

The County has actively engaged with its nine incorporated cities, and operational area partners, on all aspects of this health emergency response. The County and cities engage on a daily basis at a variety of levels of staff, leadership and elected levels to stay informed and engaged on measures needed to protect the health and safety of local residents, including enhancement of healthcare capacity, alternate housing, procurement of PPE, and developing a safe reopening strategy.

Members of the Board of Supervisors have committed to engage with and facilitate community recovery discussions as Community Recovery Liaisons for designated areas in the community – including community wellness, Latinx, faith-based organizations, disadvantaged communities, business (large, small, self-employed), agriculture, tourism – to better understand how they are being impacted by the pandemic and elevate those issues to other Board members and appropriate channels for solutions.

Through the Economic Development Board, the County has formed a Business Recovery Task Force with specific work groups for the following industries: Restaurants and Retail; Hotels and Hospitality; Construction and Real Estate; Wine and Agriculture; and Manufacturing. These work groups have established (and are in the process of establishing additional) industry-specific Business Management Plans available at <http://sonomaedb.org/Business-Assistance/Coronavirus/Business-Management-Plans/>. See also Exhibit A.

The County has actively engaged with and provided information to our community since the beginning of this pandemic, including Spanish speakers. All print, social media, and online information is provided in English and Spanish, including press releases, press conferences, and official information such as health orders. We launched a paid PSA campaign across Spanish and English radio stations, social media, and streaming outlets promoting safety practices to prevent coronavirus transmission.

The County has also participated in bilingual virtual town halls since March, and has engaged residents through Facebook live updates with the Public Health Officer,

translated to Spanish by a nurse. The County also holds re-occurring phone meetings with Latinx community stakeholders to update them, answer questions, and develop additional strategies to reach the Latinx community, and a daily community update is shared Latinx stakeholders through email.

Additionally, the Department of Health Services established a Latinx workgroup, that includes community health leaders, to discuss how to effectively reduce the disparate impact of COVID-19 on the Latinx 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?
- What systems or plans are in place to coordinate with surrounding counties (e.g. health care coalitions, shared EOCs, other communication, etc.) to share situational awareness and other emergent issues.
- How will increased regional and state travel impact the county's ability to test, isolate, and contact trace?

Sonoma County coordinates with our neighboring counties on regional approaches as appropriate, while recognizing that each county is uniquely situated in terms of COVID-19 transmission and community needs. As plans to reopen continue to be developed, Sonoma County will continue to refine this element of the containment plan, particularly as it relates to workers traveling between counties from home to work.

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 Dr. Sundari Mase, hereby attest that I am duly authorized to sign and act on behalf of the County of Sonoma. I certify that the County of Sonoma 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 the County of Sonoma, 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 Dr. Sundari Mase

Signature 

Position/Title Health Officer

Date May 21, 2020

Exhibit A - Orders and Guidance Documents**State of California**

Stay-at-Home Order: <https://covid19.ca.gov/stay-home-except-for-essential-needs/#top>

Statewide Industry Guidance to Reduce Risk: <https://covid19.ca.gov/industry-guidance/>

County-by-County Guidance: <https://covid19.ca.gov/roadmap-counties/>

County of Sonoma

Public Health Orders & Guidance webpage:
<https://socoemergency.org/emergency/novel-coronavirus/health-orders/>

Specific Orders (click on title for direct link):

Public Health Emergency Isolation Order No. C19-12-I for COVID-19

This Order supersedes the April 10, 2020 Order of the County of Sonoma Health Officer C19-06-I and shall become effective beginning at 12:01 a.m. on May 19, 2020, until rescinded, superseded, or amended in writing by the Health Officer.

Health Emergency Quarantine Order No. C19-12-Q for COVID-19

This Order supersedes the County of Sonoma Health Officer Order C19-06-Q dated April 10, 2020, and is in effect beginning at 12:01 a.m. on May 19, 2020 until rescinded, superseded, or amended in writing by the Health Officer.

