# 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 14<sup>th</sup>, the State presented the Pandemic Roadmap, a four-stage plan for modifying the Stay-at-Home order, and, on May 4<sup>th</sup>, 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 <u>Jake.Hanson@cdph.ca.gov</u> 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 reinstituting restrictions, in advance of any state action. Counties must also submit their plan for how they anticipate moving through Stage 2 (e.g., which sectors will be opened, order of opening etc.).

#### Readiness Criteria

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

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

 $_{\odot}$   $\,$  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
    - 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 safety 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 <u>Jake.Hanson@cdph.ca.gov</u>

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 \_\_\_\_\_

# Appendix A: Physical Distancing Protocol

Business Name:

Facility Address:

Approximate gross square footage of space open to the public:

f†²

Businesses must implement all applicable measures listed below and be prepared to explain why any measure that is not implemented is not applicable to the business.

When completing this form, mark all checkboxes applicable to the facility.

# Signage

- Place a sign at each public entrance of the facility to inform all employees and customers that they should: avoid entering the facility if they have a cough or fever; maintain a minimum six-foot distance from one another; sneeze and cough into a cloth or tissue or, if not available, into one's elbow; not shake hands or engage in any unnecessary physical contact, and wear a face covering.
- □ Post a copy of this Physical Distancing Protocol at each public entrance to the facility.

# Measures to Protect Employee Health

- □ Everyone who can carry out their work duties from home has been directed to do so.
- □ All employees have been told not to come to work if sick.
- □ Symptom checks are being conducted before employees may enter the work space.
- □ All desks or individual work stations are separated by at least six feet.
- □ Break rooms, bathrooms, and other common areas are being disinfected frequently, on the following schedule:
  - □ Break rooms:
  - □ Bathrooms:
  - □ Other:
- Disinfectant and related supplies are available to all employees at the following location(s):

□ Hand sanitizer effective against COVID-19 is available to all employees at the following location(s):

□ Soap and water are available to all employees at the following location(s):

□ Encourage employees and customers to wear a face covering that covers the nose and mouth at all times when in the facility. Provide such face coverings to employees if needed.

- □ Copies of this Protocol have been distributed to all employees.
- □ Optional—Describe other measures:

## Measures to Prevent Crowds from Gathering

□ Limit the number of customers in the facility at any one time to [insert maximum number here], which allows for customers and employees to easily maintain at least sixfoot distance from one another at all practicable times.

□ Post an employee at the door to ensure that the maximum number of customers in the facility set forth above is not exceeded.

□ Placing per-person limits on goods that are selling out quickly to reduce crowds and lines. Explain:

□ Optional—Describe other measures:

# Measures to Keep People at Least Six Feet Apart

- □ Placing signs outside the store reminding people to be at least six feet apart, including when in line.
- □ Placing tape or other markings at least six feet apart in customer line areas inside the facility and on sidewalks at public entrances with signs directing customers to use the markings to maintain distance.
- □ Separate order areas from delivery areas to prevent customers from gathering.
- □ All employees have been instructed to maintain at least six feet distance from customers and from each other, except employees may momentarily come closer when necessary to accept payment, deliver goods or services, or as otherwise necessary.
- □ Optional—Describe other measures:

# **Measures to Prevent Unnecessary Contact**

- □ Preventing people from self-serving any items that are food-related.
  - □ Lids for cups and food-bar type items are provided by staff and not available for self-service.
  - □ Bulk-item food bins are not available for customer self-service use.
- □ Not permitting customers to bring their own bags, mugs, or other reusable items.
- □ Providing for contactless payment systems or, if not feasible, sanitizing payment systems regularly. Describe:
- □ Optional—Describe other measures (e.g., providing senior-only hours):

# Measures to Increase Sanitization

- □ Disinfecting wipes that are effective against COVID-19 are available near shopping carts and shopping baskets.
- Employee(s) assigned to disinfect carts and baskets regularly.
- □ Hand sanitizer, soap and water, or effective disinfectant is available to the public at or near the entrance of the facility, at checkout counters, and anywhere else inside the store or immediately outside where people have direct interactions.
- □ Disinfecting all payment portals, pens, and styluses after each use.
- □ Disinfecting all high-contact surfaces frequently.
- □ Optional—Describe other measures:

\* Any additional measures not included here should be listed on separate pages, which the business should attach to this document.

