

AD HOC COMMITTEE ON COVID-19 ECONOMIC IMPACTS AND RECOVERY

THE RECORD OF ACTION FOR
JULY 9, 2020

Supervisor Candace Andersen, Chair
Supervisor Karen Mitchoff, Vice Chair

Present: Chair Candace Andersen
Vice Chair Karen Mitchoff

Staff Present: Thomas Warne, M.D., Deputy County Health Officer
Julie DiMaggio Enea, Senior Deputy County Administrator

1. Introductions

Chair Andersen welcomed the attendees, introduced the Committee and the Deputy Health Officer, and provided a brief summary of the current status of the virus.

2. Public comment on any item under the jurisdiction of the Committee and not on this agenda (speakers may be limited to two minutes).

All public comment was taken under Agenda Item 4.

3. RECEIVE update on most recent COVID-19 developments and on questions recently received from community members.

Dr. Warne summarized the county's current situation, saying the county has had more than 4,300 cases since the original outbreak of the virus, had 105 new cases on July 8, and a 7-day average of 146 new cases per day. He reported a positivity rate (the number of tests positive for the virus) of 6.9%, noting that our goal is to not exceed a rate of 8%. He reported an average hospitalization rate of 54, noting that we have suffered 88 deaths since the beginning.

He said that in comparison to the seasonal flu that on average infects between 0.8 and 4.2 per 100,000 in population annually, COVID-19 currently has a 7.7 per 100,000 infection rate (not for the full year but just since the first outbreak). Thus, COVID is much more serious than the seasonal flu.

The County is pausing its recovery plan because increases in new case and hospitalization rates are too high. Dr. Warne stressed the importance of testing of even asymptomatic people. The County is targeting county hotspots with outreach and testing. The community is doing a good job following protocols. The younger population is more mobile and social and are experiencing a higher rate of infection.

People in their 30s are 13% of the population but 19% of those infected. We are seeing more hospitalizations of younger adults but, thankfully, not many deaths in that age group. He said that children with COVID don't generally have a severe course of illness and don't seem to play a big role in transmission.

Dr. Warne then addressed questions submitted during the prior week.

- *Local schools and higher education: He explained that the County was coordinating with the local schools but policy decisions are made by the State Office of Education and local school districts. The County is not in an authoritative role to schools but a supportive advisory role. The State has not provided guidance for opening higher education, so the County is in a waiting mode. Colleges are planning reopening strategies but are waiting for guidance from the State.*
- *County's current timeline for reopening: He noted that we need to pause at least three weeks and watch the numbers before planning any next steps. We are exceeding the State's expectations in terms of the number of tests completed. The business sectors to be opened next will be determined by the risk profile of different activities and the pattern of new cases. We have not yet rolled back any previously allowed activities.*
- *State monitoring list: 23 counties in the State are on the monitoring list because something about their numbers are causing concern. For Contra Costa County, it is the increase in the number of new cases and hospitalizations. Fortunately, we have not had to roll back business sectors but just had to pause.*
- *Contact tracing, particularly in high-risk living environments: He said we are working to mitigate and prevent these outbreaks. High risk environments include social gatherings – graduations, holidays, etc., people from multiple households, indoors, and removing face coverings for eating and drinking.*
- *Out of 56 people in the hospital, 10 were from long term care facilities, so about 18%.*
- *Based on the Stanford model, he estimated we prevented around 4,000 deaths and 21,000 hospitalizations as a result of control measures put into place.*
- *Massachusetts: He noted that Boston was hit hard early on, almost as severely as New York. Overall, MA's death rate is 120/100,000 as compared to Contra Costa County's 7.7/100,000. We made different decisions at different times and CA/MA is not an apples to apples comparison.*
- *Swimming/swim lessons: Allowed for social bubbles, stable groups of 12, in a pool setting following the County's guidance.*
- *Hospital capacity: Hospital capacity can be stressed if people cannot be discharged to nursing homes, but the County works closely with nursing homes to make these transitions as seamless as possible. There are placement alternatives, if necessary.*

4. DISCUSS the June 16 Health Order and any subsequent updates to the timeline for future resumption of business and community activities.

Chair Andersen invited public comment:

- *Jared Thomson thanked Supervisor Mitchoff and Supervisor Andersen's office for responding to him directly via email. He asked if singing is prohibited at outdoor religious services.*
- *Tina Sherwin asked how many out of county patients in County hospitals; why monthly testing vs. 14 days for nursing staff testing, if new cases correlate with hospitalizations, if we know the rate of positive cases with symptoms vs. asymptomatic; for the ratio of COVID ICU patients to COVID non-ICU patients; if contract tracing is performed for protests; and if we are considering the psychological toll of COVID.*
- *Barbara Csider asked if the Jun/Jul deaths had been from nursing home outbreaks; how can we build herd immunity if we are on lockdown; is it possible for someone to test positive if they have antibodies; if the County gets remuneration for testing; why, if masks work, is singing banned; are we worried about people who are asymptomatic with the flu; if the work of a dentist more essential than the work of anyone else who must earn a living; and who are we to make such decisions when a client can choose for him/herself.*
- *Elias Mandalaris noted that indoor fitness has reopened in several counties, and that his business sector operates in a controlled environment and is prepared to insure a safe environment.*
- *Shawna Garvin asked about comorbidities for teens, and people in their 20s and 30s. She asked if the percentage of younger people with COVID is any higher than other age groups.*
- *Mike McDermott noted the two new testing facilities in Concord and suggested mobile sites in busy shopping centers would be more effective than in remote locations by appointment only. He also asked why kids' playgrounds are not open.*
- *Susan Morgan commented that the County's press release on facial masking is in error: all individuals in the County shall comply with the June 14 State order. The State order says that only people with medical exemptions who work in a high contact job need to wear a face shield or equivalent, whereas the County order says that any person with a medical exemption must wear a face covering or alternative face covering. She suggested corrections to the press release.*
- *Ellen Mossman asked what to tell people who are afraid to get tested at a test site for fear of exposure to the virus.*
- *Dylan Snow asked for more evidence of a cost/benefit analysis, contrasting 88 deaths from COVID compared to deaths due to unemployment and other economic and social factors. He commented that half of people with cancer are not receiving treatment, half of children not getting immunized, etc. He asked if we could open schools since most teachers are under 41. He said many students are not logging into online classes.*
- *Allison Snow appreciated the new online data. She requested data on mortality of COVID patients vs. someone admitted for something else and COVID was a secondary diagnosis. She wanted to know the rate of COVID in incarcerated persons, in reference to the early release of prisoners.*
- *Pete Sarna commented on the risk to seniors due to lack of access to health care and fitness facilities. He stressed the importance of fitness and mobility for seniors, how hard they work to attain fitness and how that fits into the COVID*

balance.

- *Francesca Schuler, CEO of InShape, said their gyms have been open since mid-June, 350,000 people check in and they have had not one case of COVID, due to implementation of strict hygiene standards. A survey of 12,000 indicated that members feel safe. Mask are required at all times. She predicted emerging physical and mental health crises if we don't let people get back to their routines. She said we might manage the COVID surge but trade it for a physical and mental health crisis afterward.*
- *Sandra Lee, InShape employee, read letters submitted by members who want the gym to reopen.*
- *ToniR asked if she must suspend disbelief that family gatherings spread the virus but a massive protest in Martinez will not. She complained about restricting kids from seeing grandparents and the effect of cooping people up on their immune systems. She asked how many young children have contracted the virus in the County and in the State? She said there is a disparity of opinions among medical doctors regarding mask wearing and wondered how the general population can be expected to wear a mask properly when even doctors cannot seem to do so. She asked if the medical community ever encouraged healthy people to wear masks during other flu outbreaks.*
- *Doug Cervantes, InShape GM, Concord, commented the agency was founded by a physician to reduce the number of his patients. He said the national health crisis preceded COVID-19 and that health clubs can directly mitigate 8 of the top 10 causes of death that account for 75% of deaths in the county, e.g., cancer and heart disease. He opined that fitness, belonging and human connection (6 feet) can improve survival rate for COVID 19.*
- *Jude Mary asked about the survival rate of this virus in our county? She discussed the negative psychological effects of couching these statistics negatively (i.e., death rate vs. survival rate) especially on the older, more vulnerable population. She asked if the Health Officer agreed with CDC that this virus is unlikely to be transmitted by healthy adults and children. She requested a distinction be made between those hospitalized due to COVID vs. those hospitalized for another reason but test positive for COVID. She asked why the County has not emphasized self-care to boost immunity (a good offense for protection).*
- *Sean Butler, InShape GM, Antioch, offered to serve as an ambassador of the County's COVID safety message and invited County officials to take a tour of the club and its sanitizing program.*
- *Joe Shillace, InShape Area Manager, commented that fitness helps to fight disease and cited specific examples of club members who overcame serious disease through improved fitness.*
- *Eric Skow, InShape Director of Safety and Risk Management, read supportive letters from a County Supervisor in Tulare County.*
- *Lydia expressed concern about depriving children of basic humanity, human touch and interaction with other children and adult family members.*
- *Landi contrasted numerous social restrictions with allowing protests to proceed. She said that long-term care facilities should have been closed a long time ago. She said COVID tests are not accurate and that people's health is deteriorating due to COVID restrictions.*
- *Omar Rahman, In Shape employee, spoke about how the health club is*

proactive, helping to mitigate health problems upstream to avoid more health issues downstream.

- *Jonathan Katayanagi requested guidance on how the new mask order impacts childcare, day care. He noted the potential for cross-contamination with very young children sharing or touching their masks.*

Dr. Warne thanked callers for their thoughtful questions and input.

Regarding church services, he clarified that outdoor singing is allowed with masks but not allowed indoors. Social distancing and stable groups of no more than 12 apply to youth groups. He said the claim that church gatherings are increasing the spread of the virus is a national not local claim.

Regarding hospitalizations of non-County residents, he said the number varies but, on net, there are more County residents hospitalized outside the County. The current recommendation for high-risk professions to be COVID tested monthly instead of bi-weekly considered testing capacity and feasibility for the individuals. There is a correlation between infections and hospitalizations, mitigated by good home care guidance. Of those hospitalized, COVID is an illness that disproportionately puts people into the ICU due primarily to the need for ventilation.

Regarding impacts on mental health, he acknowledged that we cannot sustain a dramatic SIP for a long period due to the deleterious effects on physical and mental health. But the original SIP provided the needed time to develop policies, supply chains, inventories of PPE, and to set up testing and contact tracing capacity – all the strategies designed to protect public health.

He reported that the majority of County deaths (62/88 or 70%) were in skilled nursing facilities. The County focuses on PCR rather than antibody tests. It is possible to be positive for both. Antibody tests will have a role someday, but they are not the County's primary focus right now. We prioritize high-risk individuals, but testing is open to everyone and free of charge. He acknowledged the value of mobile testing sites. Testing sites offer low risk of exposure due to the many precautions put in place and availability of drive-up testing. Testing is important to avoid a further chain of transmission, particularly within families.

He said we are trying to gain a better understanding about the increase in infections in 20/30 year olds. It might be that they are out socializing more, out working more, or both.

He understands the sentiments about children being restricted from playing at playgrounds but explained that this is a State restriction and the County cannot be more lenient than the State. He said the basis is likely the difficulty in regulating playgrounds for social distancing and hygiene protocols.

Regarding the County's face coverings press release, it has been corrected to indicate that it is recommended that people who have medical conditions that prevent the wearing of a tight-fitting mask instead wear a face shield with cloth extension, consistent with State guidance.

Regarding a cost/benefit analysis of the COVID shutdown, he said the Bay Area reacted more quickly and so avoided the level of severity that impacted New York and Europe. A crystal ball wasn't available when early decisions were made, and they were made based on public health urgency. Doubtless, those decisions will be analyzed in hindsight. However, Sweden's economy still suffered in the end despite their different path. He said, of course, we are concerned about delaying preventative care, cancer care, mental health care. Those services are still available as well as vital clinic services.

Dr. Warne recognized the great value of fitness centers to people's overall health and wellbeing, but said we are in a pause on any further openings. Some counties have allowed reopening but while we encourage fitness and made exceptions for outdoor recreation, we are currently in a three-week hold. Any new openings must be indicated by our data.

He said there is clear guidance by the State on what deaths get counted or attributed to Corona virus. Only those cases where the virus was the critical factor in the death are counted as COVID deaths.

He said that Contra Costa County is now, and has long been, part of the regional response to COVID but county hospitals currently have no admissions of prisoners released due to prison overflow.

He said there is COVID guidance around protests. Organizers are encouraged to follow social distancing and masking guidelines to keep safe in that setting. People have speculated that recent protests have led to increased spread of the virus, which is certainly possible, but the tracing data thus far hasn't indicated that.

Regarding the contrast of COVID with other flus, he said that for other flus, we ask people to get vaccinated. We're looking forward to an effective vaccine for the Corona virus. In the meantime, we must stress the importance of facial coverings and other precautionary measures.

5. RECEIVE and APPROVE the Record of Action for the July 2, 2020 meeting.

The Committee approved the July 2, 2020 Record of Action as presented.

AYE: Chair Candace Andersen, Vice Chair Karen Mitchoff
Passed

6. The next meeting is currently scheduled for July 16, 2020.

The Committee confirmed the next meeting date of July 16, 2020. Vice Chair Mitchoff indicated will not be in attendance due to a prior commitment.

7. Adjourn

Chair Andersen adjourned the meeting at 3:41 p.m.

For Additional Information Contact:

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julie.enea@cao.cccounty.us



Contra Costa County Board of Supervisors

Subcommittee Report

AD HOC COMMITTEE ON COVID-19 ECONOMIC IMPACT AND RECOVERY

Meeting Date: 07/09/2020
Subject: COVID 19 UPDATES
Submitted For: Candace Andersen, District II Supervisor
Department: Board of Supervisors District II
Referral No.:
Referral Name:
Presenter: **Contact:**

Referral History:

Referral Update:

As part of Dr. Farnitano's introductory remarks, he will address questions received by the offices of the Committee members and elaborate on anything else important for the community to know.

Following Dr. Farnitano's remarks, we will allow for Public Comment and additional questions specific to the current Health Order and Timeline.

Recommendation(s)/Next Step(s):

RECEIVE update on most recent COVID-19 developments and on questions recently received from community members.

Attachments

Press Release Updated Facial Covering Guidance 7-7-2020

COVID Community Outreach Activities 7-7-2020

Updated Health Order on Facial Coverings 7-5-2020

Updated Health Order Mass Quarantine 7-5-2020

Questions Received for the July 9 Meeting

Minutes Attachments

No file(s) attached.



HOME • NEWSROOM • PRESS RELEASES • CONTRA COSTA COUNTY RELEASES UPDATED PUBLIC GUIDANCE FOR FACE COVERINGS

Press Release

Contra Costa County Releases Updated Public Guidance for Face Coverings

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Tuesday, July 7, 2020

Contra Costa County today updated its health order about when and where members of the public should wear face coverings during the COVID-19 pandemic to align it with current state guidance.

Local data indicate that COVID-19 is spreading rapidly in Contra Costa County. The county is currently on the California Department of Public Health's monitoring list because of increasing numbers of COVID-19 patients in local hospitals. Today Contra Costa reports 209 new confirmed cases.

The updated order specifies that face coverings should be worn in businesses and in areas where people wait in line to enter businesses, and that everyone should wear a mask or face covering whenever they are within six feet of another person who is not a member of their household, except in very limited, industry-specific situations.

People who have certain health conditions are exempt from wearing masks that fit snugly over the mouth and nose but must instead wear plastic face shields with cloth draping beneath to contain coughs and sneezes.

The order also requires businesses that are open during the pandemic to ensure their

CONTACT

Joint Information Center
Media Line,
925-608-5463

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- [Novel Coronavirus \(COVID-19\) Latest Local Information](#)

workers and volunteers wear face coverings, and to not serve or allow entry to anyone not wearing face coverings.

"We recognize there is a lot of detailed health guidance coming from state and local sources, and that can be confusing," said Candace Andersen, chair of the Contra Costa Board of Supervisors. "With COVID-19 spreading more in our community, it is more important than ever to follow the state health guidance and wear a face covering whenever you go out."

