

# DEL NORTE COUNTY ROADMAP TO RECOVERY WORKING DOCUMENT

May 15, 2020



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#### Introduction

Del Norte County would like to begin a strategic plan for reopening of the county in phases. Support from our communities, social obligation, and personal responsibility is critical for the success of the reopening plan. The safety and health of Del Norte County residents is the most important decision-making guide during the COVID-19 response and remains our number one priority.

Upon Governor Newsom's authorization, Del Norte County will implement the following guidelines in steps to begin the process of reopening businesses and social functions interrupted by the pandemic.

#### **Standard Guidelines and Considerations**

- All residents and visitors must adhere to these guidelines:
- Proper social distancing with 6 feet of space between one another in public.
- Washing hands frequently and thoroughly.
- Staying home if sick or not feeling well.
- Proper and suitable sanitation practices and protocols are followed at all facilities.
- All residents 65 or older or who have underlying health conditions are mandated to continue to stay-at-home.
- No large gatherings where proper social distancing cannot be maintained. Public gatherings over 10 persons not allowed.
- Facial coverings are mandatory in public settings, whenever possible to be used.

#### **Local Variance**

The state has recognized that not all counties in California are the same and that the same model won't fit all of the counties during the reopening process. Counties can move more quickly through Stage Two than the state if the local public health officer attests that the county meets the state's readiness criteria. The local public health officer has to send in our local data and a plan of what protections we have in place as well as how we will recognize when our cases are increasing too quickly and need to slow down our progression.

### **Readiness for Variance**

Counties must indicate readiness for this variance to the state guidelines based on certain criteria. The following are the triggers that allow us to transition into Stage Two:

Hospitalization and ICU trends are stable.

- Hospital surge capacity to meet demand.
- Sufficient PPE supply to meet demand.
- Sufficient testing capacity to meet demand.
- Contact tracing capacity county-wide.
- Isolation / quarantine guidelines are in place.
- Support for those who are isolated or exposed.
- Workplaces have available their individual plan to meet the standard guidelines.
   Plans should be available upon request. If listed as a plan requirement, all employees must wear a suitable mask during employment.

The attestation to the state outlined several criteria for readiness with a description of our local readiness to meet these requirements. Table 1 gives a description of each metric as well as local capacity. For a complete description, please see the attestation letter that was sent to the state on May 14, 2020.

#### **Stage Two: Cohort One**

Lower Risk Workplaces, Supportive Workplaces *May 8, 2020* 

Businesses considered low-risk (retail stores with curbside pickup, manufacturing to support such stores) may open but must be able to adhere to the above **standard guidelines** and develop a written plan showing how the business will execute those guidelines. Plans should be available upon request.

All businesses anticipating reopening during any Stage must follow guidelines as above and as appropriate to their industry, and/or California Department of Public Health (CDPH) guidance, when available.

# Stage Two: Cohort Two Moderate Risk Workplaces May 15 - June 3, 2020

Clothing-thrift stores, and fashion stores can reopen with limits on customers per hour, with social distancing in lines and entrances. In-store fittings would be discouraged, and home fittings that are returned would be shelved for a minimum of 3 days. Phone shopping would be encouraged. Thrift donations should be set aside and "aged" at normal temperature and humidity for at least 5 days to avoid persistent virus contamination.

Furniture stores can reopen with appointment only and social distance. No sales from the floor; warehouse only, unless a floor item can be held in the warehouse for at least 5 days.

Auto-dealers can resume sales, with appointments only and social distancing design of offices and showrooms. Social distance rules to be applied both inside and outside.

TABLE 1: State Readiness Criteria for Progression from Stage 2 Low Risk to Stage 2 Higher Risk

Criteria	State Metric & Local Readiness	
Epidemiological Stability	Metric 1: No more than 1 COVID-19 case per 10,000 in the past 14 days prior to attestation submission date. Four (4) cases in Del Norte County; 3 out of 4 cases are recovered.	
	Metric 2: No COVID-19 deaths in the past 14 days prior to attestation submission date. Zero (0) deaths in Del Norte County.	
Protection of Essential Workers	<b>Metric 3:</b> Guidance for employers and essential critical infrastructure workplaces on how to structure the physical environment to protect workers. Critical infrastructure workplaces have guidelines by sector.	
	Metric 4: Availability of supplies (disinfectant, essential protective gear) to protect essential workers. EOC tracks protective supplies and there is a process for assessing need and obtaining PPE for essential workers.	
Testing	Metric 5: Capacity to test 1.5 per 1,000 residents. Local testing is at an average of 11.6 tests per day.	
	<b>Metric 6:</b> Testing availability for at least 75% of the residents, as measured by specimen collection sites (including established healthcare providers) within 60-minute driving time in rural areas. The local hospital is the main source of testing, with in-house PCR testing a shared lab. As the hospital is centrally located, over 75% of the residents can access the facility within 1 hour.	
Containment Capacity	Metric 7: Sufficient contact tracing staff of at least 15 per 100,000 population. Public Health has 4 staff currently trained with a plan to add 6 public health staff and 2 DA investigators, which is well above the projected expectation of needed staff.	
	<b>Metric 8:</b> Availability of temporary housing units for 15% of county residents experiencing homelessness and COVID-19 positive. Del Norte County is using one local hotel in Crescent City with a contracted maximum of 20 rooms and a second hotel with 49 rooms can be contracted when the need arises. Our last estimate of persons experiencing homelessness was 254 and 15% of this is 38 persons.	
Hospital Capacity	Metric 9: 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. Stepwise surge capacity at the local hospital includes increasing ventilator capacity to 18 and more than double its normal bed capacity to be available for acute respiratory care. This exceeds the 35% requirement.	
	<b>Metric 10:</b> Hospital facilities have a robust plan to protect the hospital workforce, both clinical and non-clinical, with Personal Protective Equipment (PPE). The local hospital has undertaken robust measures to assure adequate staffing, staff training, and PPE supplies.	
Vulnerable Populations	Metric 11: Skilled nursing facilities (SNF) have a greater than 14 day supply of PPE on hand for staff with established process for ongoing procurement from non-state supply chains. Local SNF reports adequate supplies currently and has established supply lines and staffing reserves.	