Amendment No. 2 to Health Order No. C19-09: Essential Businesses

In accordance with Governor Newsom's announcements this week, the Sonoma County Health Officer amended the Shelter-in-Place order to allow additional businesses to reopen, effective 12:01 AM on Friday, May 15, 2020.

Order of the Health Officer C19-11: Amended Parks Closure Order

Amended Parks Closure Order to prevent the spread of COVID-19, allowing limited socially distanced access to some parks for outdoor recreational activities.

Amendment to Health Order No. C19-09: Shelter in Place

Amendment to align with Governor Newsom's Pandemic Resilience Roadmap allowing additional low risk business to reopen effective 12:01 AM on May 8, 2020.

Order of the Health Officer C19-10: Amended Parks Closure Order

Amendment to allow residents to access Parks near where they live, without resulting in the crowding and virus transmission risks that led to the previous Parks closure. With that

as context, walking, jogging, hiking or bicycling in Parks and on trails is permitted, under limitations. The Bodega Bay boat launches will open for recreational fishing to gather fish as a food source beginning May 8.

Order of the Health Officer C19-09: Shelter-in-Place Extended

Extends the Health Order for people to shelter-in-place safely in their homes beyond May 3, 2020.

Amendment to Health Order No. C19-08: Congregate Care/Living Facilities

This order makes changes in the Health Order issued April 16, 2020 to ensure social distancing, masking and screening measures are in place.

Order of the Health Officer C19-08: Congregate Care and Living Facilities, and First Responders

The Requiring all individuals entering certain congregate care/living facilities to take certain preventative measures including masking and symptoms screening to protect residents from the spread of COVID-19; and requiring EMS providers and first responders to symptom screen and wear medical-grade masks while responding to calls or on patrol.

Order of the Health Officer C19-07: Facial Coverings

Guidance replaced with Order requiring all persons shall wear facial coverings before they enter any indoor facility besides their residence, any enclosed open space, or while outdoors when the person is unable to maintain a six-foot distance from another person at all times effective at 12:01 a.m. on April 17, 2020.

Order of the Health Officer C19-06-I: Public Health Emergency Isolation Order

All individuals who have been diagnosed with or suspected to have COVID-19 must isolate themselves. These persons are required to follow all instructions in this Order and the Home Isolation and Quarantine Instructions guidance documents referenced in this Order.

Order of the Health Officer C19-06-Q: Quarantine Order for COVID-19

All household members, intimate partners, caregivers of a person with COVID-19, and those contacted by the disease control program as having been exposed to a person with COVID-19 must quarantine themselves. These persons are required to follow all instructions in this Order and the Public Health guidance documents referenced in this Order.

Health Officer Guidance on Face Coverings for General Public in All Age Groups

Guidance aligned with CDC guidance for face coverings.

Order of the Health Officer C19-05: Shelter in Place Extended

The Sonoma County Health Officer has extended the Health Order for people to shelter-in-place safely in their homes until May 3, 2020.

Order of the Health Officer C19-04: Closing Parks

Closing Parks to Prevent the Spread of COVID-19.

Order of the Health Officer C19-03: Shelter in Place

To ensure health and safety of the public and essential workers, the shelter-in-place order effective from 12:00 am, March 18, to April 7, 2020.

Sonoma County Economic Development Board

Coronavirus Business Resources page:

<http://sonomaedb.org/Business-Assistance/Coronavirus-Business-Resources/>

- **Business Mitigation Checklist:** Checklist to ensure business meets or exceeds requirements to reopen when developing business plan to incorporate the necessary protocol to reopen *once allowed by local and/or state health orders*. Refers to [CA.gov Resilience Roadmap](#).
- **Business Self-Certification Assessment:** Online portal for businesses to self-certify, *once state and/or local health orders allow them to open*, that they are committed to meeting or exceeding requirements of the Business Mitigation Practices put into place by the County of Sonoma to prevent the spread of COVID-19.