Face coverings, even if just cloth bandanas, help reduce the spread of COVID-19 by blocking virus-containing droplets that come out of our mouths and noses when we breath, speak, cough or sneeze. Face coverings are one of the simplest and most effective ways to slow the virus spread and allow for further re-opening of the economy. The World Health Organization, the Centers for Disease Control and the California Department of Public Health all recommend face coverings due to overwhelming evidence of benefit (https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-guidance.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fprevent-getting-sick%2Fcloth-face-cover.html) in reducing the spread of COVID-19.

CCHS encourages everyone to take simple steps to protect themselves from COVID-19: Follow the shelter-in-place order, and wear a face covering when you go out or are near other people. Wash your hands thoroughly and frequently, and always stay home from work or school if you are not feeling well.

Visit cchealth.org/coronavirus (/coronavirus/) to read the new health order, and for local information about Contra Costa's response to the COVID-19 pandemic.

###

Summary of COVID-19 Community Outreach Activities 2020



Proactive Outreach Task Force

- Created COVID-19 Rapid Response Playbook
- Developed Coronavirus Vulnerability Index that identified 7,000 individuals at high-risk.
- Social needs assessment completed by more than 3,300 individuals



Pharmacy Outreach

- Campaign to encourage patients and providers to increase refills by mail and encourage 90-day supplies on refills
- Approx. 2600 prescriptions switched from 30 to 90 day supplies; saving an estimated 7,000 trips to the pharmacy over the course of a year.

March



Historically Marginalized Communities Task Force

- Developed community resource guide for undocumented immigrants Translated in 7 languages.
- Focus areas expanded to youth, Latinx and African-American, and Asian/Pacific Islander communities



Food + Pilot Project

- Project delivers weekly supplemental nutrition boxes to individuals at risk of COVID-19 who are under 60 years old, have an expressed food need and consent to services.
- Today, more than 75 food boxes delivered per week
 - More than 9000 meals have been provided

April



Congregate Living Facilities Task Force

- Conducted almost 300 surveys with Skilled Nursing Facilities, Mental Health and Substance Use Disorder residential treatment and recovery facilities.
- Created and distributed 200 tool kits for smaller facilities with 6 beds and less
- Congregate Living Facilities task force was moved to the Care and Treatment branch. in late May.



Prevention Outreach Branch

- Prevention/Outreach branch was created as part of new ICS structure.
- Proactive Outreach, Historically Marginalized Communities, and Congregate Living Task forces brought into branch.

May



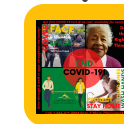
Latinx Focused Workgroup

- Convening a series of rapid cycle work groups to help create messaging for Latinx communities about COVID-19 testing and prevention.



Proactive Outreach Branch Redesign

- Developed partnership with EHSD to drive integrated service response efforts and co-sponsor coordinating body.



African-American Focused Workgroup

- Created culturally-specific graphics around testing and 4 principles.
- HSD co-sponsored a Juneteenth Holistic Health virtual event to educate community on testing and other COVID-19 resources and supports.

June



Coming Soon

- LGBTQ+ focused workgroup
- Coronavirus Vulnerability Index 2.0
- COVID-19 Community Social Needs Assessment Survey 2.0



Youth Focused Workgroup

- Convening a series of rapid cycle work groups to help create messaging for youth campaign about COVID testing and prevention .



Food ++ Redesign

- New community partnership being established to create a sustainable emergency food program



Asian-American/Pacific Islander focus group

- Convening a series of rapid cycle work groups to help create messaging for AAPI communities about COVID-19 testing and prevention.

July



**ORDER OF THE HEALTH OFFICER OF THE COUNTY OF CONTRA COSTA
SUPERSEDING HEALTH OFFICER ORDER NO. HO-COVID19-08, GENERALLY
REQUIRING MEMBERS OF THE PUBLIC AND WORKERS TO WEAR FACE
COVERINGS**

ORDER NO. HO-COVID19-22

DATE OF ORDER: JULY 5, 2020

Summary and Basis of the Order

This Order requires that all individuals in Contra Costa County (“County”) wear face coverings in accordance with guidance issued by the State of California. This Order is issued in light of the existence in the County, as of July 4, 2020, of 3,564 confirmed cases of infection by the virus that causes Coronavirus Disease 2019 (“COVID-19”), including a significant and increasing number of cases of community transmission. This Order is necessary to slow the rate of spread. This Order supersedes the Order of the Health Officer of the County of Contra Costa issued on April 17, 2020, which imposed a requirement that members of the public and workers wear face coverings in specified situations.

A key transmission method for the virus that causes COVID-19 is respiratory droplets that people expel when they breathe or sneeze. People can be infected with the virus that causes COVID-19 and not have any symptoms, meaning they are asymptomatic, but can still be contagious. People can also be infected and contagious 48 hours before developing symptoms, the time when they are pre-symptomatic. Many people who have been infected with the COVID-19 virus have mild symptoms and do not recognize they are infected and contagious, and they can unintentionally infect others. Therefore, the U.S. Centers for Disease Control and Prevention (CDC), the California Department of Public Health (CDPH) and the Contra Costa County Health Services Department believe that wearing a face covering, when combined with physical distancing of at least 6 feet and frequent hand washing, may reduce the risk of transmitting the COVID-19 virus when engaged in activities in public when others are nearby.

UNDER THE AUTHORITY OF CALIFORNIA HEALTH AND SAFETY CODE SECTIONS 101040 and 120175, THE HEALTH OFFICER OF THE COUNTY OF CONTRA COSTA (“HEALTH OFFICER”) ORDERS:



1. **Past Order.** This Order supersedes Health Officer Order No. HO-COVID19-08, which is referred to as the “Face Covering Order” in other orders of the Health Officer. Requirements in other Health Officer orders to comply with the Face Covering Order will be interpreted as requirements to comply with this Order.

2. **Compliance with State Guidance.** All individuals in the County shall comply with the applicable face covering requirements set forth in the June 18, 2020, CDPH Guidance for the Use of Face Coverings (“State Face Covering Guidance”), a copy of which is attached hereto, as may be amended from time to time.

3. **Face Coverings.** The term “face covering” in the State Face Covering Guidance (“Face Covering”) means a covering made of cloth, fabric, or other soft or permeable material, without holes, that covers the nose and mouth, but does not hide or obscure the wearer’s eyes or forehead. The Face Covering should be comfortable, so that the wearer can breathe comfortably through the nose and does not have to adjust it frequently, so as to avoid touching the face. A video showing how to make a Face Covering and additional information about how to wear and clean Face Coverings may be found at the website of the Centers for Disease Control and Prevention at <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html>. Any mask that incorporates a one-way valve (typically a raised plastic cylinder about the size of a quarter on the front or side of the mask) that is designed to facilitate easy exhaling is not a Face Covering and may not be used to comply with this Order. Even when not required by this Order, people are strongly encouraged to wear Face Coverings when in public.

4. **Local Requirements.** Subject to the exemptions set forth in the State Face Covering Guidance, including but not limited to exemptions in industry guidance documents issued by the State of California, individuals and businesses in the County must comply with the following local requirements, as applicable:

a. Individuals shall wear Face Coverings when less than 6 feet away from any person who is not a member of the individual’s household or living unit.

b. Individuals must wear Face Coverings when inside or on the grounds of, or waiting in line to enter, any business.

c. Businesses must take all reasonable steps to prohibit an individual who is not wearing a Face Covering from entering. If those efforts are not successful, the business must not serve that individual, and must seek to remove the individual from the premises.

5. **Incorporation of Emergency Proclamations.** This Order is issued in accordance with, and incorporates by reference, the March 4, 2020, Proclamation of a State of Emergency issued by Governor Gavin Newsom and the March 10, 2020, Proclamation by the Contra Costa County Board of Supervisors declaring the existence of a local emergency.



6. Enforcement. Pursuant to Government Code sections 26602 and 41601 and Health and Safety Code section 101029, the Health Officer requests that the Sheriff and all chiefs of police in the County ensure compliance with and enforce this Order. The violation of any provision of this Order constitutes an imminent threat and menace to public health, constitutes a public nuisance, and is punishable by fine, imprisonment, or both.

7. Effective Date and Time. This Order shall become effective at 12:01 a.m. on July 6, 2020, and will continue to be in effect until it is extended, rescinded, superseded, or amended in writing by the Health Officer.

8. Copies; Contact Information. Copies of this Order shall promptly be: (1) made available at the Office of the Director of Contra Costa Health Services, 1220 Morello Avenue, Suite 200, Martinez, CA 94553; (2) posted on the Contra Costa Health Services website (<https://www.cchealth.org>); and (3) provided to any member of the public requesting a copy of this Order. Questions or comments regarding this Order may be directed to Contra Costa Health Services at (844) 729-8410.

IT IS SO ORDERED:

July 5, 2020

Chris Farnitano, M.D.
Health Officer of the County of Contra Costa

Attachment:

June 18, 2020, California Department of Public Health Guidance for the Use of Face Coverings





ORDER OF THE HEALTH OFFICER OF THE COUNTY OF CONTRA COSTA

No. HO-COVID19-23

UPDATED MASS QUARANTINE ORDER

DATE OF ORDER: July 5, 2020

Please read this Order carefully. Violation of or failure to comply with this Order is a misdemeanor punishable by fine, imprisonment, or both. (California Health and Saf. Code, § 120295.)

SUMMARY OF THE ORDER

California is in a State of Emergency because of the Coronavirus Disease 2019 (COVID-19) pandemic. The spread of the novel coronavirus that causes COVID-19 is a substantial danger to the health of the public within the County of Contra Costa (“County”). COVID-19 can easily spread between people who are in close contact with one another. This Order is issued based on scientific evidence and best practices as currently known and available to protect vulnerable members of the public from avoidable risk of serious illness or death resulting from exposure to COVID-19. The age, condition, and health of a significant portion of the population of the County place it at risk for serious health complications, including death, from COVID-19. There is growing evidence of transmission risk from infected persons before the onset of symptoms. Thus, all individuals who contract COVID-19, regardless of their level of symptoms (none, mild or severe), may place other vulnerable members of the public at significant risk. Currently, there is no vaccine available to protect against COVID-19 and no specific treatment.

To help slow COVID-19’s spread, protect vulnerable individuals, and prevent the healthcare system in the County from being overwhelmed, it is necessary for the Health Officer of the County of Contra Costa to require the quarantine of persons exposed to a person diagnosed with COVID-19. Quarantine separates individuals who were exposed to COVID-19 from others, until it is determined that they are not at risk for spreading the disease.



This Order supersedes the May 13, 2020, Order of the Health Officer of the County of Contra Costa, No. HO-COVID19-12, directing close contacts of persons diagnosed with COVID-19 to quarantine themselves. This Order updates the description of close contacts to include all persons who have been within six feet of the person diagnosed with COVID-19 during the infectious period as defined.

UNDER THE AUTHORITY OF SECTIONS 101040 AND 120175 OF THE CALIFORNIA HEALTH AND SAFETY CODE, THE HEALTH OFFICER OF THE COUNTY OF CONTRA COSTA (“HEALTH OFFICER”) ORDERS:

1. All persons who have had close contact with a person with COVID-19 (“Case), as described below in Section 2, must quarantine themselves. These persons are required to follow all instructions in this Order and the Public Health guidance documents referenced in this Order.
2. For the purposes of this Order, a person is considered to have had close contact with a Case if, during the Case’s infectious period, the person was within six feet of the Case for 15 minutes or longer. Examples may include persons who:
 - a. Live in, have visited, or have stayed overnight at the Case’s residence; or
 - b. Are intimate sexual partners of the Case; or
 - c. Worked within six feet of the Case; or
 - d. Provide or provided care to the Case without wearing a mask, a face shield or goggles, gown, and gloves; or
 - e. Have been identified as close contacts by the Contra Costa County Health Services Department.
 - f. Have been released from a California Department of Corrections and Rehabilitation Facility where a Case was reported among staff or detainees within 30 days before the person’s release.

For purposes of this Order, a Case is infectious from 48 hours before his or her symptoms began (or, in the absence of symptoms, from 48 hours before the date of administration of a positive test for the presence of COVID-19) and until he or she is released from isolation.

3. Instructions. All persons who have had close contact with a Case must immediately take the following actions:
 - a. Stay in their home or another residence through 14 days from the last date that they were in contact with the person infected or likely to be infected with COVID-19. Persons are



required to quarantine themselves for the entirety of the 14-day incubation period because they are at high risk for developing and spreading COVID-19.

b. Quarantined persons may not leave their place of quarantine or enter any other public or private place except to receive necessary medical care or during an emergency that requires evacuation to protect the health and safety of the person.

c. Carefully review and closely follow all requirements listed in the “Home Quarantine Instructions,” posted at <https://www.coronavirus.cchealth.org/if-you-are-sick>.

d. If a quarantined person becomes sick with fever, cough, or shortness of breath (even if their symptoms are very mild), he or she shall isolate themselves at home and away from other people and follow the “Home Isolation Instructions,” posted at <https://www.coronavirus.cchealth.org/if-you-are-sick>. This is because the person is likely to have COVID-19 and if so, can spread it to vulnerable individuals. If a medical professional examines a quarantined person and determines that his or her symptoms are not due to COVID-19, the person may discontinue home isolation but shall continue to follow the home quarantine order and instructions.

4. Exception. Notwithstanding the foregoing, health care workers and first responder agency workers who are household members, intimate partners, or caregivers of a person with COVID-19 are not subject to this Order under the following circumstances:

a. The worker informs his or her employer about the worker’s close contact to a lab-confirmed Case;

b. The worker is asymptomatic, and the worker’s employer determines, based on staffing needs, that the worker needs to report to work; AND

c. The worker returns to work.

5. The Health Officer may take additional action(s), which may include civil detention or requiring one to stay at a health facility or other location, to protect the public’s health if an individual who is subject to this Order violates or fails to comply with this Order.

6. This Order shall become effective at 12:01 a.m. on July 6, 2020, and will continue to be in effect until it is extended, rescinded, superseded, or amended in writing by the Health Officer.

7. Copies of this Order shall promptly be: (1) made available at the Office of the Director of Contra Costa Health Services, 1220 Morello Avenue, Suite 200, Martinez, CA 94553; (2) posted on the Contra Costa Health Services website (<https://www.cchealth.org>); and (3) provided to any member of the public requesting a copy.

8. If any provision of this Order or its application to any person or circumstance is held to be invalid, then the remainder of the Order, including the application of such part or provision to



other persons or circumstances, shall not be affected and shall continue in full force and effect. To this end, the provisions of this Order are severable.

9. Questions or comments regarding this Order may be directed to Contra Costa Health Services at (844) 729-8410.

IT IS SO ORDERED:



Dated: July 5, 2020

Chris Farnitano, M.D.
Health Officer of the County of Contra Costa

Attachments:

- Appendix A: "Home Quarantine Instructions"
- Appendix B: "Home Isolation Instructions"



Questions for Health Officer – July 9th Ad Hoc Committee Meeting

Will the county have any involvement in higher education opening?

What role does the County play in the K-12 reopening?

What has happened to our current Timeline – do we have any idea of when we'll start providing reopening dates?

Will Health Services introduce a new phased timeline, or open all the “July 1” businesses/activities at the same time per the previous timeline?

How is the state monitoring list affecting our county?

Will we have to move backwards and close currently allowed businesses/activities?

Is our Contact Tracing showing us where outbreaks are originating from, or because we haven't been able to do enough, are we just guessing?

What % of patients in the hospital are coming from Long Term Care Facilities rather than the general population?

How does our current COVID-19 death rate compare to our annual death rate from influenza/pneumonia? If we hadn't taken such extreme measures to “flatten the curve” and continue to follow health orders, do we know what our COVID death rate might be instead?

Since Massachusetts has a similar demographic and population to the Bay Area, can the health officer investigate what Massachusetts has done differently that might have led to their success – 140 total cases in the whole commonwealth yesterday?

Is an instructor allowed to teach up to 12 different swimmers in the water face to face at 12 different time periods, so long as he doesn't interact with more than 12 children?

