## Skilled Nursing Facility (SNF), Intermediate Care Facility (ICF), Residential Care Facility for the Elderly (RCFE), Assisted Living Facility (ALF) Staffing Questions

Please provide answers to the following questions to aide in the adjudication of your request for staffing.

Facility N Number	ame: of Available Beds:
	of additional beds if provided requested staffing & Patient Occupancy:
-	Facility Census:  o COVID + residents:

- Total Patient Care Staff: \_\_\_\_\_
  - COVID + Staff:

o PUI Residents: \_\_\_\_\_

- Staff Unavailable to work (COVID or other):
- Has the facility stopped taking new admissions?
- Is the facility following their mitigation plan?
- Does the facility have sister facilities or a network of facilities that could provide additional staffing to the facility in need?
- Has the facility reached out to private staffing contract agencies to provide additional staffing in the facility?
  - o Which agency?
  - o Why is this agency unable to provide assistance?
    - \* Please list each agency separately
- What is the facility's long-term strategy to continually staff the facility to provide appropriate level of care for the patients?

Please provide the answers to your MHOAC and your local CDPH District Office representative. As a reminder, state sourced staffing is meant to fill short term emergency staffing gaps and is not meant as a long term staffing resource.