Sector Specific Guidance and Best Management Practices (continually being updated):

<http://sonomaedb.org/Business-Assistance/Coronavirus/Business-Management-Plans/>

Construction

- [Best Management Practices Plan](#)

Hotels and Hospitality

- [Best Management Practices Plan](#)

Manufacturing

- [Best Management Practices Plan](#)

Restaurants and Retail

- [Best Management Practices Plan](#)

Restaurants & Hospitality

- [Sonoma County Tourism Coronavirus Toolkit](#)
- [California Hotel & Restaurant Association COVID-19 Resources](#)

Agriculture, Wine & Cannabis

- [COVID-19 Infection Prevention for Agricultural Employers and Employees](#)
- [Meat and Poultry Processing Guidelines for Workers and Employers](#)

Additional Best Management Practices Plans in progress to be in alignment with State-issued Guidance: Agriculture; Faith Based Organizations; Gyms and Fitness Studios; Janitorial Services and Car Washes; Realtors; Recreation; Vacation and Short Term Rentals.

Additional Resources

Centers for Disease Control and Prevention: <https://www.cdc.gov/coronavirus/2019-ncov/communication/guidance-list.html?Sort=Date%3A%3Adesc>

Cal/OSHA Guidance on Requirements to Protect Workers from Coronavirus: <https://www.dir.ca.gov/dosh/coronavirus/>



May 20, 2020

The Honorable Sonia Y. Angell, MD
California Department of Public Health
Director, State Health Officer
P.O. Box 997377 MS 0500
Sacramento, CA 95899

Dear Dr. Angell:

Healdsburg District Hospital supports the attestation by Dr. Sundari Mase that Sonoma County can meet the readiness criteria to allow for further progression into Stage 2 of the Governor's Pandemic Resilience Roadmap.

During the COVID-19 pandemic, the County's Public Health Officer, Dr. Sundari Mase, has met regularly with our hospitals to coordinate surge planning, monitor healthcare capacity, and obtain our feedback. Dr. Mase has also implemented community mitigation strategies that have helped Sonoma County flatten the curve. As the pandemic spread in the country and in California, we mobilized a preparedness plan that would accommodate a surge and protect patients and staff from exposure through appropriate personal protective equipment (PPE), universal masking, employee screening, physical distancing, restricting visitors in congregate facilities, and limiting access to the hospital for non-urgent care. We believe that these factors along with the early shelter in place order and physical distancing in our community worked together to flatten the curve and keep hospitalization rates low.

We agree with Dr. Mase's assessment that Sonoma County is actively monitoring infection through epidemiology, implementing containment measures, offering a sufficient amount of testing and contact tracing, monitoring hospital capacity and plans for surge, and protecting vulnerable populations. Our hospital and clinics also have sufficient personal protective equipment (PPE) to protect our health care workforce, both clinical and nonclinical.

As an organization that strives to follow evidence-based practices and guidelines, we support the evidence-based approach Dr. Mase is taking that permits re-opening those businesses with a risk of transmission that is low or medium as determined by the intensity of contact and the number of contacts. With this rationale, combined with physical distancing and other safety measures imposed on businesses prior to opening, we are supportive of advancing through Stage 2. We have reviewed our current capacity, surge plan, safety precautions, and availability of PPE inventory and believe that we have the readiness and capacity to support our communities accordingly. We know this will be done carefully through a continued collaboration between county public health, our health systems, and our business community.



The Honorable Sonia Y. Angell, MD
California Department of Public Health
Director, State Health Officer
Page 2

Healdsburg District Hospital supports the need to protect vulnerable populations, continue physical distancing, and monitor metrics that may trigger the need to reinstate more restrictive measures. We support Sonoma County's evidence-based plan to proceed with a variance in order to allow more businesses and workplaces to open. We will remain in close communication and collaboration with Dr. Mase and will continue to keep the Department of Health Services apprised of any hospitalizations related to COVID-19.

Thank you,

A handwritten signature in black ink, appearing to read 'James P. Schuessler', written over a large, light-colored circular stamp or watermark.