For example:

2:00pm Coach Matt gives a lesson to Jim in the water

2:30pm Coach Matt gives a lesson to Alan in the water



Contra Costa County Board of Supervisors

Subcommittee Report

AD HOC COMMITTEE ON COVID-19 ECONOMIC IMPACT AND RECOVERY

Meeting Date: 07/09/2020
Subject: COVID-19 Recovery Road Map: Continuing Discussion of Provisions of June 16th Local Health Order and Timeline for Reopening
Submitted For: David Twa, County Administrator
Department: County Administrator
Referral No.:
Referral Name:
Presenter: **Contact:**

Referral History:

Although the Board of Supervisors has authority over County issues, under State law, when an emergency of this nature is declared and there is a pandemic of this magnitude, the Health Officer of each County has the legal authority to impose whatever orders she or he deem necessary to protect the public.

On Tuesday, April 21, the Board of Supervisors formed this ad hoc committee to advise the Health Department on COVID19 impacts. The goal of the committee is to work toward having a sustainable COVID-19 mitigation and recovery plan. The committee will be working with the community and industry on issues of concern, advising the Board of Supervisors and the Health Officer on possible ways to interpret and apply Health Orders so they will continue to keep the community safe, but allow more businesses to re-open and provide common-sense applications to outdoor activities.

The Committee has so far conducted nine public meetings on May 7, 14, 21 and 28; June 4, 11, 18, and 25; and July 2, 2020, covering recreation and lifestyle services, in-home and other personal services, small businesses, religious gatherings, and next steps and criteria for moving fully into Stage 2 and then into Stage 3. A record of those meetings is posted on the County website at this [link](#). The committee plans to continue meeting weekly, taking up issues related to different business/community sectors at each meeting. The Committee previously identified eight sectors to focus on over the course of the next several meetings:

1. Faith organizations
2. Recreation and Lifestyle
3. Restaurant
4. In-home and other personal services
5. RV/Park
6. Small businesses

7. Thrift sales & collection
8. Furniture

The Committee and the Health Officer also discuss updates to the State and County Health Orders and projected timeline for reopening business and community activities and answer questions received each week via the Supervisors' offices.

Referral Update:

With COVID-19 spreading rapidly in many Bay Area neighborhoods, health officials across the region urge residents to protect themselves and the community by celebrating from home this holiday weekend.

The Fourth of July is traditionally a time for firework displays, cookouts and parades, but this year the COVID-19 pandemic has forced many communities to cancel public events. Gatherings with others from outside your household, such as members of the extended family, are potentially risky.

Health officers from across the greater Bay Area say staying home this year is a healthy choice.

“Nobody wants to be cooped up, or to miss out on the holiday,” said Dr. Chris Farnitano, Contra Costa County Health Officer. “But the more we come together in groups, the more COVID-19 spreads in the community. And the more it spreads, the more it endangers older adults and others at high risk of serious illness.”

You can spread COVID-19 even if you don't feel that sick. You can pass the disease to someone else before you have symptoms, and even if you never develop any symptoms at all. When infected people come in contact with others who are high-risk, there can be deadly consequences.

That is why Bay Area health officers recommend people who are not members of the same household remain physically distant. The best ways to protect yourself and slow the spread of COVID-19 include:

- Continuing to stay home as much as possible
- Practicing physical distancing outside the home
- Wearing face coverings or masks when outside your home
- Avoiding gatherings with people outside your immediate household
- Washing your hands thoroughly and frequently
- Staying home from work, school or daycare if you feel sick

All Bay Area residents are also encouraged to get tested for COVID-19, and to do so immediately if they have symptoms. Check with your local health department for more information about testing and about efforts in your community to fight the COVID-19 pandemic. For more information, please visit cchealth.org/coronavirus to read the latest health order and its appendices, and for local information about Contra Costa's response to the COVID-19 pandemic. Here is a link to the updated FAQs (Frequently Asked Questions): [FAQs](#)

Recommendation(s)/Next Step(s):

DISCUSS the June 16 Health Order and any subsequent updates to the timeline for future resumption of business and community activities.

Fiscal Impact (if any):

No fiscal impact. The Committee's meetings facilitate the exchange of information and ideas.

Attachments

Press Release Update Contra Costa to Postpone COVID-19 Reopening Timeline 6-29-2020

Updated Road to Recovery 6-29-2020

Openings at a Glance 6-29-2020

Updates to Health Order 6-16-2020

Contra Costa Receives State Variance for More Local Control

CA Facial Coverings Guidance

Public Comment Bob Welsh 7-2-2020

Public Comment Warren Lautz 7-8-2020

Public Comment Chris Goulart 7-9-2020

Minutes Attachments

No file(s) attached.



Press Release

Contra Costa to Postpone COVID-19 Reopening Timeline

 Like 30

 Tweet

Monday, June 29, 2020

Contra Costa Health Services (CCHS) will delay the opening of businesses and activities previously planned for July 1 until the COVID-19 outbreak in Contra Costa is better contained.

The county is closely monitoring recent data showing COVID-19 activity increasing in the community, as it is statewide and throughout the country.

On Sunday, Gov. Gavin Newsom recommended that Contra Costa County, along with several other counties in the state, not reopen bars. The county's timeline had previously cleared bars, personal services not involving close contact with the face, indoor dining, gyms and fitness centers, limited indoor leisure activities and museums, and hotels for tourism and individual travel to reopen July 1.

With the sharp rise in community spread and hospitalizations, it does not make sense at this time to open additional business sectors that could further accelerate community transmission. These businesses and activities will remain closed in Contra Costa until county data indicate that the spread of the virus has slowed, as measured by at least a week of stable case numbers, hospitalizations and

CONTACT

Joint Information Center,
925-608-5463

RELATED

- [Novel Coronavirus \(COVID-19\) Latest Local Information](#)

percent of tests that are positive. Trends will be monitored and evaluated daily.

The seven-day average number of COVID-19 patients in hospitals in the county has increased by 75% from June 15 to June 29.

The seven-day average number of newly identified COVID-19 cases has increased from 38 a day to 87 a day. The percentage of COVID-19 tests that came back positive has also increased from 4% to 6%. This suggests the change is not simply due to more testing, but a true increase in community spread.

We are also seeing a shift with more young people testing positive. In June, 55 percent of people testing positive in Contra Costa were 40 years and younger, compared to 38 percent for that group in April. It's a sign that younger people are playing a major role in driving the increase in new cases and potentially infecting vulnerable individuals.

Many people who carry and spread the virus have no symptoms themselves. That is why it's important for everyone to avoid social gatherings, observe physical distancing and wear masks or face coverings when around others.

Widespread testing is necessary to slow the spread of COVID-19 so we can safely reopen the economy. Testing is the only way to find out if you are carrying the virus and interrupt its spread. People can spread the virus without knowing they are sick.

While Contra Costa have seen an increase in the numbers of people being tested over the past several weeks, we highly encourage everyone who lives and works in the county to get tested, even if they have no symptoms.

This morning, CCHS opened its eighth community COVID-19 testing site at Kennedy High School in Richmond. To make an appointment for a fast, convenient, no-cost test at any site in Contra Costa, call 1-844-421-0804 or visit

[cchealth.org/coronavirus \(/coronavirus/\)](https://cchealth.org/coronavirus (/coronavirus/)) –
online scheduling available at most sites.

#

CONTRA COSTA COUNTY'S ROAD AHEAD FOR OUR COMMUNITY



JUNE ✓

JUNE 5

- Outdoor dining
- Outdoor swimming pools
- Dog parks
- Outdoor religious services
- Overnight single family camping

JUNE 17

- Hair salons & barbershops
- Indoor religious services



TO BE DECIDED*

- Personal services not involving the face (massage, nail salons, tattoo, body waxing, etc.)
- Indoor dining
- Gyms, fitness centers & personal training
- Limited indoor leisure (arcades, billiards, bowling alleys, etc.)
- Indoor museums
- Hotels (for tourism & individual travel)



TO BE DECIDED*

- Personal services involving the face (skin care, permanent makeup, facial waxing, etc.)
- Movie theaters
- Card rooms



JULY/AUGUST*

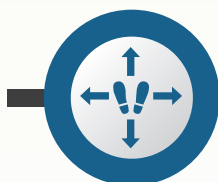
- Schools, including primary, secondary & higher education (contact your local school district for start date)

Not currently allowed by the state

- Bars
- Basketball courts
- Playgrounds
- Soccer
- Youth sports
- Larger gathering venues (nightclubs, conventions, concerts & live audience sports)

***Additional businesses & activities will remain closed until data indicate the spread of the virus has slowed, as measured by at least a week of stable case numbers, hospitalizations & percent of tests that are positive. Trends are monitored & evaluated daily. Our community's actions are more important than ever to stop the spread.**

STOPPING THE SPREAD STARTS WITH YOU



Keep 6 Feet Apart



Cover Your Face



Wash Your Hands



Stay Home if Sick



Contra Costa County Openings at a Glance

In all cases, social distancing & face coverings are required. For sector specific guidelines, visit coronavirus.cchealth.org/health-orders.

	JUNE 17	To Be Decided	JULY/AUG*
Athletic Fields			
Automobile & Bicycle Repair			
Campgrounds, RV Parks & Outdoor Recreation Facilities			
Car Washes			
Child Care & Summer Camps			
Construction			
Dental Care			
Dog Parks			
Financial Institutions			
Funeral Homes, Mortuaries & Cemeteries			
Gas Stations			
Golf Courses			
Government Services			
Grocery & Other Food Stores			
Gyms & Fitness Centers			
Hair Salons & Barber Shops			
Healthcare, Pharmacies & Medical Supply			
Hotels (for tourism & individual travel)			
Indoor Dining			
Indoor Museums			
Laundromats			
Libraries (curbside pickup)			
Limited Indoor Leisure (arcades, billiards, bowling, etc.)			
Logistics & Warehousing Facilities			
Manufacturing			
Office Workplaces (telework strongly encouraged)			
Outdoor Businesses			
Outdoor Museums, Exhibit Spaces & Drive-in Theaters			
Outdoor Dining, Take Out & Delivery			
Outdoor Swimming Pools			
Parks (including picnic & BBQ areas)			
Places of Worship (outdoor)			
Places of Worship (indoor)			
Public & Private Transportation Services			
Real Estate			
Residential & Commercial Maintenance Services			
Retail Stores & Retail Supply Chain Businesses			
Schools (primary, secondary & higher education)			
Shooting & Archery Ranges			
Skate Parks			
Small Group Gatherings (outdoors)			
Tennis & Pickleball Courts			
Utilities			
Veterinary Care & Groomers			

*Additional businesses & activities will remain closed until data indicate the spread of the virus has slowed, as measured by at least a week of stable case numbers, hospitalizations & percent of tests that are positive. Trends are monitored & evaluated daily.

Open
Closed

STOPPING THE SPREAD STARTS WITH YOU



Keep 6 Feet Apart



Cover Your Face



Wash Your Hands



Stay Home if Sick

We hope to continue opening up the county, but may need to reconsider openings based on the course of the pandemic.

Not Currently Allowed by the State

- Bars
- Basketball
- Larger gathering venues (nightclubs, conventions, concerts & live audience sports)
- Movie theaters
- Nonessential healing arts (massage, etc.)
- Other Personal Services (personal training, tattoo parlors, permanent makeup, piercing & nail salons, etc.)
- Playgrounds
- Soccer
- Youth sports



CONTRA COSTA HEALTH SERVICES

cchealth.org/coronavirus
as of 6/29/2020



**ORDER OF THE HEALTH OFFICER
OF THE COUNTY OF CONTRA COSTA DIRECTING
ALL INDIVIDUALS IN THE COUNTY TO CONTINUE TO COMPLY WITH SOCIAL
DISTANCING REQUIREMENTS, TRAVEL RESTRICTIONS AND OTHER
MEASURES NECESSARY TO SLOW THE SPREAD OF NOVEL CORONAVIRUS
DISEASE 2019**

Order No. HO-COVID19-18

DATE OF ORDER: JUNE 16, 2020

Please read this Order carefully. Violation of or failure to comply with this Order is a misdemeanor punishable by fine, imprisonment, or both. (California Health and Safety Code § 120295.)

Summary of the Order

This Order of the County of Contra Costa Health Officer eases certain restrictions set forth in the Health Officer's June 5, 2020, Shelter in Place Order ("Prior Order"). In light of further progress to slow the spread of Novel Coronavirus Disease 2019 ("COVID-19") within the County of Contra Costa and neighboring jurisdictions, and in conformance with State guidelines, as of the effective date set forth in Section 18, this Order:

- Allows recreational vehicle parks, outdoor recreation facilities, hair salons and barbershops to operate; and
- Modifies restrictions on outdoor recreation activities, childcare facilities, providers of religious services and cultural ceremonies, outdoor dining, campgrounds and outdoor pools.

UNDER THE AUTHORITY OF CALIFORNIA HEALTH AND SAFETY CODE SECTIONS 101040 AND 120175, THE HEALTH OFFICER OF THE COUNTY OF CONTRA COSTA ("HEALTH OFFICER") ORDERS:

1. This Order supersedes the Prior Order. This Order amends, clarifies, and continues certain terms of the Prior Order to ensure continued social distancing and limit person-to-person contact to reduce the rate of transmission of COVID-19. This Order continues to restrict activities, travel, governmental and business functions. But in light of progress



achieved in slowing the spread of COVID-19 in the County of Contra Costa (the “County”), and in accordance with a variance obtained by the County from the State of California on June 9, 2020, which allows the County to move more quickly, or in a different order, through Stage 2 of the State of California’s COVID-19 roadmap to recovery, this Order eases restrictions to allow additional businesses to resume or begin operating, subject to conditions set forth in applicable industry guidelines issued by the State. This Order also modifies restrictions that applied to outdoor recreation activities, childcare facilities, outdoor dining, campgrounds and outdoor pools. The gradual and measured easing of restrictions is designed to manage the overall volume, duration, and intensity of person-to-person contact to prevent a surge in COVID-19 cases in the County and neighboring counties. As further provided in Section 11 below, the Health Officer will continue to monitor the risks of the activities and businesses allowed under this Order based on the COVID-19 Indicators (as defined in Section 11) and other data, and may, as conditions support doing so, ease more restrictions and add to the list of Additional Businesses and Additional Activities. The activities allowed by this Order will be assessed on an ongoing basis and these activities and others allowed by the Order may need to be modified (including, without limitation, temporarily restricted or prohibited) if the risk associated with COVID-19 increases in the future. As of the effective date and time of this Order set forth in Section 18 below, all individuals, businesses, and government agencies in the County are required to follow the provisions of this Order.

2. The primary intent of this Order is to slow the spread of COVID-19 in the County and mitigate the impact on delivery of critical healthcare services. All provisions of this Order must be interpreted to effectuate this intent. Failure to comply with any of the provisions of this Order constitutes an imminent threat and menace to public health, constitutes a public nuisance, and is punishable by fine, imprisonment, or both.
3. Individuals living within the County may leave their residences only for the purposes specified in Section 15 of this Order. Individuals in the County who do not reside in the County must comply with all applicable requirements of this Order. Individuals experiencing homelessness are exempt from this Section, but are strongly urged to obtain shelter, and governmental and other entities are strongly urged, as soon as possible, to make such shelter available and provide handwashing or hand sanitation facilities to persons who continue experiencing homelessness.
4. When people leave their place of residence for the limited purposes allowed in this Order, they must strictly comply with Social Distancing Requirements as defined in Section 15.k, except as expressly provided in this Order, and must wear face coverings as provided in, and subject to the limited exceptions in, Health Officer Order No. HO-COVID19-08 (the “Face Covering Order”).
5. Gatherings.
 - a. Health Officer Order No. HO-COVID19-01, which prohibited mass gatherings of 100 or more persons, is rescinded. Except as set forth elsewhere in this Order, all



public and private gatherings of individuals who are not members of the same household or living unit are prohibited. Nothing in this Order prohibits members of a single household or living unit from engaging together in the activities authorized by this Order.

