

COUNTY OF EL DORADO

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Attestation of Readiness to Participate in Regional Acceleration of Phase 2

In accordance with Governor Newsom's and the California Department of Public Health's guidance for counties moving into Phase 2 of relaxation of the governor's stay-at-home order, I am producing this attestation of readiness by El Dorado County. Each of the indicators of readiness is addressed below.

1. Stability of Hospitalizations

The maximum number of patients hospitalized (Medicine/Surgery floor, ICU, or Emergency Department) in El Dorado County's two hospitals (Barton Memorial Hospital in South Lake Tahoe and Marshall Medical Center in Placerville) on any given date from April 20, 2020 through May 4, 2020 (the most recent 2-week period for which we have data) was two. That occurred on a single day. On each of three other dates (most recently, April 27), there was one person hospitalized. To date, neither hospital has had a COVID-19 patient in the ICU.

[EDC graph placeholder]

2. Personal Protective Equipment Inventory

We have been polling our hospitals regularly and our long-term care facilities and other group living facilities (including independent living retirement apartment facilities) periodically about their PPE supplies and their confidence in their regular supply chains, most recently on May 5. Both hospitals confirmed on May 4 that they have sufficient PPE supplies to handle a surge in COVID-19 patients.

Of the 15 residential care facilities with more than 6 beds (ranging from 10 to 250 beds or apartments), all but one affirmed that they currently have at least 14 days of PPE on hand and the majority (11/15) were confident in their supply chains. Our Medical Health Operations Area Coordinator (MHOAC) reached out to the three with concerns, including the one with inadequate supply, educated them about how much PPE they should have on hand, and how and when to contact the MHOAC for back-up assistance. Of the 21 six-bed facilities, 16 reported adequate (14-day or greater) supplies of PPE, three expressed concern about future ordering and three reports are pending.

3. Health Care Surge Capacity

Both El Dorado County hospitals have established significant surge capacity. In South Lake Tahoe, Barton Memorial Hospital has plans to expand its acute-care bed capacity from 63 to 150 and its ICU and ventilator capacity from 9 to 16. It also has established a medical corps of 132 clinical and nonclinical staff to augment its regular staff if necessary in times of surge. In Placerville, Marshall Medical Center has plans to expand its regular acute-care bed capacity from 124 to 198 and its ICU capacity from 12 to at least 20 with similar increase in ventilator capacity.

4. Testing capacity

Prior to the launch of two OptumServe testing sites in our county, testing was being performed county-wide at a rate of approximately 40-50 tests per day. With this new capacity, testing capacity has increased at least six-fold. In addition to that, our Public Health department just received hundreds of testing kits, has staff available already trained to collect nasopharyngeal specimens, and has access to the Sacramento Public Health Laboratory in addition to our county's two hospitals, all of whom we contract with for laboratory services. Although not necessary at this time, we are aware that UCSF has also offered free testing to all California counties and plan to take advantage of that if our other sources of testing are tapped.

With OptumServe sites within easy reach of our most populous areas in the western, eastern, and middle portions of the county, only the residents in the most northern and southern rural parts of our county would not be able to reach the OptumServe sites within a 60-minute drive of their homes. However, residents in those rural communities could drive for less than 60 minutes to be tested at Marshall Medical Center, the El Dorado Community Health Center, Western Sierra Medical Group, and/or the Placerville Public Health office.

5. Contact Tracing Capability

El Dorado County's Public Health team has been able to keep up with the full scope of case investigation, contact tracing, and directing isolation and quarantine as indicated with minimal staff augmentation, including maintaining capability to handle the work required to respond to reports of other Title 17 reportable diseases, including syphilis and enteric diseases. At present, figuring in the percentage of time communicable-disease staff members are spending on COVID-19 cases, our current baseline for staffing is estimated to be approximately 3.5 FTE employees.

We have begun training additional Public Health staff to join the contact tracing response team as demand rises. This is part of a plan that includes several phases, starting with staff who are underutilized in their current assignments, then increasing a number of staff members' work schedules from part-time to full-time, and then, if necessary, training and deploying additional staff members who would reduce the volume of their routine less critical work to join the effort. This would result in up to 10.4 additional FTE available, raising our available staff time for contact tracing to 4 times current capacity.

Although not anticipated to be necessary, in parallel with the last phase of that expansion effort, we are also considering training staff members currently working in county departments outside Public Health. Finally, we are also aware that the State is training thousands of its own workers to perform contact tracing and although we are confident that we can handle surges on our own we could welcome that option as a way to avoid having to decrease other public health programmatic activities or to save cost.

6. Public Health Guidance in Place

In preparation for moving into Phase 2, our Emergency Operations Center team prepared tentative plans for resuming various business and personal activities in our county safely. These align well with the Governor's description of the State's Phase 2 allowable activities. The document contains generic best-practices for all businesses, such as how to implement measures to protect employees, customers, and the general public from COVID-19 exposure, including guidance for signage, measures to discourage crowds from gathering and to encourage six-foot spacing between people, and recommendations for sanitization. We are augmenting our current *Reopening Guidelines: All Businesses and Employers* document to incorporate the new business guidelines being issued by CDPH this week.

In conclusion, by my signature below, I attest that my county has well surpassed the minimum readiness standards and is in an excellent position to maintain them for the long run.

Brian Veerkamp, Chair
El Dorado County Board of Supervisors

Date