James P. Schuessler
Chief Executive Officer
Healdsburg District Hospital

May 20, 2020

Barbie Robinson, MPP, JD, CHC
Sonoma County Department of Health Services
1450 Neotomas Ave., Ste 200
Santa Rosa, CA 95405

Re: Variance to Stage 2 of California's Roadmap to Modify the Stay-at-Home Order

Dear Ms. Robinson:

In response to your request, Santa Rosa Kaiser Foundation Hospital in Sonoma County:

- Has capacity to accommodate a minimum surge of 35% due to COVID-19 cases, in addition to providing usual care for its non-COVID-19 patients.
- Has adequate Personal Protective Equipment (PPE) to protect its workforce.

We understand that Sonoma County has requested this information in order to assess its readiness to request a local variance to move to Stage 2 in California's Roadmap to Modify the Stay-At-Home Order.



Tarek Salaway, MHA, MPH, MA
Sr. VP/Area Manager
Kaiser Permanente
Marin-Sonoma Service Area

COUNTY OF SONOMA
BOARD OF SUPERVISORS

575 ADMINISTRATION DRIVE, RM. 100A
SANTA ROSA, CALIFORNIA 95403

(707) 565-2241
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MEMBERS OF THE BOARD

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CHAIR

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DAVID RABBITT

SHIRLEE ZANE

JAMES GORE

May 19, 2020

The Honorable Gavin Newsom
Governor of California
State Capitol
Sacramento, CA 95814

The Honorable Sonia Y. Angell, MD
California Department of Public Health
Director State Health Officer
P.O. Box 997377 MS 0500
Sacramento, CA 95899

The Honorable Mark Ghaly, MD
Secretary, CA Health & Human Services Agency
1600 Ninth Street, Room 460
Sacramento, CA 95814

Dear Governor Newsom, Secretary Ghaly, and Dr. Angell:

On behalf of the Sonoma County Board of Supervisors, I am writing in appreciation and support of the swift actions taken by Sonoma County's Public Health Officer and the diligence of our community positioning Sonoma County to progress further into Stage 2 of California's Pandemic Resilience Roadmap. The Sonoma County Board of Supervisors strongly supports Public Health Officer Dr. Sundari Mase's attestation of Sonoma County's readiness to the California Department of Public Health (CDPH) under the CDPH's Guidance to Counties for Variance to Stage 2 of California's Roadmap to Modify the Stay-at-Home Order.

On March 17, 2020, Dr. Mase issued a Shelter-in-Place Order (County Order) – two days before the State's Stay-at-Home Order (State Order) – when Sonoma County had only four positive COVID-19 cases. Not only was County Order more restrictive than the State Order, additional actions were taken beyond those required by the State, including:

- Order Closing Parks
- Blanket Quarantine and Isolation Orders
- Mandatory Facial Coverings Order
- Orders Setting Requirements for Congregate Care and Living Facilities and First Responders

Due to these quick actions by Dr. Mase and the broad compliance of our community, we were successful in substantially flattening the curve. Indeed, initial modeling showed the need for 1,500 hospital beds to meet the projected surge; however, due to the actions taken in our County, updated modeling shows a much less significant surge with only 600-1,000 beds needed. The County is well positioned to meet this need. Indeed, in the past 14 days, the number of confirmed COVID-19 patients hospitalized has remained well below the 20 on any single day criteria.

Early on, the County launched an aggressive surveillance testing program and took other actions to protect our most vulnerable communities – from older adults and residential care facilities to our unsheltered population. While every death is tragic and unacceptable, due to these actions, we have had only four COVID-19 related deaths in our County. Working with the State and local partners, we established alternate care (ACS) and non-congregate shelter (NCS) sites at Sonoma State University, as well as other non-congregate shelter using State-provided trailers, allowing us to provide housing to our most vulnerable while taking bed capacity pressure off of our hospitals.

In addition to flattening the curve, the County also significantly increased its testing capacity over the last several weeks. Although this ramping up of testing since May 5th has increased the number of positive results (as would be expected), the percentage rate of positive results has remained stable between 3-4%, well below the 8% positivity rate criteria. Importantly, the vast majority of positive cases (77%) over the past 14 days were among close contacts of positive cases who were identified through contract tracing demonstrating both the low amount of community transmission and the success of our aggressive contact tracing program. Through partnership with the State, local non-profit organizations, and community members, the County's contact tracing program continues to grow.