- b. Public and private gatherings of persons in a “Social Bubble,” as defined below, may take place if the gathering takes place outside and participants comply with all other requirements of this Order. Persons in Social Bubbles are not required to strictly adhere to Social Distancing Requirements while participating in gatherings authorized under this section; however, participants over 12 years of age are strongly encouraged to maintain six-foot social distancing from each other and wear face coverings. The following definitions apply to this subsection:
 - i. “Social Bubble” means a Stable Group of 12 that forms either a Household Support Unit, a Childcare Unit, or a Children’s Extracurricular Activity Unit, for the purpose of engaging in activities allowed under this Order.
 - ii. “Stable Group of 12” means a group of not more than 12 individuals over a three-week time period that is a Household Support Unit, a Childcare Unit, or a Children’s Extracurricular Activity Unit.
 - iii. “Household Support Unit” means a Stable Group of 12 that is formed for the purpose of engaging in the sort of support and activities that are typical of members of the same household (e.g., childcare, family recreation, etc.), regardless of whether they physically occupy the same dwelling. Each person may be part of only one Household Support Unit, and every resident of a single dwelling unit must be part of the same Household Support Unit, except that a child who resides in more than one dwelling unit as part of a court-ordered shared custody arrangement may be part of the Household Support Unit of each of the child’s custodians.
 - iv. “Childcare Unit” means a Stable Group of 12 (typically 10 children and 1-2 adults) that is formed for the purposes of the Essential Business of childcare under Section 15.f.xxvi. of the Order. Each person (adult or child) may be a part of only a single Childcare Unit, but children in the same household may be part of separate, age-appropriate Childcare Units.
 - v. “Children’s Extracurricular Activity Unit” means a Stable Group of 12 (typically 10 children and 1-2 adults) that is formed for the purpose of organized recreation under 15.a.iii. Each person (adult or child) may be part of only one Children’s Extracurricular Activity Unit, but children in the same household may be part of separate, age-appropriate Extracurricular Activity Units.



6. Businesses with a facility in the County may operate if they are Essential Businesses as defined in Section 15.f, Outdoor Businesses as defined in Section 15.l, or Additional Businesses as defined in Section 15.n. Outdoor Businesses must conduct all business and transactions involving members of the public outdoors. Businesses that are not Essential Businesses, Outdoor Businesses or Additional Businesses may not operate, except as follows:
 - a. All businesses may conduct Minimum Basic Operations, as described in Section 15.g of this Order.
 - b. All businesses may continue operations consisting exclusively of owners, personnel, volunteers, or contractors performing activities at their own residences (i.e., working from home).

All Essential Businesses are strongly encouraged to remain open. Telework is strongly encouraged at all businesses.

7. As a condition of continued or resumed operations, business operators must prepare or update, post, implement, and distribute to their personnel a Social Distancing Protocol for each of their facilities in the County frequented by personnel or members of the public, as specified in Section 15.h. In addition to the Social Distancing Protocol, all businesses allowed to operate under this Order must follow applicable industry-specific guidance issued by the State of California related to COVID-19, set forth at <https://covid19.ca.gov/industry-guidance/>, and any conditions on operation specified in this Order, including, with regard to Additional Businesses, those specified in Appendix C-1. Except as allowed in Appendix C-1, businesses that include an Essential Business or Outdoor Business component at their facilities alongside other components must, to the extent feasible, scale down their operations to the Essential Business and Outdoor Business components only; provided, however, mixed retail businesses that are otherwise allowed to operate under this Order may continue to stock and sell non-essential products.
8. All travel, except Essential Travel, as defined below in Section 15.i, is prohibited. People may use public transit only for purposes of performing activities permitted under this Order. Transit agencies and people riding on public transit must comply with Social Distancing Requirements, as defined in Section 15.k, to the greatest extent feasible, and personnel and passengers must wear Face Coverings as required by the Face Covering Order. Any travel into or out of the County not expressly permitted by this Order is prohibited.
9. This Order is issued based on evidence of continued significant community transmission of COVID-19 within the County; continued uncertainty regarding the degree of undetected asymptomatic transmission; scientific evidence and best practices regarding the most effective approaches to slow the transmission of communicable diseases generally and COVID-19 specifically; evidence that the age, condition, and health of a significant portion of the population of the County places it at risk for serious health



complications, including death, from COVID-19; and further evidence that others, including younger and otherwise healthy people, are also at risk for serious outcomes. Due to the outbreak of the COVID-19 disease in the general public, which is a pandemic according to the World Health Organization, there is a public health emergency throughout the County. Making the problem worse, some individuals who contract the virus causing COVID-19 have no symptoms or have mild symptoms, which means they may not be aware they carry the virus and are transmitting it to others. Further, evidence shows that the virus can survive for hours to days on surfaces and be indirectly transmitted between individuals. Because even people without symptoms can transmit the infection, and because evidence shows the infection is easily spread, gatherings and other direct or indirect interpersonal interactions can result in preventable transmission of the virus.

10. Efforts taken to date regarding this public health emergency have slowed the virus' trajectory, but the emergency and the attendant risk to public health remain significant. As of June 15, 2020, a total of 1,983 confirmed cases of COVID-19 in the County have been reported (up from 34 on March 15, 2020, just before the first shelter-in-place order). The cumulative number of confirmed cases continues to increase, though the rate of increase has slowed in the weeks leading up to this Order. Evidence suggests that the restrictions on mobility and social distancing requirements imposed by the Prior Order (and the orders that preceded it) are slowing the rate of increase in community transmission and confirmed cases by limiting interactions among people, consistent with scientific evidence of the efficacy of similar measures in other parts of the country and world.
11. The Health Officer is monitoring several key indicators (“COVID-19 Indicators”), which are among the many factors informing decisions whether to modify restrictions imposed to slow the spread of COVID-19. Progress on all of these COVID-19 Indicators — specifically related to case numbers, hospital utilization and capacity, supply of personal protective equipment, and contact tracing — makes it appropriate, at this time, to allow more Additional Businesses to resume operations and ease some other restrictions. But the continued prevalence of the virus that causes COVID-19 requires many activities and business functions to remain restricted, and those activities that are allowed to occur must do so subject to social distancing and other infection control practices identified by the Health Officer. Evaluation of the COVID-19 Indicators will be critical to determinations by the local health officers regarding whether the restrictions imposed by this Order will be further modified to ease or tighten the restrictions imposed by this Order and augment, limit, or prohibit the Additional Businesses and Additional Activities allowed to resume. The Health Officer will continually review whether modifications to the Order are warranted based on (1) progress on the COVID-19 Indicators; (2) developments in epidemiological and diagnostic methods for tracing, diagnosing, treating, or testing for COVID-19; and (3) scientific understanding of the transmission dynamics and clinical impact of COVID-19. The COVID-19 Indicators include, but are not limited to, the following:



- a. The trend of the number of new COVID-19 cases and hospitalizations per day.
 - b. The capacity of hospitals and the health system in the County and region, including acute care beds and Intensive Care Unit beds, to provide care for COVID-19 patients and other patients, including during a surge in COVID-19 cases.
 - c. The supply of personal protective equipment (PPE) available for hospital staff and other healthcare providers and personnel who need PPE to safely respond to and treat COVID-19 patients.
 - d. The ability and capacity to quickly and accurately test persons to determine whether they are COVID-19 positive, especially those in vulnerable populations or high-risk settings or occupations.
 - e. The ability to conduct case investigation and contact tracing for the volume of cases and associated contacts that will continue to occur, isolating confirmed cases and quarantining persons who have had contact with confirmed cases.
12. Scientific evidence shows that at this stage of the emergency, it remains essential to continue to slow virus transmission to help (a) protect the most vulnerable; (b) prevent the health care system from being overwhelmed; (c) prevent long-term chronic health conditions, such as cardiovascular, kidney, and respiratory damage and loss of limbs from blood clotting; and (d) prevent deaths. This Order is necessary to slow the spread of COVID-19, preserving critical and limited healthcare capacity in the County and advancing toward a point in the public health emergency where transmission can be controlled. At the same time, since the Prior Order was issued, the County has continued to make progress in expanding health system capacity and healthcare resources and in slowing community transmission of COVID-19. In light of progress on these indicators, and subject to continued monitoring and potential public health-based responses, in addition to those already allowed to operate under the Prior Order as Essential Businesses, Outdoor Businesses and Additional Businesses, it is appropriate at this time to allow the operation of more Additional Businesses. These businesses are identified based on health-related considerations and transmission risk factors including, but not limited to, the intensity and quantity of contacts and the ability to substantially mitigate transmission risks associated with the operations, and guidance issued by the State of California.
13. This Order is issued in accordance with, and incorporates by reference, the March 4, 2020, Proclamation of a State of Emergency issued by Governor Gavin Newsom and the March 10, 2020, Proclamation by the Contra Costa County Board of Supervisors declaring the existence of a local emergency.



14. This Order is also issued in light of the March 19, 2020, Order of the State Public Health Officer (the “State Shelter Order”), which set baseline statewide restrictions on non-residential business activities, effective until further notice, and the Governor’s March 19, 2020, Executive Order N-33-20 directing California residents to follow the State Shelter Order. The May 4, 2020, Executive Order issued by Governor Newsom and May 7, 2020, Order of the State Public Health Officer permit certain businesses to reopen if a local health officer believes the conditions in that jurisdictions warrant it, but expressly acknowledge the authority of local health officers to establish and implement public health measures within their respective jurisdictions that are more restrictive than those implemented by the State Public Health Officer. This Order adopts in certain respects more stringent restrictions addressing the particular facts and circumstances in this County, which are necessary to control the public health emergency as it is evolving within the County and the Bay Area. Without this tailored set of restrictions that further reduces the number of interactions between persons, scientific evidence indicates that the public health crisis in the County will worsen to the point at which it may overtake available health care resources within the County and increase the death rate. Also, this Order enumerates additional restrictions on non-work-related travel not covered by the State Shelter Order; sets forth mandatory Social Distancing Requirements for all individuals in the County when engaged in activities outside their residences; and sets forth a mechanism to ensure that all businesses with facilities that are allowed to operate under the Order comply with the Social Distancing Requirements. Where this Order is more restrictive than a state public health order related to the COVID-19 pandemic, this Order controls. To the extent any federal guidelines allow activities that are not allowed by this Order, this Order controls and those activities are not allowed.

15. Requirements and Exemptions. Individuals may leave their residence to do the following:

- a. Individuals may leave their residence to perform the following “Essential Activities.” But people at high risk of severe illness from COVID-19 and people who are sick are strongly urged to stay in their residence to the extent possible, except as necessary to seek or provide medical care or Essential Governmental Functions. Essential Activities are:
 - i. To engage in activities or perform tasks important to their health and safety, or to the health and safety of their family or household members (including pets), such as, by way of example only and without limitation, obtaining medical supplies or medication, or visiting a health care professional.
 - ii. To obtain necessary services or supplies for themselves and their family or household members, or to deliver those services or supplies to others, such as, by way of example only and without limitation, canned food, dry goods, fresh fruits and vegetables, pet supply, fresh meats, fish, and poultry, and any other household consumer products, or products



necessary to maintain the habitability, sanitation, and operation of residences.

- iii. To engage in outdoor recreation activity, including, by way of example and without limitation, walking, hiking, bicycling, and running, in compliance with Social Distancing Requirements and subject to restrictions in applicable industry guidance issued by the State of California (<https://covid19.ca.gov/pdf/guidance-campgrounds.pdf>).
 - iv. To perform work for or access an Essential Business, Outdoor Business, or Additional Business; or to otherwise carry out activities specifically permitted in this Order, including Minimum Basic Operations, as defined in this Section.
 - v. To provide necessary care for a family member or pet in another household who has no other source of care.
 - vi. To attend a funeral.
 - vii. To move residences. When moving into or out of the Bay Area region, individuals are strongly urged to quarantine for 14 days. To quarantine, individuals should follow the guidance of the United States Centers for Disease Control and Prevention.
 - viii. To engage in Outdoor Activities or Additional Activities.
- b. Individuals may leave their residence to work for, volunteer at, or obtain services at “Healthcare Operations,” including, without limitation, hospitals, clinics, COVID-19 testing locations, dentists, pharmacies, blood banks and blood drives, pharmaceutical and biotechnology companies, other healthcare facilities, healthcare suppliers, home healthcare services providers, mental health providers, or any related and/or ancillary healthcare services. “Healthcare Operations” also include veterinary care and all healthcare services provided to animals. This exemption for Healthcare Operations shall be construed broadly to avoid any interference with the delivery of healthcare, broadly defined. “Healthcare Operations” excludes fitness and exercise gyms and similar facilities.
- c. Individuals may leave their residence to provide any services or perform any work necessary to the operation and maintenance of “Essential Infrastructure,” including airports, utilities (including water, sewer, gas, and electrical), oil refining, roads and highways, public transportation, solid waste facilities (including collection, removal, disposal, recycling, and processing facilities), cemeteries, mortuaries, crematoriums, and telecommunications systems (including the provision of essential global, national, and local infrastructure for internet, computing services, business infrastructure, communications, and web-based services).



- d. All first responders, emergency management personnel, emergency dispatchers, court personnel, and law enforcement personnel, and others who need to perform essential services are categorically exempt from this Order to the extent they are performing those essential services. Further, nothing in this Order shall prohibit any individual from performing or accessing “Essential Governmental Functions,” as determined by the governmental entity performing those functions. Each governmental entity shall identify and designate appropriate personnel, volunteers, or contractors to continue providing and carrying out any Essential Governmental Functions, including the hiring or retention of new personnel or contractors to perform such functions. Each governmental entity and its contractors must employ all necessary emergency protective measures to prevent, mitigate, respond to, and recover from the COVID-19 pandemic, and all Essential Governmental Functions shall be performed in compliance with Social Distancing Requirements to the greatest extent feasible.
- e. A “business” includes any for-profit, non-profit, or educational entity, whether a corporate entity, organization, partnership or sole proprietorship, and regardless of the nature of the service, the function it performs, or its corporate or entity structure.
- f. “Essential Businesses” are:
 - i. Healthcare Operations and businesses that operate, maintain, or repair Essential Infrastructure;
 - ii. Grocery stores, certified farmers’ markets, farm and produce stands, supermarkets, food banks, convenience stores, and other establishments engaged in the retail sale of unprepared food, canned food, dry goods, non-alcoholic beverages, fresh fruits and vegetables, pet supply, fresh meats, fish, and poultry, as well as hygienic products and household consumer products necessary for personal hygiene or the habitability, sanitation, or operation of residences. The businesses included in this subparagraph (ii) include establishments that sell multiple categories of products provided that they sell a significant amount of essential products identified in this subparagraph, such as liquor stores that also sell a significant amount of food.
 - iii. Food cultivation, including farming, livestock, and fishing;
 - iv. Businesses that provide food, shelter, and social services, and other necessities of life for economically disadvantaged or otherwise needy individuals;
 - v. Construction, but only pursuant to the Construction Safety Protocols listed in Appendix B-1 or Appendix B-2, whichever is applicable. Public works



projects shall also be subject to Appendix B-1 or Appendix B-2, whichever is applicable, except if other protocols are specified by the Health Officer. Appendix B-1 and Appendix B-2 are incorporated into this Order by this reference;

- vi. Newspapers, television, radio, and other media services;
- vii. Gas stations and auto-supply, auto-repair (including, but not limited to, for cars, trucks, motorcycles and motorized scooters), and automotive dealerships, but only for the purpose of providing auto-supply and auto-repair services. This subparagraph (vii) does not restrict the on-line purchase of automobiles if they are delivered to a residence or Essential Business;
- viii. Bicycle repair and supply shops;
- ix. Banks and related financial institutions;
- x. Service providers that enable real estate transactions (including rentals, leases, and home sales), including, but not limited to, real estate agents, escrow agents, notaries, and title companies, provided that appointments and other residential real estate viewings must only occur virtually or, if a virtual viewing is not feasible, by appointment with no more than two visitors at a time residing within the same household or living unit and one individual showing the unit (except that in person visits are not allowed when the occupant is present in the residence);
- xi. Hardware stores;
- xii. Plumbers, electricians, exterminators, and other service providers who provide services that are necessary to maintaining the habitability, sanitation, or operation of residences and Essential Businesses;
- xiii. Businesses providing mailing and shipping services, including post office boxes;
- xiv. Educational institutions—including public and private K-12 schools, colleges, and universities—for purposes of facilitating distance learning or performing essential functions, or as allowed under subparagraph xxvi, provided that social distancing of six-feet per person is maintained to the greatest extent possible;
- xv. Laundromats, drycleaners, and laundry service providers;
- xvi. Restaurants and other facilities that prepare and serve food, but only for delivery or carry out. Schools and other entities that typically provide free



food services to students or members of the public may continue to do so under this Order on the condition that the food is provided to students or members of the public on a pick-up and take-away basis only. Schools and other entities that provide food services under this exemption shall not permit the food to be eaten at the site where it is provided, or at any other gathering site;

- xvii. Funeral home providers, mortuaries, cemeteries, and crematoriums, to the extent necessary for the transport, preparation, or processing of bodies or remains;
- xviii. Businesses that supply other Essential Businesses, Outdoor Businesses or Additional Businesses with the support or supplies necessary to operate, but only to the extent that they support or supply these businesses. This exemption shall not be used as a basis for engaging in sales to the general public from retail storefronts;
- xix. Businesses that have the primary function of shipping or delivering groceries, food, or other goods directly to residences or businesses. This exemption shall not be used to allow for manufacturing or assembly of non-essential products or for other functions besides those necessary to the delivery operation;
- xx. Airlines, taxis, rental car companies, rideshare services (including shared bicycles and scooters), and other private transportation providers providing transportation services necessary for Essential Activities and other purposes expressly authorized in this Order;
- xxi. Home-based care for seniors, adults, children, and pets;
- xxii. Residential facilities and shelters for seniors, adults, and children;
- xxiii. Professional services, such as legal, notary, or accounting services, when necessary to assist in compliance with non-elective, legally required activities or in relation to death or incapacity;
- xxiv. Services to assist individuals in finding employment with Essential Businesses;
- xxv. Moving services that facilitate residential or commercial moves that are allowed under this Order; and
- xxvi. Childcare establishments, summer camps, and other educational or recreational institutions or programs providing care or supervision for children of all ages. These operations must comply with industry guidance issued by the State of California, including updated guidance for



child care programs and providers (<https://covid19.ca.gov/pdf/guidance-childcare.pdf>) and guidance for day camps (<https://covid19.ca.gov/pdf/guidance-daycamps.pdf>), to the extent applicable. It is recommended that children remain in groups as small as possible, preferably stable groups of 12 or less.