Daycare can resume with protective masks for staff. Recommend smallest management groups in shared space, with child group cohorts.

Golf courses, non-congregate portions of public parks and trails may open, but services are limited and social distancing is strictly maintained.

Office-based businesses to reopen (telework is still encouraged whenever possible)

Limited services of landscape gardening, pet grooming and tanning facilities can resume with guidance by CDPH and industry standards related to COVID-19 in place.

Indoor dining to resume as per CHDP guidance documents. In addition, restaurants may continue or initiate outdoor dining capacity, following the same guidance.

Stage Two: Cohort Three Moderate Risk Workplaces June 3 - June 17, 2020

Destination retail to open. Follow CDPH guidelines for safe operation.

Car washes can open with proper guidance.

Dental services and routine ancillary medical services may resume open service under the advised PPE guidelines and develop a written plan showing how the business will execute those guidelines. Recommend following professional association guidelines.

Summer schools, vacation schools can reopen with small cohort groups, and following guidance from CDPH, CDC, and industry recommendations.

Planning for schools to reopen begins.

## **TABLE 2: STAGE 2 REOPENING PLAN BY BUSINESS SECTOR**

Before reopening, all businesses must do the following:

- 1. Perform a detailed risk assessment and implement a site-specific protection plan
- 2. Train employees on how to limit the spread of COVID-19, including how to <u>screen for symptoms</u> and stay home if they have them
- 3. Implement individual control measures and screenings
- 4. Implement disinfecting protocols
- 5. Implement physical distancing guidelines

All businesses must submit a COVID-19 Operations Plan to Del Norte County Public Health in order to reopen. The process for completing and submitting a plan is available at bit.lyDNR2R.

Stage Two Reopening Plan by Business Sector			
Cohort One: Open	Cohort Two: Opens May 15	Cohort Three: Opens June 3	
Retail (Curbside Pickup) Logistics and Warehousing Manufacturing	Clothing Stores Thrift Stores Furniture Stores Auto Dealerships Childcare Golf Courses Public Parks, non-congregate portions and trails Office Workspaces, teleworking still encouraged Limited Services (landscape gardening, pet grooming, tanning facilities) Dine-In Restaurants	Destination Retail Limited Services (car washes) Dental Services Routine Ancillary Medical Services Summer Schools Vacation Schools Planning for Reopening Begins More Details Soon	

#### **Tribal Businesses**

Tribal-owned businesses located within the reservation are subject to the jurisdiction of the respective tribal government. The County will work cooperatively with Tribal officials to support reopening and monitoring of Tribal-owned business located on-reservation when requested by the Tribe and notified they are ready to reopen, e.g., tribal government casinos, with tribal-imposed limits on occupancy and adherence to a tribal health and safety protocol reasonably similar (but not identical) to the County's Stage Two protocols. Monitoring will be subject to the jurisdictional limits of the County.

# **Criteria for Adjusting Modifications**

Based on bed availability at our local hospital and expectation of prolonged length of stay (LOS) for hospitalized patients, we anticipate that our local facility could manage an average of up to 2.5 admissions a day for this disease, and up to 1 ICU admission per week, without adversely impacting overall hospital function. We also expect that extreme cases requiring advanced specialty care could potentially be transferred out of the area, but we will not count on this as a solution, as usual destination hospitals may be constrained from accepting transfers due to local disease activity.

Reports of excess of either of these metrics for more than 3 days would prompt methods review and for more than 5 days, would prompt modification. Such modification would be driven by case contact results, as identifiable venues or business types that seemed to be the location for transmission would be modified first. As a general rule, modification would mean decreased business activity, or closure, unless a specific deficit in business plan implementation was identified. In the event that no focal source could be found among new cases, modifications would be done community wide, and would depend on what is currently active at the time. The most recent "relaxation" would be closed first, if the time interval since relaxation was long enough to account for an increase in disease activity. Barring that, the most likely sources among the allowed activities in Stage 2 would be dining in and children's camps and vacation schools, as these have the higher risk scores. For a sharp surge in cases that threatens the system as a whole, modifications could include orders to return to Stage 1 status. A sharp surge is broadly defined as disease activity that increases to the point that 6 or more admissions for COVID-19 happen on 3 consecutive days, or 20 admissions in any 4-day period. As part of moving to Stage Two variance, Health Officer orders would be prepared to cover limitations or closure of specific businesses, specific business types, specific Stage Two categories and all of Stage Two implementation strategies.

Monitoring for such changes are already in place, as the local hospital and SNF file local daily bed count reports and the activities are reviewed weekly at EOC meetings. As noted above, the Health Officer also regularly participates in the hospital leadership meeting that currently is one time a week, but was as frequent as daily, during the early part of the pandemic. Reporting of such changes would represent a cluster, and would need to be immediately reported to CDPH "Warmline" or the CDPH Duty Officer. In addition, if modification measures are undertaken for a lower level of concern in case activity.