Given our expanded testing capacity and contact tracing program, along with our ACS/NCS sites, we are confident that the County's has the infrastructure, processes, and resources to reliably detect and isolate new cases and to quickly impose any needed restrictions if data suggests community transmission is increasing or hospital capacity is threatened.

Recognizing the incredible sacrifices by our local business to protect our community, the County is also helping to address the pandemic's crippling economic impacts. Our Economic Development Board has built on the Governor's guidances with additional industry specific best management practices (BMPs) and is helping procure and distribute critical supplies to allow business to reopen while protecting workers and the community. In addition, working with IBM, the County has developed a free smart phone COVID-19 symptom self-assessment application for employers to use.

The Sonoma County Board of Supervisors support the need to protect vulnerable populations, continue social distancing, and monitor indicators that may trigger the need to reinstate more restrictive measures. At the same time, it is important to find a balance that allows for some businesses to reopen while also protecting the community's health. We believe Sonoma County's plan to proceed with a variance in order to allow more businesses and workplaces to open, with appropriate modifications and protocols, is in the best interest of our community. As a Board, we have full confidence in Dr. Mase and support the approach contained in the attestation as a better reflection of Sonoma County's progress in meeting this great challenge and readiness to carefully move further into Stage 2.

We greatly appreciate the State's partnership and thank you for the opportunity for counties to move at different paces through Stage 2 based on county-specific circumstances. We whole-heartedly support the variance request.

Sincerely,

A handwritten signature in cursive script that reads "Susan Gorin".

Susan Gorin, Chair
Sonoma County Board of Supervisors

cc: The Honorable Bill Dodd, California State Senate
The Honorable Mike McGuire, California State Senate
The Honorable Jim Wood, California State Assembly
The Honorable Marc Levine, California State Assembly
The Honorable Cecilia Aguiar-Curry, California State Assembly
Sonoma County Board of Supervisors



May 20, 2020

The Honorable Sonia Y. Angell, MD
California Department of Public Health
Director, State Health Officer
P.O. Box 997377 MS 0500
Sacramento, CA 95899

Dear Dr. Angell:

Sonoma Valley Hospital supports the attestation by Dr. Sundari Mase that Sonoma County can meet the readiness criteria to allow for further progression into Stage 2 of the Governor's Pandemic Resilience Roadmap.

During the COVID-19 pandemic, the County's Public Health Officer, Dr. Sundari Mase, has met regularly with our hospitals to coordinate surge planning, monitor healthcare capacity, and obtain our feedback. Dr. Mase has also implemented community mitigation strategies that have helped Sonoma County flatten the curve. As the pandemic spread in the country and in California, we mobilized a preparedness plan that would accommodate a surge and protect patients and staff from exposure through appropriate personal protective equipment (PPE), universal masking, employee screening, physical distancing, restricting visitors in congregate facilities, and limiting access to the hospital for non-urgent care. We believe that these factors along with the early shelter in place order and physical distancing in our community worked together to flatten the curve and keep hospitalization rates low.

We agree with Dr. Mase's assessment that Sonoma County is actively monitoring infection through epidemiology, implementing containment measures, offering a sufficient amount of testing and contact tracing, monitoring hospital capacity and plans for surge, and protecting vulnerable populations. Our hospitals and clinics also have sufficient personal protective equipment (PPE) to protect our health care workforce, both clinical and nonclinical.

As an organization that strives to follow evidence-based practices and guidelines, we support the evidence-based approach Dr. Mase is taking that permits re-opening those businesses with a risk of transmission that is low or medium as determined by the intensity of contact and the number of contacts. With this rationale, combined with physical distancing and other safety measures imposed on businesses prior to opening, we are supportive of advancing through Stage 2. We have reviewed our current capacity, surge plan, safety precautions, and availability of PPE inventory and believe that we have the readiness and capacity to support our communities accordingly. We know this will be done carefully through a continued collaboration between county public health, our health systems, and our business community.