- g. “Minimum Basic Operations” means the following activities for businesses, provided that owners, personnel, and contractors comply with Social Distancing Requirements as defined this Section, to the extent possible, while carrying out such operations:
 - i. The minimum necessary activities to maintain and protect the value of the business’s inventory and facilities; ensure security, safety, and sanitation; process payroll and employee benefits; provide for the delivery of existing inventory directly to residences or businesses; and related functions. For clarity, this section does not permit businesses to provide curbside pickup to customers.
 - ii. The minimum necessary activities to facilitate owners, personnel, and contractors of the business being able to continue to work remotely from their residences, and to ensure that the business can deliver its service remotely.
- h. All businesses that are operating at facilities in the County visited or used by the public or personnel must, as a condition of such operation, prepare and post a “Social Distancing Protocol” for each of these facilities; provided, however, that construction activities shall instead comply with the Construction Project Safety Protocols set forth in Appendix B-1 or Appendix B-2, whichever is applicable, and not the Social Distancing Protocol. The Social Distancing Protocol must be substantially in the form attached to this Order as Appendix A, incorporated into this Order by reference, and it must be updated from prior versions to address new requirements listed in this Order or in related guidance or directives from the Health Officer. The Social Distancing Protocol must be posted at or near the entrance of the relevant facility, and shall be easily viewable by the public and personnel. A copy of the Social Distancing Protocol must also be provided to each person performing work at the facility. All businesses subject to this paragraph shall implement the Social Distancing Protocol and provide evidence of its implementation to any authority enforcing this Order upon demand. The Social Distancing Protocol must explain how the business is achieving the following, as applicable:
 - i. Limiting the number of people who can enter into the facility at any one time to ensure that people in the facility can easily maintain a minimum six-foot distance from one another at all times, except as required to complete Essential Business activity;



- ii. Requiring face coverings to be worn by all persons entering the facility, other than those exempted from face covering requirements (e.g. young children);
 - iii. Where lines may form at a facility, marking six-foot increments at a minimum, establishing where individuals should stand to maintain adequate social distancing;
 - iv. Providing hand sanitizer, soap and water, or effective disinfectant at or near the entrance of the facility and in other appropriate areas for use by the public and personnel, and in locations where there is high-frequency employee interaction with members of the public (e.g. cashiers);
 - v. Providing for contactless payment systems or, if not feasible to do so, the providing for disinfecting all payment portals, pens, and styluses after each use;
 - vi. Regularly disinfecting other high-touch surfaces;
 - vii. Posting a sign at the entrance of the facility informing all personnel and customers that they should: avoid entering the facility if they have any COVID-19 symptoms; maintain a minimum six-foot distance from one another; sneeze and cough into one's elbow; not shake hands or engage in any unnecessary physical contact; and
 - viii. Any additional social distancing measures being implemented (see the Centers for Disease Control and Prevention's guidance at: <https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html>).
- i. Individuals may leave their residence to engage in "Essential Travel." Essential Travel means travel for any of the following purposes:
- i. Travel related to the provision of or access to Essential Activities, Essential Governmental Functions, Essential Businesses, Minimum Basic Operations, Outdoor Activities, Outdoor Businesses, Additional Activities, and Additional Businesses.
 - ii. Travel to care for any elderly, minors, dependents, or persons with disabilities.
 - iii. Travel to or from educational institutions for purposes of receiving materials for distance learning, for receiving meals, and any other related services.
 - iv. Travel to return to a place of residence from outside the County.



- v. Travel required by law enforcement or court order.
 - vi. Travel required for non-residents to return to their place of residence outside the County. Individuals are strongly encouraged to verify that their transportation out of the County remains available and functional prior to commencing such travel.
 - vii. Travel to manage after-death arrangements and burial.
 - viii. Travel to arrange for shelter or avoid homelessness.
 - ix. Travel to avoid domestic violence or child abuse.
 - x. Travel for parental custody arrangements.
 - xi. Travel to a place to temporarily reside in a residence or other facility to avoid potentially exposing others to COVID-19, such as a hotel or other facility provided by a governmental authority for such purposes.
- j. “Residences” include hotels, motels, shared rental units and similar facilities. Residences also include living structures and outdoor spaces associated with those living structures, such as patios, porches, backyards, and front yards that are only accessible to a single family or household unit.
- k. “Social Distancing Requirements” means:
- i. Maintaining at least six-foot social distancing from individuals who are not part of the same household, living unit or Social Bubble;
 - ii. Frequently washing hands with soap and water for at least 20 seconds, or using hand sanitizer that is recognized by the Centers for Disease Control and Prevention as effective in combatting COVID-19;
 - iii. Covering coughs and sneezes with a tissue or fabric or, if not possible, into the sleeve or elbow (but not into hands);
 - iv. Wearing a face covering when out in public, consistent with the orders or guidance of the Health Officer; and
 - v. Avoiding all social interaction outside the household when sick with a fever, cough, or other COVID-19 symptoms.

All individuals must strictly comply with Social Distancing Requirements, except to the limited extent necessary to provide care (including childcare, adult or senior care, care to individuals with special needs, and patient care); as necessary to



carry out the work of Essential Businesses, Essential Governmental Functions, or provide for Minimum Basic Operations; or as otherwise expressly provided in this Order. Outdoor Activities, Outdoor Businesses, Additional Activities and Additional Businesses must strictly adhere to these Social Distancing Requirements.

l. “Outdoor Businesses” means:

- i. The following businesses that normally operated primarily outdoors prior to March 16, 2020, and where there is the ability to fully maintain social distancing of at least six feet between all persons:
 1. Businesses primarily operated outdoors, such as wholesale and retail plant nurseries, agricultural operations, and garden centers.
 2. Service providers that primarily provide outdoor services, such as landscaping and gardening services, and environmental site remediation services.

For clarity, “Outdoor Businesses” do not include outdoor restaurants, cafes, or bars, or businesses that promote large, coordinated, and prolonged gatherings, such as outdoor concert venues and amusement parks.

m. “Outdoor Activities” means:

- i. To obtain goods, services, or supplies from, or perform work for, an Outdoor Business.
- ii. To engage in outdoor recreation as permitted in Section 15.a.

n. “Additional Business” means any business, entity, or other organization identified as an Additional Business in Appendix C-1, which will be updated as warranted based on the Health Officer’s ongoing evaluation of the COVID-19 Indicators and other data. In addition to the other requirements in this Order, operation of those Additional Businesses is subject to any conditions and health and safety requirements set forth in Appendix C-1 and in applicable industry-specific guidance issued by the State of California. Appendix C-1 is incorporated into this Order by this reference.



- o. “Additional Activities” means:
 - i. To obtain goods, services, or supplies from, or perform work for, Additional Businesses identified in Appendix C-1, subject to any conditions and health and safety requirements set forth in this Order and any applicable industry-specific guidance issued by the State of California.
 - ii. To engage in activities set forth in Appendix C-2, which will be updated as warranted based on the Health Officer’s ongoing evaluation of the COVID-19 Indicators and other data. Engagement in Additional Activities is subject to applicable conditions and health and safety requirements set forth in this Order and Appendix C-2. Appendix C-2 is incorporated into this Order by this reference.
16. Government agencies and other entities operating shelters and other facilities that house or provide meals or other necessities of life for individuals experiencing homelessness must take appropriate steps to help ensure compliance with Social Distancing Requirements, including adequate provision of hand sanitizer. Also, individuals experiencing homelessness who are unsheltered and living in encampments should, to the maximum extent feasible, abide by 12 foot by 12 foot distancing for the placement of tents, and government agencies should provide restroom and hand washing facilities for individuals in such encampments as set forth in Centers for Disease Control and Prevention Interim Guidance Responding to Coronavirus 2019 (COVID-19) Among People Experiencing Unsheltered Homelessness (<https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/unsheltered-homelessness.html>).
17. Pursuant to Government Code sections 26602 and 41601 and Health and Safety Code section 101029, the Health Officer requests that the Sheriff and all chiefs of police in the County ensure compliance with and enforce this Order. The violation of any provision of this Order constitutes an imminent threat and menace to public health, constitutes a public nuisance, and is punishable by fine, imprisonment, or both.
18. This Order shall become effective at 6 a.m. on June 17, 2020, and will continue to be in effect until it is extended, rescinded, superseded, or amended in writing by the Health Officer.
19. Copies of this Order shall promptly be: (1) made available at the Office of the Director of Contra Costa Health Services, 1220 Morello Avenue, Suite 200, Martinez, CA 94553; (2) posted on the Contra Costa Health Services website (<https://www.cchealth.org>); and (3) provided to any member of the public requesting a copy of this Order. Questions or comments regarding this Order may be directed to Contra Costa Health Services at (844) 729-8410.



20. If any provision of this Order or its application to any person or circumstance is held to be invalid, the remainder of the Order, including the application of such part or provision to other persons or circumstances, shall not be affected and shall continue in full force and effect. To this end, the provisions of this Order are severable.

IT IS SO ORDERED:



Dated: June 16, 2020

Chris Farnitano, M.D.
Health Officer of the County of Contra Costa

Attachments:

- Appendix A – Social Distancing Protocol (updated June 16, 2020)
- Appendix B-1 – Small Construction Project Safety Protocol
- Appendix B-2 – Large Construction Project Safety Protocol (updated June 16, 2020)
- Appendix C-1 – Additional Businesses (updated June 16, 2020)
- Appendix C-2 – Additional Activities (updated June 5, 2020)



Appendix A: Social Distancing Protocol (Updated June 16, 2020)

Business name:

Facility Address:

Approximate gross square footage of space open to the public:

Businesses must implement all applicable measures listed below, and be prepared to explain why any measure that is not implemented is inapplicable to the business.

Signage:

Signage at each public entrance of the facility to inform all employees and customers that they should: avoid entering the facility if they have COVID-19 symptoms; maintain a minimum six-foot distance from one another; sneeze and cough into a cloth or tissue or, if not available, into one's elbow; wear face coverings, as appropriate; and not shake hands or engage in any unnecessary physical contact.

Signage posting a copy of the Social Distancing Protocol at each public entrance to the facility.

Measures To Protect Employee Health (check all that apply to the facility):

Everyone who can carry out their work duties from home has been directed to do so.

All employees have been told not to come to work if sick.

Symptom checks are being conducted before employees may enter the work space.

Employees are required to wear face coverings, as appropriate.

All desks or individual work stations are separated by at least six feet.

Break rooms, bathrooms, and other common areas are being disinfected frequently, on the following schedule:

Break rooms:

Bathrooms:

Other ():

Disinfectant and related supplies are available to all employees at the following location(s):

Hand sanitizer effective against COVID-19 is available to all employees at the following location(s):

Soap and water are available to all employees at the following location(s):

Copies of this Protocol have been distributed to all employees.

Optional—Describe other measures:



Appendix A: Social Distancing Protocol (Updated June 16, 2020)

Measures To Prevent Crowds From Gathering (check all that apply to the facility):

- Limit the number of customers in the store at any one time to _____, which allows for customers and employees to easily maintain at least six-foot distance from one another at all practicable times.
- Post an employee at the door to ensure that the maximum number of customers in the facility set forth above is not exceeded.
- Placing per-person limits on goods that are selling out quickly to reduce crowds and lines. Explain:
- Optional—Describe other measures:

Measures To Keep People At Least Six Feet Apart (check all that apply to the facility)

- Placing signs outside the store reminding people to be at least six feet apart, including when in line.
- Placing tape or other markings at least six feet apart in customer line areas inside the store and on sidewalks at public entrances with signs directing customers to use the markings to maintain distance.
- Separate order areas from delivery areas to prevent customers from gathering.
- All employees have been instructed to maintain at least six feet distance from customers and from each other, except employees may momentarily come closer when necessary to accept payment, deliver goods or services, or as otherwise necessary.
- Optional—Describe other measures:

Measures To Prevent Unnecessary Contact (check all that apply to the facility):

- Preventing people from self-serving any items that are food-related.
- Lids for cups and food-bar type items are provided by staff; not to customers to grab.
- Bulk-item food bins are not available for customer self-service use.
- Not permitting customers to bring their own bags, mugs, or other reusable items from home that must be handled by employees. Customers bringing their own reusable items that do not require handling by employees is permissible.
- Providing for contactless payment systems or, if not feasible, sanitizing payment systems regularly. Describe:
- Optional—Describe other measures (e.g. providing senior-only hours):



Appendix A: Social Distancing Protocol (Updated June 16, 2020)

Measures To Increase Sanitization (check all that apply to the facility):

- Disinfecting wipes that are effective against COVID-19 are available near shopping carts and shopping baskets.
- Employee(s) assigned to disinfect carts and baskets regularly.
- Hand sanitizer, soap and water, or effective disinfectant is available to the public at or near the entrance of the facility, at checkout counters, and anywhere else where people have direct interactions.
- Disinfecting all payment portals, pens, and styluses after each use.
- Disinfecting all high-contact surfaces frequently.
- Optional—Describe other measures:

* Any additional measures not included here should be listed on separate pages and attached to this document.

You may contact the following person with any questions or comments about this protocol:

Name:

Phone number:



Appendix B-2

Large Construction Project Safety Protocol (Updated June 16, 2020)

1. Any construction project meeting any of the following specifications is subject to this Large Construction Project Safety Protocol (“LCP Protocol”), including public works projects unless otherwise specified by the Health Officer:
 - a. For residential construction projects, any single-family, multi-family, senior, student, or other residential construction, renovation, or remodel project consisting of more than 10 units.
 - b. For commercial construction projects, any construction, renovation, or tenant improvement project consisting of more than 20,000 square feet of floor area.
 - c. For construction of Essential Infrastructure, as defined in section 16.c of the Order, any project that requires five or more workers at the jobsite at any one time.
2. The following restrictions and requirements must be in place at all construction job sites subject to this LCP Protocol:
 - a. Comply with all applicable and current laws and regulations including but not limited to OSHA and Cal-OSHA. If there is any conflict, difference or discrepancy between or among applicable laws and regulations and/or this LCP Protocol, the stricter standard will apply.
 - b. Prepare a new or updated Site-Specific Health and Safety Plan to address COVID-19-related issues, post the Plan on-site at all entrances and exits, and produce a copy of the Plan to County governmental authorities upon request. The Plan must be translated as necessary to ensure that all non-English speaking workers are able to understand the Plan.
 - c. Provide personal protective equipment (PPE) specifically for use in construction, including gloves, goggles, face shields, and face coverings as appropriate for the activity being performed. At no time may a contractor secure or use medical-grade PPE, unless required due to the medical nature of a job site. Face Coverings must be worn in compliance with Section 5 of the Health Officer’s Order No. HO-COVID19-08, dated April 17, 2020, or any subsequently issued or amended order.
 - d. Ensure that employees are trained in the use of PPE. Maintain and make available a log of all PPE training provided to employees and monitor all employees to ensure proper use of the PPE.
 - e. Prohibit sharing of PPE.



