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



COVID-19 COUNTY VARIANCE ATTESTATION FORM

FOR EL DORADO COUNTY

Background

On March 4, 2020 Governor Newsom proclaimed a State of Emergency as a result of the threat of COVID-19, and on March 12, 2020, through Executive Order N-25-20, he directed all residents to heed any orders and guidance of state and local public health officials. Subsequently, on March 19, 2020, Governor Newsom issued Executive Order N-33-20 directing all residents to heed the State Public Health Officer's Stay-at-Home order which requires all residents to stay at home except for work in critical infrastructure sectors or otherwise to facilitate authorized necessary activities. On April 14th, the State presented the Pandemic Roadmap, a four-stage plan for modifying the Stay-at-Home order, and, on May 4th, announced that entry into Stage 2 of the plan would be imminent.

Given the size and diversity of California, it is not surprising that the impact of COVID-19 has differed across the state. While some counties are still in the initial stabilization phase (Stage 1) of the pandemic response, there are a number of less affected counties. Provided these counties are able to demonstrate an ability to protect the public and essential workers, they may be in a position to adopt aspects of Stage 2 of California's roadmap at a faster pace than the state as a whole. As directed by the Governor in Executive Order N-60-20, this guidance provides information on the criteria and procedures that counties will need to meet in order to move more quickly than other parts of the state through Stage 2 of modifying the Stay-at-Home order. It is recommended that counties consult with cities and other stakeholders as they consider moving through Stage 2.

Local Variance

A county that has met certain criteria in containing COVID-19 may consider increasing the pace at which they advance through Stage 2, but not into Stage 3, of California's roadmap to modify the Stay-at-Home order. Counties are encouraged to first review this document in full to consider if a variance from the state's roadmap is appropriate for the county's specific circumstances. If a county decides to pursue a variance, the local public health officer must:

- 1. Notify the California Department of Public Health (CDPH) and engage in a phone consultation regarding the county's intent to seek a variance.
- 2. Certify through submission of a written attestation to CDPH that the county has met the readiness criteria (outlined below) designed to mitigate the spread of COVID-19. Attestations should be submitted by the local public health officer, and accompanied by a letter of support from the County Board of Supervisors, as well as a letter of support from the local hospitals or health care systems. In the event that the county does not have a hospital or health care system within its jurisdiction, a letter of support from the

relevant regional health system(s) is also acceptable. The full submission must be signed by the local public health officer.

All county attestations, and submitted plans for moving through Stage 2 as outlined below, will be posted publicly on CDPH's website.

While not required, CDPH recommends as a best practice the development of a county COVID-19 containment plan by the local public health officer in conjunction with the hospitals and health systems in the jurisdiction, as well as input from a broad range of county stakeholders, including the County Board of Supervisors.

In addition to pre-submission phone consultations, CDPH is available to provide technical assistance to counties as they develop their attestations and COVID-19 containment plans. Please email Jake Hanson at <u>Jake.Hanson@cdph.ca.gov</u> to set up a time with our technical assistance team.

| County Name: El Dorado County |
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| County Contact: Nancy Williams, MD, MPH, Public Health Officer |
| Public Phone Number: 530-621-6320 Option 4 (effective Monday, 5/11/2020) |

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.

El Dorado County's estimated population is 192,843 (2019). During the most recent 14 days (4/24 through 5/7), a total of 12 cases have been reported (0.6/10,000).

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

There have been no COVID-19 deaths to date in El Dorado County.

There have also been no ICU cases of COVID-19 in the County.

- 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).

El Dorado County issued reopening guidelines to all businesses and employers, which are readily accessible on the County's website. These guidelines are in accordance with CDPH and best safety practices. Starting early in the pandemic, we have placed the greatest emphasis on maintaining protection of workers in the highest priority groups, including healthcare workers and first responders and more recently have expanded to offer guidance to additional employer and employees through our reopening guidance.

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

While a primary focus of the County's has been to support and assist high priority essential businesses, such as healthcare and first responders, from early on, we recognized the need to support the entire community. In an effort to provide wider support and to ensure that the greater community has ongoing access to the most current guidance, safe practices, and knowledge of how to acquire and maintain proper PPE supplies, in March 2020, the county established six working groups to identify issues: Emergency Preparedness,

- **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.

With an estimated El Dorado County population of 192,843 (2019), the 1.5/1000 residents requirement would be fulfilled by a minimum capacity of 289 tests/day.

The two OptumServe test sites alone will provide more than 90% of the required capacity. The remaining 25 tests/day needed is well exceeded by the capacities of two hospitals and the El Dorado Community Health Centers.

• 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.

Essentially all residents of El Dorado County could reach a test site in under 60 minutes and the vast majority could reach one within 30 minutes.

Residents within El Dorado County's two densest population areas (western portion, Sacramento suburban areas of El Dorado Hills and Cameron Park, and South Lake Tahoe in the east) are within 30 minutes of the one or the other of the two OptumServe sites. South Lake Tahoe

- **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.

With an estimated El Dorado County population of 192,843 (2019), the 15 staff/100,000 residents requirement would be fulfilled by having 28.5 trained staff members.

El Dorado County Public Health has more than 30 staff members, including Public Health Nurses (PHNs) and non-licensed staff, already trained or scheduled for training on COVID-19 case investigation and contact tracing using a case management approach. The PHNs will

 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. Conservatively, we refer to the official Point in Time (PIT) count, although we believe that a significant proportion of people counted were not unsheltered although they lacked permanent housing. In the last PIT count, El Dorado County (EDC) was identified to have 613 homeless individuals. 15% of this count indicates a need for 92 rooms.

El Dorado County has established, received approval from its Board of Supervisors, and implemented a three-phase plan to support residents

- 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.