The Honorable Sonia Y. Angell, MD
California Department of Public Health
May 20, 2020
Page Two

Sonoma Valley Hospital supports the need to protect vulnerable populations, continue physical distancing, and monitor metrics that may trigger the need to reinstate more restrictive measures. We support Sonoma County's evidence-based plan to proceed with a variance in order to allow more businesses and workplaces to open. We will remain in close communication and collaboration with Dr. Mase and will continue to keep the Department of Health Services apprised of any hospitalizations related to COVID-19.

Thank you,

A handwritten signature in black ink, appearing to read "Kelly Mather". The signature is fluid and cursive, with the first name "Kelly" written in a larger, more prominent script than the last name "Mather".

Kelly Mather
President and Chief Executive Officer

The Honorable Sonia Y. Angell, MD
California Department of Public Health
Director, State Health Officer
P.O. Box 997377 MS 0500
Sacramento, CA 95899

Dear Dr. Angell:

Santa Rosa Memorial Hospital and Petaluma Valley Hospital support the attestation by Dr. Sundari Mase that Sonoma County can meet the readiness criteria to allow for further progression into Stage 2 of the Governor's Pandemic Resilience Roadmap.

During the COVID-19 pandemic, the County's Public Health Officer, Dr. Sundar Mase, has met regularly with our hospitals to coordinate surge planning, monitor healthcare capacity, and obtain our feedback. Dr. Mase has also implemented community mitigation strategies that have helped Sonoma County flatten the curve. As the pandemic spread in the country and in California, we mobilized a preparedness plan that would accommodate a surge and protect patients and staff from exposure through appropriate personal protective equipment (PPE), universal masking, employee screening, physical distancing, restricting visitors in congregate facilities, and limiting access to the hospital for non-urgent care. We believe that these factors along with the early shelter in place order and physical distancing in our community worked together to flatten the curve and keep hospitalization rates low.

We agree with Dr. Mase's assessment that Sonoma County is actively monitoring infection through epidemiology, implementing containment measures, offering a sufficient amount of testing and contact tracing, monitoring hospital capacity and plans for surge, and protecting vulnerable populations. Our hospitals and clinics also have sufficient personal protective equipment (PPE) to protect our health care workforce, both clinical and nonclinical.

As an organization that strives to follow evidence-based practices and guidelines, we support the evidence-based approach Dr. Mase is taking that permits re-opening those businesses with a risk of transmission that is low or medium as determined by the intensity of contact and the number of contacts. With this rationale, combined with physical distancing and other safety measures imposed on businesses prior to opening, we are supportive of advancing through Stage 2. We have reviewed our current capacity, surge plan, safety precautions, and availability of PPE inventory and believe that we have the readiness and capacity to support our communities accordingly. We know this will be done carefully through a continued collaboration between county public health, our health systems, and our business community.

Santa Rosa Memorial Hospital and Petaluma Valley Hospital supports the need to protect vulnerable populations, continue physical distancing, and monitor metrics that may trigger the need to reinstate more restrictive measures. We support Sonoma County's evidence-based plan to proceed with a variance in order to allow more businesses and workplaces to open. We will remain in close communication and collaboration with Dr. Mase and will continue to keep the Department of Health Services apprised of any hospitalizations related to COVID-19.

Thank you,


Tyler Hedden, Chief Executive



May 20, 2020

Sundari Mase, MD, MPH
Public Health Officer, Sonoma County

625 5th Street
Santa Rosa, CA 95404

Dr. Mase,

In response to your request, Sutter Health's integrated health delivery system:

- Is prepared to accommodate a surge of 35% due to COVID-19 cases in addition to providing care to non COVID-19 patients, as outlined in the surge plan submitted to the State of California, and
- Has adequate PPE to protect our employees and clinicians.

We understand that Sonoma County will use this letter to support their application for a variance to move through the stages to re-open.

Sincerely,

A handwritten signature in black ink that reads "Stephen H. Lockhart". The signature is fluid and cursive, with a long horizontal line extending from the end.

Stephen H. Lockhart, MD, PhD
Chief Medical Officer, Sutter Health