Appendix B-2

- f. Implement social distancing requirements including, at minimum:
- i. Stagger stop- and start-times for shift schedules to reduce the quantity of workers at the jobsite at any one time to the extent feasible.
 - ii. Stagger trade-specific work to minimize the quantity of workers at the jobsite at any one time.
 - iii. Require social distancing by maintaining a minimum six-foot distance between workers at all times, except as strictly necessary to carry out a task associated with the project.
 - iv. Prohibit gatherings of any size on the jobsite, except for safety meetings or as strictly necessary to carry out a task associated with the project.
 - v. Strictly control “choke points” and “high-risk areas” where workers are unable to maintain minimum six-foot social distancing and prohibit or limit use to ensure that minimum six-foot distancing can easily be maintained between workers.
 - vi. Minimize interactions and maintain social distancing with all site visitors, including delivery workers, design professional and other project consultants, government agency representatives, including building and fire inspectors, and residents at residential construction sites.
 - vii. Prohibit workers from using others’ phones or desks. Any work tools or equipment that must be used by more than one worker must be cleaned with disinfectants that are effective against COVID-19 before use by a new worker.
 - viii. Place wash stations or hand sanitizers that are effective against COVID-19 at entrances to the jobsite and in multiple locations dispersed throughout the jobsite as warranted.
 - ix. Maintain a daily attendance log of all workers and visitors that includes contact information, including name, address, phone number, and email.
 - x. Post a notice in an area visible to all workers and visitors instructing workers and visitors to do the following:
 1. Do not touch your face with unwashed hands or with gloves.
 2. Frequently wash your hands with soap and water for at least 20 seconds or use hand sanitizer with at least 60% alcohol.
 3. Clean and disinfect frequently touched objects and surfaces such as workstations, keyboards, telephones, handrails, machines, shared tools, elevator control buttons, and doorknobs.
 4. Cover your mouth and nose when coughing or sneezing or cough or sneeze into the crook of your arm at your elbow/sleeve.
 5. Do not enter the jobsite if you have a fever, cough, or other COVID-19 symptoms. If you feel sick, or have been exposed to anyone who is sick, stay at home.
 6. Constantly observe your work distances in relation to other staff. Maintain the recommended minimum six-foot distancing at all times when not wearing the necessary PPE for working in close proximity to another person.
 7. Do not share phones or PPE.



Appendix B-2

- xi. The notice in section 2.f.x must be translated as necessary to ensure that all non-English speaking workers are able to understand the notice.
- g. Implement cleaning and sanitization practices in accordance with the following:
 - i. Frequently clean and sanitize, in accordance with CDC guidelines, all high-traffic and high-touch areas including, at a minimum: meeting areas, jobsite lunch and break areas, entrances and exits to the jobsite, jobsite trailers, hand-washing areas, tools, equipment, jobsite restroom areas, stairs, elevators, and lifts.
 - ii. Establish a cleaning and decontamination protocol prior to entry and exit of the jobsite and post the protocol at entrances and exits of jobsite.
 - iii. Supply all personnel performing cleaning and sanitization with proper PPE to prevent them from contracting COVID-19. Employees must not share PPE.
 - iv. Establish adequate time in the workday to allow for proper cleaning and decontamination including prior to starting at or leaving the jobsite for the day.
- h. Implement a COVID-19 community spread reduction plan as part of the Site-Specific Health and Safety Plan that includes, at minimum, the following restrictions and requirements:
 - i. Prohibit all carpooling to and from the jobsite except by workers living within the same household unit, or as necessary for workers who have no alternative means of transportation.
 - ii. Cal-OSHA requires employers to provide water, which should be provided in single-serve containers. Prohibit any sharing of any food or beverage and if sharing is observed, the worker must be sent home for the day.
 - iii. Prohibit use of microwaves, water coolers, and other similar shared equipment.
- i. Assign a COVID-19 Safety Compliance Officer (SCO) to the jobsite and ensure the SCO's name is posted on the Site-Specific Health and Safety Plan. The SCO must:
 - i. Ensure implementation of all recommended safety and sanitation requirements regarding the COVID-19 virus at the jobsite.
 - ii. Compile daily written verification that each jobsite is compliant with the components of this LCP Protocol. Each written verification form must be copied, stored, and made immediately available upon request by any County official.
 - iii. Establish a daily screening protocol for arriving staff, to ensure that potentially infected staff do not enter the construction site. If workers leave the jobsite and return the same day, establish a cleaning and decontamination protocol prior to entry and exit of the jobsite. Post the daily screening protocol at all entrances and exit to the jobsite. More information on screening can be found online at: <https://www.cdc.gov/coronavirus/2019-ncov/community/index.html>.
 - iv. Conduct daily briefings in person or by teleconference that must cover the following topics:
 - 1. New jobsite rules and pre-job site travel restrictions for the prevention of COVID-19 community spread.
 - 2. Review of sanitation and hygiene procedures.
 - 3. Solicitation of worker feedback on improving safety and sanitation.
 - 4. Coordination of construction site daily cleaning/sanitation requirements.
 - 5. Conveying updated information regarding COVID-19.



Appendix B-2

6. Emergency protocols in the event of an exposure or suspected exposure to COVID-19.
 - v. Develop and ensure implementation of a remediation plan to address any non-compliance with this LCP Protocol and post remediation plan at entrance and exit of jobsite during remediation period. The remediation plan must be translated as necessary to ensure that all non-English speaking workers are able to understand the document.
 - vi. The SCO must not permit any construction activity to continue without bringing such activity into compliance with these requirements.
 - vii. Report repeated non-compliance with this LCP Protocol to the appropriate jobsite supervisors and a designated County official.
- j. Assign a COVID-19 Third-Party Jobsite Safety Accountability Supervisor (JSAS) for the jobsite, who at a minimum holds an OSHA-30 certificate and first-aid training within the past two years, who must be trained in the protocols herein and verify compliance, including by visual inspection and random interviews with workers, with this LCP Protocol.
- i. Within seven calendar days of each jobsite visit, the JSAS must complete a written assessment identifying any failure to comply with this LCP Protocol. The written assessment must be copied, stored, and, upon request by the County, sent to a designated County official.
 - ii. If the JSAS discovers that a jobsite is not in compliance with this LCP Protocol, the JSAS must work with the SCO to develop and implement a remediation plan.
 - iii. The JSAS must coordinate with the SCO to prohibit continuation of any work activity not in compliance with rules stated herein until addressed and the continuing work is compliant.
 - iv. The remediation plan must be sent to a designated County official within five calendar days of the JSAS's discovery of the failure to comply.
- k. In the event of a confirmed case of COVID-19 at any jobsite, the following must take place:
- i. Immediately remove the infected individual from the jobsite with directions to seek medical care.
 - ii. Each location the infected worker was at must be decontaminated and sanitized. Work in these locations must cease until decontamination and sanitization is complete.
 - iii. The County Public Health Department must be notified immediately and any additional requirements per the County health officials must be completed, including full compliance with any tracing efforts by the County.
- l. Where construction work occurs within an occupied residential unit, any separate work area must be sealed off from the remainder of the unit with physical barriers such as plastic sheeting or closed doors sealed with tape to the extent feasible. If possible, workers must access the work area from an alternative entry/exit door to the entry/exit door used by residents. Available windows and exhaust fans must be used to ventilate the work area. If residents have access to the work area between workdays, the work area must be cleaned and



Appendix B-2

sanitized at the beginning and at the end of workdays. Every effort must be taken to minimize contact between workers and residents, including maintaining a minimum of six feet of social distancing at all times.

- m. Where construction work occurs within common areas of an occupied residential or commercial building or a mixed-use building in use by on-site employees or residents, any separate work area must be sealed off from the rest of the common areas with physical barriers such as plastic sheeting or closed doors sealed with tape to the extent feasible. If possible, workers must access the work area from an alternative building entry/exit door to the building entry/exit door used by residents or other users of the building. Every effort must be taken to minimize contact between worker and building residents and users, including maintaining a minimum of six feet of social distancing at all times.



Appendix C-1

Appendix C-1: Additional Businesses Permitted to Operate (Updated June 16, 2020)

General Requirements

The “Additional Businesses” listed below may operate, subject to the requirements set forth in the Order and to any additional requirements set forth below or in separate industry-specific guidance by the Health Officer. These businesses were selected based on guidance issued by the State of California and to implement a measured expansion of commercial activity based on health-related considerations, including the risks of COVID-19 transmission associated with types and modes of business operations, the ability to substantially mitigate transmission risks associated with the operations, and related factors, such as the following:

- **Increase in mobility and volume of activity**—the overall impact the reopening will have on the number of people leaving their homes and traveling to work at or access the business;
- **Contact intensity**—the type (close or distant) and duration (brief or prolonged) of the contact involved in the business;
- **Number of contacts**—the approximate number of people that will be in the setting at the same time;
- **Modification potential**—the degree to which mitigation measures can decrease the risk of transmission.

To mitigate the risk of transmission to the greatest extent possible, before resuming or commencing operations, each Additional Business must:

- a. Prepare, post, implement, and distribute to their Personnel, as defined below, a Social Distancing Protocol as specified in Section 15.h. of the Order for each of its facilities in the County frequented by their Personnel or members of the public; and
- b. Prepare, post, implement, and distribute to its Personnel a written health and safety plan that addresses all applicable best practices set forth in relevant Health Officer directives.

As used in this Appendix C-1, “Personnel” means the following people who provide goods or services associated with the Additional Business: Employees; contractors and sub-contractors (such as those who sell goods or perform services onsite or who deliver goods for the business); independent contractors (such as “gig workers” who perform work via the Additional Business’ app or other online interface); vendors who are permitted to sell goods onsite; volunteers; and other individuals who provide services onsite at the request of the Additional Business.

Each Additional Business must comply with Social Distancing Requirements, described in Section 15.k. of the Order, as well as all applicable industry-specific guidance issued by the State of California related to COVID-19, set forth at <https://covid19.ca.gov/industry-guidance/>. Additionally, each Additional Business must comply with Section 5 of the Face Covering Order.

List of Additional Businesses

For purposes of the Order, Additional Businesses include all of the following:



Appendix C-1

(1) Retail Stores and Retail Supply Chain Businesses

- a. Basis for Addition. The State of California has determined that retail businesses, and manufacturing and logistics and warehousing businesses that support retail businesses, may resume operation, subject to more restrictive local public health measures. Retail stores to which this provision applies includes, but is not limited to, bookstores, jewelry stores, toy stores, clothing and shoe stores, home and furnishing stores, sporting goods stores and florists. For clarity, this provision does not apply to personal service businesses such as beauty salons.
- b. Description and Conditions to Operate.
 1. Curbside/Outside Pickup. All retail stores may operate for curbside or other outdoor pickup, subject to applicable industry guidance issued by the State of California (<https://covid19.ca.gov/pdf/guidance-retail.pdf>) and all of the following conditions:
 - (a) If a store is not open for indoor shopping, it may not display merchandise for sale on tables or otherwise outside the store, and customers may not enter the store.
 - (b) The store must have access to an area or areas outside the store for customer pickups. Subject to local requirements, a pickup area may be curbside, on a sidewalk, in a parking lot, or in any other area that is suitable for customer pickups and not in an enclosed space.
 - (c) The store must employ reasonable measures to require customers to comply with Social Distancing Requirements at the pickup areas, including but not limited to marking locations at six-foot intervals for customers to stand while waiting in line.
 - (d) The store must limit the number of Personnel in enclosed areas so that Personnel can comply with Social Distancing Requirements.
 - (e) The store must employ reasonable measures to prevent pedestrian or vehicle congestion in the vicinity of the pickup area.
 2. Indoor Retail. All retail businesses may operate for indoor shopping, subject to applicable industry guidance issued by the State of California (<https://covid19.ca.gov/pdf/guidance-retail.pdf>). The number of Personnel and customers inside the store or other enclosed space must be limited so that Personnel and customers can comply with Social Distancing Requirements.
 3. Shopping Malls, Shopping Centers and Swap Meets. Shopping malls, shopping centers and swap meets may resume operations subject to applicable industry guidance issued by the State of California (<https://covid19.ca.gov/pdf/guidance-shopping-centers.pdf>). Prior to opening, the operator of an indoor shopping mall must prepare and obtain the Health Officer's approval of a COVID-19 prevention



Appendix C-1

plan. The plan must address and describe with particularity how the facility will implement the preventive measures described in the guidance document. The plan must be submitted to the Health Officer at the Office of the Director of Contra Costa Health Services, 1220 Morello Avenue, Suite 200, Martinez, CA 94553.

4. Manufacturing. Manufacturing businesses permitted to operate under the state Resilience Roadmap (<https://covid19.ca.gov/roadmap/>), as it is amended from time to time, may operate, subject to applicable guidance issued by the State of California (<https://covid19.ca.gov/pdf/guidance-manufacturing.pdf>). Manufacturers must also limit the number of Personnel in enclosed areas so that Personnel can comply with Social Distancing Requirements.
5. Logistics and Warehousing Facilities. Logistics and warehousing facilities permitted to operate under the State of California Resilience Roadmap (<https://covid19.ca.gov/roadmap/>), as it is amended from time to time, may operate, subject to applicable guidance issued by the State of California (<https://covid19.ca.gov/pdf/guidance-logistics-warehousing.pdf>). Logistics and warehousing facilities must also limit the number of Personnel in enclosed areas so that Personnel can comply with Social Distancing Requirements.

(2) Limited Services That Do Not Generally Require Close Customer Contact

- a. Basis for Addition: The State of California has determined that businesses providing limited services that do not generally require close customer contact may resume operation, subject to more restrictive local health measures.
- b. Description and Conditions to Operate: Businesses that offer limited services that do not require close customer contact include, by way of example and without limitation, car washes, pet groomers and dog walkers, and businesses that provide services inside residences and community facilities where social distancing can be maintained, such as residential and janitorial cleaning services, heating, ventilation and air conditioning services, appliance repair persons, electricians, plumbers, other mechanical tradespersons, and general contractors. These businesses may operate subject to applicable industry guidance issued by the State of California (<https://covid19.ca.gov/pdf/guidance-limited-services.pdf>).

(3) Providers of Religious Services and Cultural Ceremonies

- a. Basis for Addition: The State of California has determined that places of worship and providers of religious services and cultural ceremonies may resume specified in-person activities under certain limitations.
- b. Description and Conditions to Operate: Places of worship and cultural ceremonies and providers of religious services and cultural ceremonies may hold in-person religious services and cultural ceremonies, subject to applicable guidance issued by the State of California (<https://covid19.ca.gov/pdf/guidance-places-of-worship.pdf>). Because in-person events, including in-person religious services and cultural ceremonies, can involve extended periods of close contact, increasing the risk of transmission of



Appendix C-1

COVID-19, it is recommended that event organizers consider maintaining contact information of attendees at services or ceremonies and that this information be kept by the event's organizer for at least 14 days after the event. The purpose of this recommendation is to assist Contra Costa Health Services with effective contact tracing in case of an outbreak that may have affected people attending the event.

(4) Office Workplaces

- a. Basis for Addition: The State of California has determined that office workplaces may resume operation.
- b. Description and Conditions to Operate: All office workplaces may open for business, subject to restrictions in applicable industry guidance issued by the State of California (<https://covid19.ca.gov/pdf/guidance-office-workspaces.pdf>).