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 130 (+106%) 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.

 County (or regional) hospital facilities have a robust plan to protect the hospital workforce, both clinical and nonclinical, with PPE. Please describe the process by which this is assessed.

Each of our hospitals attests to having a robust plan for protecting its respective workforces, both clinical and nonclinical, with PPE.

Specifically, Barton Memorial Hospital, by using its incident command structure, reviews available PPE on a minimum of a daily basis to ensure that it has and will continue to have sufficient PPE to protect both Barton's patients and its staff. Barton follows all CDC and CDPH guidelines for appropriate PPE use.

- **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..

County staff have periodically polled each of the facilities with greater than 40 beds, as well as smaller facilities. They were most recently polled from May 7-8, 2020.

Five skilled nursing facilities (SNFs) are located in El Dorado County and each reported having supplies of at least 14 days' worth of PPE for staff and confidence in their supply chains.

• Sectors and timelines. Please provide details on the county's plan to move through Stage 2. This should include which sectors and spaces will be opened, in what sequence, on what timeline. Please specifically indicate where the plan differs from the state's order. Please note that this variance should not include sectors that are part of Stage 3.

Due to the high degree to which I, in conjunction with my Public Health team, County leadership, the EOC, and community partners, including our two hospitals/healthcare systems feels that El Dorado County is ready for Stage 2 including allowing all Stage 2 businesses and activities as industry-specific and other Stage 2 guidelines are released by CDPH.

Criteria placed on businesses and activities allowed under Stage 2 are

• **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.

In collaboration with other Sierra-Sacramento area county health officers, I am adopting a common framework adapted for use by my local public health team to monitor a number of El Dorado County metrics with the goal of quickly identifying any potentially dangerous COVID-19 trends. The triggering of any of these metrics will prompt the review by a team of public health and medical experts consisting of El Dorado County's Public Health Officer and Epidemiologist, along with one representative from each El Dorado County hospital (forming a

• Your plan for moving through Stage 2. Please provide details on your plan for county to move through opening sectors and spaces that are part of the State's plan for Stage 2. A reminder, that this variance only covers those areas that are part of Stage 2, up to, but not including Stage 3. For additional details on sectors and spaces included in Stage 2, please go to the <u>California Coronavirus (COVID-19) Response County variance</u> web page

As noted above and in our attached plan, El Dorado County intends to allow all Stage 2 business activities to operate under CDPH's published guidance as soon as the specific guidance becomes available for each business sector and after the businesses have completed and implemented their formal plans.

Please refer to the section, "Sectors and Timelines" above for El Dorado County's more detailed plan for moving through Stage 2.

COVID-19 Containment Plan

While not mandatory, CDPH strongly recommends that counties requesting a variance to increase the pace through Stage 2 create a county COVID-19 containment plan as noted above. While not exhaustive, the following areas and questions are important to address in any containment plan.

Testing

- Is there a plan to increase testing to the recommended daily capacity of 2 per 1000 residents?
- Is the average percentage of positive tests over the past 7 days <7% and stable or declining?
- Have specimen collection locations been identified that ensure access for all residents?
- Have contracts/relationships been established with specimen processing labs?
- Is there a plan for community surveillance?

This is the first entry under El Dorado's currently optional COVID-19 containment plan. We wish to note that it is still a work in progress subject to further refinement, improvement, and possibly change depending on how the COVID-19 situation unfolds in our county.

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?

El Dorado County Public Health currently has five staff members trained who already perform case investigation and contact tracing. Our staff reflects the county's racial, ethnic and linguistic diversity. (County residents are approximately 86% white-nonhispanic and 12% hispanic, with 2% in other racial/ethnic categories.) We have fluent Spanish-speaking staff members

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?

El Dorado County is home to approximately 40 long-term care congregate care facilities, including skilled nursing facilities (SNFs), assisted living facilities, and residential care facilities. Other congregate care facilities in the county include residential facilities for developmentally disabled, behavioral health transitional houses, foster care facilities, residential treatment centers, etc.

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?

Hospital capacity is being tracked daily by the hospitals and reported to our Emergency Operations Center. These data include numbers of COVID-19 cases, overall hospital census, ICU census, ventilator availability, staffing, and surge capacity.

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?

The county conservatively has approximately 2000 essential workplaces based on North American Industry Classification System Industry Group Classifications listed with the California Employment Development Department. The county provided guidance to all businesses and employers, to include public and private entities. Part of that guidance includes the necessity for employers to

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?

The more rural central core of El Dorado County has experienced notably lower rates of COVID-19 than the eastern and western parts of the county, specifically El Dorado Hills to the west (which borders Sacramento County and is a bedroom community of the City of Sacramento) and South Lake Tahoe to the east (a tourist community that borders the State of Nevada and a highly

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?

El Dorado County has been actively engaging both of its incorporated cities (South Lake Tahoe and Placerville) since early in the pandemic, starting with daily informational teleconferences from Public Health's Department Operations Center back in March to the ongoing Emergency Operations Center's cooperators' calls that later took their place. The Public Health

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?

All of our surrounding counties, including Douglas County, NV, have had stable or declining rates of new infections of late. As a group, 10 county health officers in the Sierra-Sacramento region confer regularly about the COVID-19 situation and response. We felt that the entire area, including Sacramento County, is in a state of readiness to move comfortably and safely into Phase 2

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<u>Nan</u>, hereby attest that I am duly authorized to sign and act on behalf of <u>El Do</u>.I certify that <u>El Do</u>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 <u>El Do</u>,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 Nancy Williams, MD, MPH

Signature Nancy Williams Digitally signed by Nancy Williams Date: 2020.05.08 23:26:18 -07'00'

Position/Title Public Health Officer

Date 5/8/2020