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Jun 10, 2025

Anka Ung
Children's Hospital of Orange County
1201 W La Veta Ave
Orange, CA 92868

FACILITY: Children's Hospital of Orange County, LICENSE # 060000011

APPROVAL OF PROGRAM FLEXIBILITY FOR FLEX-12147

Dear Anka Ung,

This letter is in response to the request submitted by **Children's Hospital of Orange County** for program flexibility for California Code of Regulations T22 DIV5 CH1 ART8-70805.

The alternative means of compliance with T22 DIV5 CH1 ART8-70805 include

- 1) Overall Plan:** Children's Hospital of Orange County (CHOC) will use space licensed for PICU patients, known as 2East North (2E-N), for the acute care (medical surgical) patients overflow. The PICU area has 12 single-occupancy rooms, Room Numbers 211 to 222. There will be no commingling of the medical-surgical patients with the PICU patients in the flexed space area.
- 2) Ages of patients:** 0 to young adult.
- 3) Inclusion Criteria:** Acute care non-oncology patients. Ambulatory or diapered patients will be prioritized to the 2E-N flexed spaces.



4) Exclusion Criteria: Oncology patients.

5) Nursing Unit: CHOC will ensure compliance with nursing unit requirements per Title 22 section 70049.

6) Facilities/Environment:

a) Single patient space

b) Square footage

- Room 211 = 185.31 Square Feet

- Room 212 = 153.40 Square Feet

- Room 213 = 129.23 Square Feet

- Room 214 = 124.30 Square Feet

- Room 215 = 137.86 Square Feet

- Room 216 = 115.72 Square Feet

- Room 217 = 162.20 Square Feet

- Room 218 = 153.28 Square Feet

- Room 219 = 153.53 Square Feet

- Room 220 = 152.93 Square Feet

- Room 221 = 166.63 Square Feet

- Room 222 = 145.76 Square Feet

c) Headwall and outlets

• Each headwall has:

o 4 oxygen connections

o 4 air

o 4 suction

• Each room has:

o 8 regular two-plug outlet (16 items can be plugged into the outlet)

o 14 red two-plug outlet (28 items can be plugged into the outlet)

d) Privacy measures: Single rooms with closed doors (Rooms 211, 212, 217, 218, and 219) or with curtains which go completely around the patient for full privacy (Rooms 213, 214, 215, 216, 220, 221, and 222).

e) Bathroom Facilities: CHOC will prioritize diapered and ambulatory patients to the flexed spaces. The 2E-N space has a patient bathroom which is located between Rooms 212 and 213 and a second bathroom between an office and the nursing station in the unit (please see attached floor plan for the location of bathrooms outlined in yellow). These bathrooms will be rounded on at least every four hours by housekeeping staff to ensure cleanliness.

f) Ingress/Egress: Please refer to the attached Floor Plan. CHOC will ensure the entrance and exit to the spaces are clear and unobstructed.

7) Gases/Suction/Equipment: CHOC will ensure medical gases, call system, space, and related equipment and supplies are readily available and will meet the age-appropriate patient's designated level of care.

8) Signage: CHOC will ensure signage is visible and placed clearly to designate the flexed space.

9) Oversight: The Chief Nursing Officer, or designee, and physician leadership will provide oversight for acute care patients receiving care in 2E-N.

10) Staffing: CHOC will ensure the flexed spaces will be staffed per pediatric medical surgical nursing ratios per Title 22 section 70217. There will be a minimum of two pediatric nurses who have acute care competencies in the unit at all times. The staff assigned to care for patients in 2E-N will not be assigned to care for patients in other units at the same time.

11) Orientation/Training/Competencies: CHOC will ensure providers, nursing staff, and other staff/departments are provided with orientation to the 2E-N space. CHOC will ensure nurses and other staff will be assigned tasks and/or patient care within their scope of licensure, experience, training, and competence.

12) Emergency Response: CHOC will ensure age-appropriate safe rapid response and code blue response (known as code white at CHOC) and maintain age-appropriate crash cart, equipment, and supplies will be readily available at all times.

13) Patient Safety: CHOC will ensure placement of patients in 2E-N will be done in consideration of the health and safety of all patients and others in the area.

14) Privacy/Visitation: CHOC will ensure patient privacy is maintained and will implement their existing visitation policy.

15) Dietary/Nutrition: CHOC will ensure adequate dietary and nutrition services are provided to the patients in the flexed space.

16) Medication Management: There is a Pyxis drug dispensing system in the medication room for medications dispensing. CHOC will ensure pharmacy regulations, policies, and procedures are followed, including (a) safe storage (refrigeration as necessary) and security of medications in this location; (b) ordering/prescribing; (c) transcribing and verifying; (d) dispensing and delivering; (e) administering; and (f) monitoring and reporting.