(5) Outdoor Museums and Other Outdoor Exhibit Spaces

- a. Basis for Addition: The State of California has determined that outdoor museums, open air galleries, botanical gardens, and other outdoor exhibit spaces (collectively "Outdoor Museums") may resume limited operation.
- b. Description and Conditions to Operate: Outdoor Museums may operate subject to applicable industry guidance issued by the State of California (<https://covid19.ca.gov/pdf/guidance-outdoor-museums.pdf>). Outdoor Museums do not include zoos or amusement parks. Associated indoor areas such as cafes, restaurants and convention spaces must remain closed until full operations are authorized.

(6) Libraries

- a. Basis for Addition: The State of California has determined that libraries may operate for curbside pickup.
- b. Description and Conditions to Operate: Libraries that have not been determined by a government entity to be providing Essential Government Functions may operate for curbside pickup only, subject to applicable industry guidance issued by the State of California (<https://covid19.ca.gov/pdf/guidance-retail.pdf>).

(7) Drive-in Theaters

- a. Basis for Addition: The State of California has determined that drive-in theaters may operate.
- b. Description and Conditions to Operate: Drive-in theaters may operate subject to applicable industry guidance issued by the State of California (<https://covid19.ca.gov/pdf/guidance-retail.pdf>).



Appendix C-1

(8) Employers of Essential Critical Infrastructure Workers

- a. Basis for Addition: The State of California has identified a list of “Essential Critical Infrastructure Workers” in 13 sectors that perform functions critical to public health and safety, as well as economic and national security. Because these workers have been determined to be essential, it is necessary to categorize their employers as Additional Businesses, to the extent they are not Essential Businesses as defined by the Order, for the purposes of authorizing these workers to carry out their essential work.
- b. Description and Conditions to Operate: Any business that employs Essential Critical Infrastructure Workers, as defined by the State of California (<https://covid19.ca.gov/essential-workforce/>), may resume operations carried out by its essential workforce, subject to applicable industry guidance issued by the State of California (<https://covid19.ca.gov/industry-guidance/>).

(9) Outdoor Dining

- a. Basis for Addition: Outdoor dining provides access to freshly prepared meals at a relatively low risk of transmission. Because food service will be limited to outdoor areas, the overall volume of increased activity will be modest. In addition, interactions and activities that occur outdoors carry a lower risk of transmission than most indoor interactions and activities. Risks associated with these operations can be substantially mitigated through measures that provide for adequate social distancing.
- b. Description and Conditions to Operate: Restaurants and other food facilities that provide sit-down food service may provide outdoor, sit-down meals, subject to the following limitations:
 1. Alcohol may be sold to patrons in conjunction with a meal, but it may not be sold separately.
 2. Bar areas must remain closed to customers.
 3. All food facilities authorized to open under this provision must comply with applicable industry guidance issued by the State of California (<https://covid19.ca.gov/pdf/guidance-dine-in-restaurants.pdf>). The State requires the following:
 - Brewpubs, breweries, bars, pubs, craft distilleries, and wineries should remain closed until those establishments are allowed to resume modified or full operation **unless they are offering sit-down, dine-in meals. Alcohol can only be sold in the same transaction as a meal.**
 - Dine-in restaurants, brewpubs, breweries, bars, pubs, craft distilleries, and wineries that provide sit-down meals should follow the restaurant guidance below and should continue to **encourage takeout and delivery service whenever possible.**



Appendix C-1

- Brewpubs, breweries, bars, pubs, craft distilleries, and wineries that do not provide sit-down meals themselves, but can contract with another vendor to do so, can serve dine-in meals provided both businesses follow the guidance below and alcohol is only sold in the same transaction as a meal.

(10) **Campgrounds, Recreational Vehicle Parks and Outdoor Recreation Facilities**

- a. **Basis for Addition:** Current conditions in the County allow for the opening of sectors of the economy considered to present a moderate risk of transmission with the mitigation steps set forth in State guidance documents. Activities at campgrounds, recreational vehicle parks and outdoor recreation facilities all present a moderate risk of transmission because the activities take place outside.
- b. **Description and Conditions to Operate:** Campgrounds, recreational vehicle parks and outdoor recreation facilities may operate subject to the applicable industry guidance issued by the State of California (<https://covid19.ca.gov/pdf/guidance-campgrounds.pdf>). Outdoor pools are also subject to the following conditions:
 1. The maximum occupancy of the pool must be limited to a number that is less than or equal to the number of square feet of shared pool space divided by 75.
 2. The pool operator must post a sign at or near the entrance to the pool facility that sets forth the maximum allowable occupancy of the pool based on the above limitation.
 3. At least one person, separate from a lifeguard, paid or unpaid, shall be on duty at all times to ensure that the social distancing protocol applicable to the facility and all limitations herein are followed. The person performing this function may not be one of the swimmers in the pool.

(11) **Hair Salons and Barbershops**

- a. **Basis for Addition:** Current conditions in the County allow for the further opening of sectors of the economy considered to present a moderate risk of transmission with the mitigation steps set forth in State guidance documents. These sectors include hair salons and barbershops.
- b. **Description and Conditions to Operate:** Hair salons and barbershops may operate subject to applicable industry guidance issued by the State of California (<https://covid19.ca.gov/pdf/guidance-hair-salons.pdf>).





HOME • NEWSROOM • PRESS RELEASES • CONTRA COSTA RECEIVES STATE VARIANCE TO CONTINUE REOPENING PLAN

Press Release

Contra Costa Receives State Variance to Continue Reopening Plan

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 Tweet

Thursday, June 11, 2020

The State of California this week granted Contra Costa County a variance that allows more local control over when some activities restricted by the COVID-19 pandemic may resume.

The variance allows Contra Costa to move ahead with its roadmap for reopening at a pace that is appropriate for local conditions, which includes hair salons, indoor dining, gyms and schools in coming weeks.

"We are able to reopen more businesses and activities because the people of Contra Costa have diligently followed the health orders restricting our activities for many months," said Candace Andersen, chair of the Contra Costa County Board of Supervisors. "We remain committed to a safe and careful reopening for our county."

In an attestation filed to the state this week, Contra Costa Health Services (CCHS) outlined the progress at managing the spread of COVID-19 locally and how the local healthcare system is preparing in the event of a new surge in cases.

If safe to do so, hair salons and barber shops can reopen for business on June 17, according to a [timeline](#)

CONTACT

Joint Information Center,
925-608-5463

RELATED

- [Novel Coronavirus \(COVID-19\) Latest Local Information](#)

(https://813dcad3-2b07-4f3f-a25e-23c48c566922.filesusr.com/ugd/84606e_330f28e606b34924ad6f1a0405cd4e93.pdf)

released by CCHS. Indoor dining, bars, gyms and fitness centers, hotels and some indoor entertainment venues may follow July 1.

The county's timeline could change if [community health indicators](https://www.coronavirus.cchealth.org/indicators-dashboard) (<https://www.coronavirus.cchealth.org/indicators-dashboard>) worsen, such as an increase in the number of new cases or patients hospitalized with COVID-19.

Contra Costa is the first of six counties in the lower Bay Area to seek or receive a variance from the state COVID-19 health order, joining the North Bay counties of Napa, Solano and Sonoma.

Visit cchealth.org/coronavirus ([/coronavirus/](https://cchealth.org/coronavirus/)) for more information about Contra Costa's response to the COVID-19 pandemic.

###



SONIA Y. ANGELL, MD, MPH
State Public Health Officer & Director

State of California—Health and Human Services Agency
California Department of Public Health



GAVIN NEWSOM
Governor

June 18, 2020

GUIDANCE FOR THE USE OF FACE COVERINGS

Because of our collective actions, California has limited the spread of COVID-19 and associated hospitalizations and deaths in our state. Still, the risk for COVID-19 remains and the increasing number of Californians who are leaving their homes for work and other needs, increases the risk for COVID-19 exposure and infection.

Over the last four months, we have learned a lot about COVID-19 transmission, most notably that people who are infected but are asymptomatic or pre-symptomatic play an important part in community spread. The use of face coverings by everyone can limit the release of infected droplets when talking, coughing, and/or sneezing, as well as reinforce physical distancing.

This document updates existing [CDPH guidance](#) for the use of cloth face coverings by the general public when outside the home. It mandates that face coverings be worn state-wide in the circumstances and with the exceptions outlined below. It does not substitute for existing guidance about social distancing and handwashing.

Guidance

People in California must wear face coverings when they are in the high-risk situations listed below:

- Inside of, or in line to enter, any indoor public space;¹
- Obtaining services from the healthcare sector in settings including, but not limited to, a hospital, pharmacy, medical clinic, laboratory, physician or dental office, veterinary clinic, or blood bank;²
- Waiting for or riding on public transportation or paratransit or while in a taxi, private car service, or ride-sharing vehicle;
- Engaged in work, whether at the workplace or performing work off-site, when:
 - Interacting in-person with any member of the public;
 - Working in any space visited by members of the public, regardless of whether anyone from the public is present at the time;

¹ Unless exempted by state guidelines for specific public settings (e.g., school or childcare center)

² Unless directed otherwise by an employee or healthcare provider



- Working in any space where food is prepared or packaged for sale or distribution to others;
- Working in or walking through common areas, such as hallways, stairways, elevators, and parking facilities;
- In any room or enclosed area where other people (except for members of the person's own household or residence) are present when unable to physically distance.
- Driving or operating any public transportation or paratransit vehicle, taxi, or private car service or ride-sharing vehicle when passengers are present. When no passengers are present, face coverings are strongly recommended.
- While outdoors in public spaces when maintaining a physical distance of 6 feet from persons who are not members of the same household or residence is not feasible.

The following individuals are exempt from wearing a face covering:

- Persons age two years or under. These very young children must not wear a face covering because of the risk of suffocation.
- Persons with a medical condition, mental health condition, or disability that prevents wearing a face covering. This includes persons with a medical condition for whom wearing a face covering could obstruct breathing or who are unconscious, incapacitated, or otherwise unable to remove a face covering without assistance.
- Persons who are hearing impaired, or communicating with a person who is hearing impaired, where the ability to see the mouth is essential for communication.
- Persons for whom wearing a face covering would create a risk to the person related to their work, as determined by local, state, or federal regulators or workplace safety guidelines.
- Persons who are obtaining a service involving the nose or face for which temporary removal of the face covering is necessary to perform the service.
- Persons who are seated at a restaurant or other establishment that offers food or beverage service, while they are eating or drinking, provided that they are able to maintain a distance of at least six feet away from persons who are not members of the same household or residence.
- Persons who are engaged in outdoor work or recreation such as swimming, walking, hiking, bicycling, or running, when alone or with household members, and when they are able to maintain a distance of at least six feet from others.

- Persons who are incarcerated. Prisons and jails, as part of their mitigation plans, will have specific guidance on the wearing of face coverings or masks for both inmates and staff.

Note: Persons exempted from wearing a face covering due to a medical condition who are employed in a job involving regular contact with others should wear a non-restrictive alternative, such as a face shield with a drape on the bottom edge, as long as their condition permits it.

Background

What is a cloth face covering?

A cloth face covering is a material that covers the nose and mouth. It can be secured to the head with ties or straps or simply wrapped around the lower face. It can be made of a variety of materials, such as cotton, silk, or linen. A cloth face covering may be factory-made or sewn by hand or can be improvised from household items such as scarfs, T-shirts, sweatshirts, or towels.

How well do cloth face coverings work to prevent spread of COVID-19?

There is scientific evidence to suggest that use of cloth face coverings by the public during a pandemic could help reduce disease transmission. Their primary role is to reduce the release of infectious particles into the air when someone speaks, coughs, or sneezes, including someone who has COVID-19 but feels well. Cloth face coverings are not a substitute for physical distancing, washing hands, and staying home when ill, but they may be helpful when combined with these primary interventions.

When should I wear a cloth face covering?

You should wear face coverings when in public places, particularly when those locations are indoors or in other areas where physical distancing is not possible

How should I care for a cloth face covering?

It's a good idea to wash your cloth face covering frequently, ideally after each use, or at least daily. Have a bag or bin to keep cloth face coverings in until they can be laundered with detergent and hot water and dried on a hot cycle. If you must re-wear your cloth face covering before washing, wash your hands immediately after putting it back on and avoid touching your face. Discard cloth face coverings that:

- No longer cover the nose and mouth
- Have stretched out or damaged ties or straps
- Cannot stay on the face
- Have holes or tears in the fabric

Julie Enea

From: Bob Welsh
Sent: Thursday, July 2, 2020 7:00 PM
To: Julie Enea
Subject: Re: Question for Health Officer - Thursday 7/2/20

Follow Up Flag: Follow up
Flag Status: Flagged

Hello Julie. Please know, I appreciate your responding to me earlier.

However, It's extremely unfortunate the Health Officer decided to completely mislead and ignore important context when speaking today. Obviously answering my questions didn't happen, and claiming privacy is an issue for this is an unfounded excuse. Counties all over the US are sharing exactly the type of specifics we deserve to hear, but apparently this does not apply to Contra Costa. It's obvious the detail would severely undercut the Health Officer's agenda and more importantly quicken the end of his 15 minutes.

I could pick apart all his comments with the how's and whats that should be mentioned regarding cases, hospitalizations and deaths to provide context as to why the data being shown is skewed toward the negative, but I'm pretty certain he knows what these are already. What he also probably knows is that many people in the County also know the data is skewed, as well as many Physicians and other hospital employees. The truth will come out.

Bob Welsh

> On Jun 30, 2020, at 8:49 AM, Bob Welsh <mbwelsh@comcast.net> wrote:

>

> Thank you Julie.

>

>> On Jun 30, 2020, at 8:40 AM, Julie Enea <Julie.Enea@cao.cccounty.us> wrote:

>>

>> Thank you, Bob. I'll share your questions with Dr. Farnitano and the Committee.

>>

>> Julie

>>

>> -----Original Message-----

>> From: Bob Welsh

>> Sent: Tuesday, June 30, 2020 7:32 AM

>> To: Julie Enea

>> Subject: Question for Health Officer - Thursday 7/2/20

>>

>> Hello Julie,

>>

>> Gayle Israel informed me I could submit a question to you for our Health Officer to respond during Thursday's meeting. Hoping he can provide information as necessary?

>>

>> I've been fortunate enough, through some personal contacts, to speak with physicians working in some of the Contra Costa hospitals regarding the current Covid situation and their perspective and feedback. I'm hoping to get an

understanding from the County Health department to understand what is being tracked in the data, and more importantly used to determine policy.

>>

>> Hospitalization Data:

>> - For the Covid inpatient daily number and 7 day average, what number/percentage of these patients are in the hospital primarily "due to" Covid Symptoms vs those who are being admitted for elective surgeries and other Health issues yet test positive for Covid after admission but have little/no symptoms?

>> - For the percentage of patients from above question who are in hospital primarily "due to" Covid symptoms, what is average age of these patients?

>> - For the Covid ICU daily number and 7 day average, what number/percentage of these patients are in the ICU primarily "due to" Covid Symptoms vs those who are being admitted for elective surgeries and other Health issues yet test positive for Covid after admission but have little/no symptoms?

>> - For the percentage of ICU patients from above question who are in ICU primarily "due to" Covid symptoms, what is average age of these patients?

>>

>> Thank you.

>>

>> Bob Welsh

>> Danville, CA

Julie Enea

From: Warren Lautz <warren@vdqstudio.com>
Sent: Wednesday, July 8, 2020 10:37 AM
To: Julie Enea
Subject: Domestic Violence Lethality Assessment Tool

VDQ.studio LLC

*Paper to Pocket: Law Enforcement, Public
Safety & Victim Advocacy Solutions*

Ms. Enea,

Like many others, I and my company have been tracking the recent news stories about the correlation of the shelter-in-place orders, the sharp rise in domestic violence incidents, the reduced or lost tax revenue for cities and counties and the call for reduced funding to agencies.

I am reaching out to you as my company is the producer of several fast-start application templates that include a domestic violence lethality assessment tool, Field Arrest and Alerting designed to connect policing and non-policing city and county agencies together. Our Honest Assessment Response Tool (H.A.R.T.) allows officers responding to Domestic Violence events to collect data from the respondent in a standardized way to ascertain if they are in direct need of services or in a high-risk category for domestic violence lethality. Our solution is currently deployed in San Francisco county and designed in partnership with the CCSF Department on the Status of Women in collaboration with SFPD and District Attorney.