You may contact the following person with any questions or comments about this Protocol: CONTACT NAME: CONTACT PHONE:

Physical Distancing Protocol | Page 3



For more business information on COVID-19 visit: TCDisasterAssistance.com

Tuolumne County Administration Center 2 South Green Street Sonora, CA 95370



BOARD OF SUPERVISORS COUNTY OF TUOLUMNE

Sherri Brennan, First District John L. Gray, *Fourth District* 

Ryan Campbell, Second District

May 8, 2020

To: California Department of Public Health Attn: Jake Hanson

From: Tuolumne County Board of Supervisors

The Tuolumne County Board of Supervisors would like to voice our appreciation for the Governor and his administration's handling of the COVID-19 pandemic. The support and resources that have been provided for all counties have gone a long way in helping to keep our community healthy and safe.

The Board of Supervisors has been kept apprised of the pandemic and the response by our County's Health & Human Services Agency and County Emergency Operations teams since the pandemic was unfolding in January. On March 17th, the County Board of Supervisors declared a Local Emergency in response to the increasing cases Statewide. The Governor's subsequent "Stay at Home" Order, issued on March 19th, was adhered to by both the businesses and residents of our County.

We recognize that these measures, although seemingly drastic at the time, were essential to the success of our County in preparing for and addressing the spread of the disease amongst our residents. We did not experience our first case in Tuolumne County until March 26<sup>th</sup> from a non-Tuolumne County resident and so far, only two Tuolumne County residents have tested positive and both have recovered. This afforded us the time to build our necessary capabilities and thoughtfully plan for our Roadmap to reopen.

As our County understands the interconnectedness of other counties and entities, especially Yosemite National Park and the Stanislaus Forest, we have been doing advanced planning for reopening/recovery as a region, known as the Yosemite Area Gateway Coordination Team, since mid-March.

On Monday, May 4th, the Governor announced his plan to move to early Stage 2 of the Roadmap as a state by Friday, May 8th. He indicated that in order for counties to move forward with opening up more businesses and relaxing the restrictions, moving into late

Alicia L. Jamar Chief Deputy Clerk of the Board Of Supervisors

Telephone: (209 533-5521 Facsimile (209) 533-6549 www.tuolumnecounty.ca.gov

> Anaiah Kirk, *Third District* Karl Rodefer, *Fifth District*

Stage 2, County Health Officer's would need to submit a County Variance Attestation to the State, demonstrating a high level of readiness to address the following areas:

- Stabilized or Declining COVID-19 rates and Stability of Hospitalizations
- Testing Capacity
- Containment/Contact Tracing Capacity
- Medical Surge/Hospital Capacity
- Ability to Protect Vulnerable Populations

As a Board, we have been kept apprised of the epidemiological and surveillance data for our County and surrounding region and the efforts by all of our County Departments, local healthcare system, congregate living facilities, the Yosemite Area Gateway Coordination Team's planning efforts, and the State's support in building our testing capacity. These have all been adequately outlined and addressed in our County Health Officer's Attestation.

Over the course of this pandemic, we have continued to invite public and stakeholder input at our regularly scheduled and special meetings of our Board of Supervisors, as well as through email, social media, an online public forum. We feel confident that the needs of our residents can be met through moving forward with the variances.

We, the board of supervisors of Tuolumne County fully support our County Health Officer and Public Health Department in submitting an attestation that Tuolumne County will accelerate through Stage 2 using the criteria and process set up by the California Department of Public Health.

Respectfully,

Sheni Bureno.

Sherri Brennan-Chair



Administration

1000 Greenley Road Sonora, CA 95370 AdventistHealth.org

May 11, 2020

Dear Dr. Ortiz,

To assist in your attestation with the California Department of Public Health, Adventist Health Sonora can attest to the following:

- We will be able to accommodate a 35% surge due to Covid-19 patients while providing usual care for our non-covid patients. The specifics are not definable because the surge planning is flexible and scaleable to demand. Suffice it to say we would be using existing manpower from clinics which have been scaled back to take care of these surge patients. We have adequate room in our facilities although it may involve some non-traditional spaces.
- 2) We will protect our staff from exposure to the limits of supply. Currently, Patients suspected of having Covid-19 are treated by personnel wearing full ppe. We are screening individuals entering the facility, are all masking, are limiting visitors, and are monitoring test results.

Obviously, these plans will change given the case volume, and we are fortunate to have the time to continually prepare.

Thank you,

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Alexander Heard, MD Medical Officer, Adventist Health Sonora



## ATTACHMENT 4 – Map of Testing Sites within 60-minute Driving Time