17) Medical Record: CHOC will ensure the electronic medical record and other electronic systems are in place to allow staff to provide communication between clinical care team members, meet the patient's care needs, and follow hospital policies and procedures.

18) Infection Prevention and Control: CHOC will follow infection control guidelines from the Centers for Medicare and Medicaid Services (CMS), Centers for Disease Control and Prevention (CDC), and CDPH or local health department, including availability of hand hygiene. CHOC will follow all hospital infection prevention and control policies and procedures in the flexed space.

19) Compliance: CHOC will be in compliance with state and federal regulations and code.

20) Quality of Care: CHOC will continue to provide necessary care in accordance with patient needs and make all reasonable efforts to act in the best interest of patients and families.

Your request for program flexibility of **T22 DIV5 CH1 ART8-70805** is approved under the following conditions:

- Hospital is approved to use the twelve (12) single occupancy room numbers 211 to 222 of the pediatric intensive care unit (PICU) in 2 East-North (E-N) as surge overflow for pediatric medical-surgical patients when the general acute care beds are at surge bed capacity. Placement in these areas will be made in consideration of infection prevention and health and safety of the patients and others in each space. The Chief Nursing Officer, or designee, and physician leadership will have the overall oversight of the staff and care delivered in this area.
- Inclusion criteria: Acute care non-oncology patients. Ambulatory or diapered patients will be prioritized to the 2E-N flexed spaces.
- Exclusion Criteria: Oncology patients.
- Hospital must have a plan in place for safe patient management and staffing for unexpected increase in PICU patient needs, including, but not limited to, transfer of medical-surgical patients to appropriate units.
- Hospital must ensure that there will be no commingling of the medical-surgical patients with the PICU patients in the flexed space area.
- Hospital must ensure the alternative concept will not jeopardize the health, safety, and well-being of patients and is needed for increased operational efficiency.
- Hospital must ensure signage is visible placed to clearly designate the flexed space.
- Hospital must ensure that medical-surgical patients, who are placed in the flexed space, meet the following exclusion criteria, including but not limited to the following: oncology patients.
- Hospital must adhere to hospital and unit specific policies and procedures.

- Hospital must ensure adequate medical gases, call light/system, space including patient belonging storage space, bathroom accessibility, and related equipment is provided to meet the patient's designated level of care.
- Hospital must ensure compliance with nursing unit requirements per Title 22, section 70049.
- Hospital must ensure the flexed space area will be staffed per nursing staff Title 22, section 70217. There will be a minimum of two pediatric nurses who have acute care competencies in the unit at all times. The staff assigned to care of the medical-surgical patients will not be assigned to care for the PICU patients, at the same time. There will be no mixing of patient assignments.
- Hospital must provide an orientation to the surge, overflow space and furnish documentation to the California Department of Public Health (CDPH) upon request.
- Hospital must ensure that nurses and staff have tasks and/or patient care assignments within their scope of licensure, experience, training, and competence. Documentation will be made available to CDPH upon request. There will be always at least two licensed staff with medical- surgical competencies in the overflow space when a patient or family member or visit is present.
- Hospital must maintain adequate and appropriate equipment and supplies related to the nature of the needs and the services offered and in accordance with current policies and procedures.
- Hospital must ensure movement in, out, and around the room is clear and unobstructed.
- Hospital must ensure patient privacy is maintained, implement a plan to allow visitors, and clear access and egress of patients, personnel, and age-appropriate equipment and supplies must be maintained at all times.
- Hospital must ensure an age-appropriate safe rapid response and code blue response and must maintained crash cart(s) in this area at all times.

- Hospital must ensure the electronic medical record and other electronic systems are in place to allow staff to provide communication between clinical care team members, meet the patient's care needs, and follow hospital policies and procedures.
- Hospital must ensure pharmacy regulations and policies and procedures are followed, including safe (a) storage, (b) ordering/prescribing, (c) transcribing and verifying, (d) dispensing and delivering, (e) administering, and (f) monitoring and reporting.
- Hospital must ensure and maintain the flexed space is equipped with storage facilities and a designated area for nutrition. Adequate dietary and nutrition services must be provided to the patients in the overflow space.
- Hospital must continue to provide necessary care in accordance with patient needs and make all reasonable efforts to act in the best interest of patients.

Either this letter or a true copy thereof shall be posted immediately adjacent to the facility's license.

This approval shall remain in effect from Jun 10, 2025 until Jun 10, 2026.

NOTE: The Department may revoke the program flexibility if the licensee does not comply with the conditions set forth in the approval or if the department determines the proposed alternative does not adequately meet the intent of the regulations.

If you have any questions, please contact Centralized Program Flex Unit at (916) 323-5053 or by email at CentralizedProgramFlex@cdph.ca.gov.

Sincerely,

Danielle Boles

Danielle Boles, Program Manager
Centralized Program Flex Unit

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