We would very much like to open a dialogue with you related to how we may partner together, review your current processes related to dv lethality assessments and/or field arrest record collection. In 30 minutes, we can give a high-level overview of our tools, deployment outline and discuss next steps for any customization necessary for your agency.

Please feel free to contact me at the number below for any additional information or to schedule a brief call.

Best Regards,

Warren Lautz
(480) 490-4215
<http://VDQstudio.com>



[DV – Lethality Assessment Tool](#)
[VDQ.studio Product Introduction](#)

Julie Enea

Subject: FW: Brentwood resident comment for Ad Hoc

From: Mark Goodwin

Sent: Thursday, July 9, 2020 1:12 PM

To: Julie Enea [.us](#)>; Alicia Nuchols

Cc: Chris Farnitano

Subject: Brentwood resident comment for Ad Hoc

Hi everyone,

Sorry this is coming in late. Brentwood resident who is not able to attend. Comment on item D4.

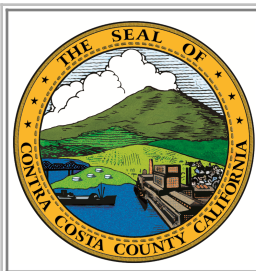
I am concerned about the decisions being made by the Liberty Union School District with regards to reopening schools.

Contra Costa County has done an excellent job during this pandemic. With restrictions put in place early, and continuing when other counties have opened various venues, our case levels have been very low compared to many other parts of the country. Reopening schools can undo all of the sacrifices made to this point.

In talking with the school board, I have concerns that risk will not be properly managed. They reference county and state guidelines, and seem to take the minimum standard approach. For example, there is mandatory walkthroughs required for all students. All students must come in person to school to pick up schedules, books and take a picture. When they take a picture, they will be required to enter an enclosed space and remove their mask. This seems irresponsible as there are thousands of students that will be involved, all of them entering the same photo room, and all of them removing their masks in public to take pictures. That is on top of scheduling an event where thousands of people will be congregating over a period of four days.

With decisions like this being made, rules need to be set by the adults in the room at the county or state level. We have seen across the country what happens when we allow local, unqualified officials to make health decisions. With the first school event set up to mitigate risk as described above, my confidence level is quite low that our local school board can be counted on to effectively manage risk when schools reopen August 10. My hope is that the county can step in and set the bar high enough for minimum safety standards that school **reopening** will not cause a surge in local cases. Or, even better, make a decision that local schools cannot reopen in person as our local case surge continues to increase.

Chris Goulart



AD HOC COMMITTEE ON COVID-19 ECONOMIC IMPACTS AND RECOVERY

THE RECORD OF ACTION FOR
JULY 2, 2020

Supervisor Candace Andersen, Chair
Supervisor Karen Mitchoff, Vice Chair

Present: Chair Candace Andersen
Vice Chair Karen Mitchoff

Staff Present: Chris Farnitano, M.D., County Health Officer
Julie DiMaggio Enea, Senior Deputy County Administrator

1. Introductions

Chair Andersen called the meeting to order at 1:30 p.m. and introduced the Committee and Dr. Farnitano.

2. Public comment on any item under the jurisdiction of the Committee and not on this agenda (speakers may be limited to two minutes).

All public comment was taken under Agenda Item 4.

3. RECEIVE update on most recent COVID-19 developments and on questions recently received from community members.

Chair Andersen introduced the meeting agenda and summarized the most recent COVID 19 developments. The County had anticipated opening more activities but saw our numbers change dramatically. The State issued new and different requirements due the change in our numbers, so we will have to take a three-week pause in the recovery. She then deferred to Dr. Farnitano to answer questions that had been received during the week prior to the meeting, and to provide any additional updates.

Dr Farnitano marveled at the difference a couple of weeks had made across the State and the nation, and in our county. We've had 3,326 cases since the initial outbreak; 1,015 are active and we had 80 new cases today. The case-per-day average has increased from 39 to 105 in just the last two weeks, almost a tripling of the daily case rate. Testing has increased only slightly during that same period, but the number of positive tests increased from 3.1% to 6.8%.

More people have required hospitalization: 41 compared to 24 two weeks ago. We do have non-County admissions in our hospital system but, on net, the County has more

people hospitalized out of County than it has non-county people hospitalized within our county. Of those 41 currently hospitalized, half are in ICU and half of those in ICU are on ventilators fighting for survival. The odds of survival if on a ventilator are about 50%.

Our hospital capacity is currently adequate but Dr. Farnitano is concerned about overwhelming that capacity if this surge continues. We have 160 ICU beds across the county system. 50% of ICU beds are currently filled, so about 80 beds are open, but only about 17 of the open beds are currently staffed.

More people are dying. Half of the County's COVID-related deaths have occurred since June 7. The surge is statewide. LA County is severely impacted. We have paused our reopening plan. The State has required certain counties that had already opened certain sectors to close them again. For our county, we were not scheduled to open those sectors until July 1, so we will delay opening them for at least three weeks as required by the State.

The most significant change in the State order was to prohibit singing and chanting at religious gatherings. The County continues to strongly recommend that these gatherings be done virtually rather than in person, and minimally outdoors rather than indoors.

The Bay Area Health Officers are still waiting for clarification from the State on outdoor breweries.

Dr. Farnitano is very concerned about July 4 weekend. He will soon issue a statement encouraging people to stay home and not gather with friends and family. Social gatherings are leading to spread of the virus. He said we are clearly in our second surge.

He detailed that we are seeing the highest case rates so far in younger people aged 20-30, for Latinos, and African Americans. Richmond, San Pablo, Pacheco, and Bay Point are the cities most impacted in this surge; however, the South County has seen 100 cases over past 14 days, so the impact is countywide. He acknowledged the many questions and requests for more discrete data but must respect patient confidentiality.

He explained that the data is teaching us how the virus spreads. Nationwide, the death rate is 5%; in Contra Costa, it is 2.5% but that is still 10-20% higher than influenza. Most of our deaths occurred more recently, which has given us some time to learn how to help people survive the virus. Also, we can treat people in hospitals that are not overwhelmed, which has helped survival rates in our county. 20 year olds, for example, have about a 1% risk of being hospitalized if they contract COVID, children even less risk. Older people have an incrementally higher risk of being hospitalized. Thus, It is of great concern that more young people are being hospitalized.

He discussed pre-existing conditions such as obesity, asthma, and high blood pressure. Most of the co-morbid conditions are common conditions found throughout the population. About half the people who get COVID are symptomatic,

and about half of those who are symptomatic end up in the hospital.

Latinos have experienced a higher rate of hospitalization and death. African Americans also have a higher death rate but not a higher hospitalization rate, which may indicate that they are not seeking medical help soon enough or that other medical factors are impacting survival.

He said the County's testing infrastructure is being stressed. The County's Public Health Lab is being expanded and giving priority to high-risk occupations and living environments. Rapid tests have been found unreliable. Regarding test statistics, he clarified that if a person took three repeated tests that were positive, it would be counted as three positives. However, he further said that they generally do not retest people who have already tested positive, so he does not believe that the data is skewed in this regard. He does encourage people in high-risk professions to get tested at least monthly. He encouraged coaches of kids' sports programs be part of a regular testing program. More testing sites are being added. Testing is free of charges regarding of symptoms.

He called on the public to use extreme caution during this second surge. Violators should be reported at 925-957-8608 or to local law enforcement. He said that contact tracing is becoming more of a challenge with the recent surge but, clearly, the increase in social mobility and interaction is increasing the spread.

He advised that the County offers hotel rooms to people who test positive and have no other means to isolate. He also advised that the City by City dashboard is on the website, which will be updated soon with the most recent cases.

He clarified that reusable shopping bags and beverage mugs can be brought into stores if employees do not have to touch them.

Dr. Farnitano said he believed that hospitals receive no additional compensation for accepting COVID patients, but nursing homes do in recognition of the extra staffing and PPE (personal protective equipment) required.

He explained that the goal of the Shelter in Place and other social restrictions is to keep the numbers of people infected down to a manageable level so that our hospitals do not become overwhelmed. He acknowledged the tradeoff between social freedoms and keeping the virus in check but emphasized that situation can morph quickly from manageable to out of control.

He wished that people could spend a day with an ICU nurse to better understand what heroes they are. He described how the nurses are dealing with heartsick families who cannot see their loved ones in ICU, how the nurses are daily witnessing great suffering and death, and how many cannot go home to their own families for fear of bringing the virus into their own households and infecting their family members, so they are staying alone in hotels. The nurses are putting themselves at risk every day and are very worried about the rising numbers.

Regarding the rate of drug overdoses, he said our County has been on an increasing trend even before COVID, due partly to a higher prevalence of Fentanyl, but has not

seen a significant increase since the outbreak of the virus. Neither has the County seen a jump in suicides.

4. DISCUSS the June 16 Health Order and any subsequent updates to the timeline for future resumption of business and community activities.

Chair Andersen opened the public comment period. The following individuals commented:

- Nancy, a cranio-massage therapist, acknowledged Dr. Farnitano and the ICU nurses. She expressed concerned about returning work, since it is very risky and asked the County to continue postponing resumption of her business sector.*
- ToniR asked if the Board paid \$10,000 for a sales tax poll, which Vice Chair Mitchoff confirmed but also said she hoped a sales tax measure would not be placed on the ballot. Toni commented that the lack of social interaction is taking a negative toll on people and she doesn't understand why healthy people are being quarantined. She commented on how the testing statistic were being counted. She asked what the County's "end game" is. She said she was uncomfortable being asked to "snitch" on violators of the health order. She contrasted the prohibition of singing/chanting in church with singing and shouting during protests, a permitted activity.*
- Barbara Csider spoke about the demoralization of the community due to the COVID restrictions and asked about nursing home outbreaks.*
- Jared Thomsen commented about how religious gatherings are being singled out as opposed to public protests. He asked the County to push back on what he views as State contradictions in rules.*
- Thomas Braum, a spa owner that employees massage therapists and aestheticians, commented that his back rent and expenses are piling up. He understands the delays but needs policies for financial assistance and relief. He described pressure from landlords, who are not negotiating and want to be paid.*
- Doug Smith said the data he can access conflicts with County data and requested more clarification on how County data is stratified.*
- Allision Snow, a hospital healthcare consultant, said there was a cognitive disconnect, citing the County's conservative approach to a modest virus. She requested deidentified patient data to better inform what is going on in our county. She cited 77 COVID deaths, most of whom are elderly. Why didn't we quarantine only the high-risk groups? She asked for a more holistic view of the County, taking into consideration mental health. She said there is distrust among people, who are free under the Constitution, and then under God.*
- Cheryl Iacone, a hospice worker, requested more transparency about COVID commitments to nursing homes which she described as lighting a match to a tinderbox. She asked if those nursing homes accepting COVID payments are doing so for the reimbursement and how many were out of county patients? She said that this data should be made publicly accessible.*
- Dave Bowers opined that church restrictions are arbitrary and wanted to know why the size of church facilities are not factored into the maximum number that may be gathered for an indoor service.*

- *Beth Baron, a massage therapist, expressed her appreciation for Dr. Farnitano and this committee forum. She said that the scheduled reopening of her business sector should be commensurate with the risk. She said that her business sector is categorized with less risky services and she believes there is not enough research to support opening her service sector.*
- *Lydia questioned the wisdom of accepting out of county patients if capacity is a concern. She asked if the Health Officer denounces the policy of payment to nursing homes who take in COVID-positive patients and if there is any effort to curtail this policy.*
- *Elias Mandilaras said he understood the need to adjust the reopening plan but wanted more information about the path forward. He asked when the County will reassess the sectors that were scheduled to open here on July 1.*
- *Robert Garvin asked if there were any changes to what is in Appendix C-2 regarding children camps. Soccer appears to have been singled out as not approved, which has led to confusion. He asked if the infographic could be changed to not single out soccer.*
- *Mike McDermott appreciated the age breakdown for the virus risk but doesn't understand why then kids are so locked down since their risk is so low. He likewise doesn't understand singing is prohibited in religious services if the singers are wearing masks. He also suggested that at each committee meeting, we have a briefing on how our County compares to other counties and the State in terms on hospitalization rates and deaths.*
- *Kimba Joy requested data on the numbers of asymptomatic persons who tested positive. She asked if the new, less invasive COVID test is reliable. She expressed gratitude for the stay on reopening massage therapy because of concerns about coagulopathy, which is the #1 contraindication for massage. She doesn't plan to return to work very soon and reported that 75% of her conferees do not plan to return soon.*
- *Ellen Mossman complained that it is difficult for the public to obtain information about the importance and need for more testing. She suggested a public information campaign specific to testing.*
- *An unidentified caller complained that some people have gotten bills for COVID testing because their insurance is denying payment. He also thought the data reporting is biased, noting that 3,000 COVID cases are being reported, but only 1,015 of those cases are currently active.*

Chair Andersen closed the public comment period and deferred again to Dr. Farnitano for response to comments/questions.

Dr. Farnitano explained that singing spreads the virus particles more than ten feet and that even masks don't fully protect. He said the limit for indoor church gatherings is set by the State, not the County, in reference to the extra danger associated with large gatherings being indoors: the larger the group, the more difficult to monitor for social distancing and the greater potential for higher exposure and infection rate.

Regarding our hospital capacity, he explained that counties participate in a mutual aid system to optimally utilize capacity across the hospital network statewide but that, on net, we are sending more County residents out than we are taking in non-county

residents. This is mostly due to Kaiser in Alameda County taking in Richmond patients. The mutual aid agreements have been in place for many years and there may come a time when our County needs such aid. None of the counties are islands and we must support each other. He then repeated the current County ICU statistics.

He reiterated that outdoor gatherings are safer than indoor gatherings, which is why outdoor dining is allowed but indoor is not, for example.

He reported that bars will be moved to later in the timeline because there is more and more evidence of the higher risk, i.e., lots of people in close proximity; loud music requiring people to talk loudly; people not wearing masks because they are drinking; and consumption of alcohol, which may interfere with peoples' judgment (they may become more careless about social distancing). We are continuing to study how the virus is transmitted and adjusting the timelines and sectors accordingly.

He clarified that there were no real changes to the stable groups/social bubbles. The concern is that people are stretching the rules. He said he would review the infographic regarding soccer. He acknowledged that children are at less risk of contracting and transmitting the virus than originally thought but the playground restrictions come from the State, and the County cannot be less restrictive.

He recommended not to pay insurance bills for COVID testing. The State made free testing very clear. If it is a bill from the County health system, those bills would be waived.

Vice Chair Mitchoff directed listeners to the Long-term Care Dashboard on the County website. She explained that the County is using every method possible to get information disseminated. She recommended checking the County's website regularly, conducting Google/web searches, calling their County Supervisor, and helping to spread information by word of mouth. She discussed how the length of time to obtain death certificates contributes to a delay in reporting current data on cause of death. She also emphasized that due to HIPAA rules, the County cannot disclose patient information except in an aggregated format.

- ToniR again asked that the "end game" is in terms of data. She also complained that fireworks contribute to sleeplessness, which reduces immunity to the virus. She asked why three-year-olds must be masked.*

Vice Chair Mitchoff commented that the 4th of July is the worst holiday for law enforcement and that law enforcement is working diligently to curtail illegal fireworks demonstrations.

Chair Andersen commented that we all wish we knew how this would all play out but all we can do is monitor and make informed adjustments and decisions.

Dr. Farnitano said that the goal (end game) is a vaccine, but we don't know how soon that will come. Therefore, some of those high-risk activities may not be able to be resumed until we have a vaccine.

The Committee approved the Record of Action for the June 25th meeting as presented.

AYE: Chair Candace Andersen, Vice Chair Karen Mitchoff
Passed

6. The next meeting is currently scheduled for July 9, 2020.

The Committee confirmed the July 9 meeting date.

7. Adjourn

*Chair Andersen invited people to submit questions to the Supervisors' offices and track the County's website, which is continually updated.
She adjourned the meeting at 3:15 p.m.*

For Additional Information Contact:

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