

AD HOC COMMITTEE ON COVID-19 ECONOMIC IMPACT AND RECOVERY

THE RECORD OF ACTION FOR
MARCH 18, 2021

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

Attendees: See Attendance Record, attached.

1. Introductions

Chair Andersen called the meeting to order at 1:35 p.m., introduced the Deputy County Health Officer, and explained the format of the meeting.

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 #3.

3. RECEIVE status report on the County's COVID-19 status, the County's vaccination allocation framework, and school re-openings.

Dr. Warne introduced himself and described his roles as a Deputy Health Officer serving in Contra Costa County's Health Services and as a primary care doctor working in the West County Health Center.

According to the data dashboard (www.cchealth.org/coronavirus), COVID case rates are declining from the peak in January. On March 14 Contra Costa County moved from the purple tier to the red tier in the State's restriction framework. Also, the State relaxed some requirements to move into less restrictive tiers after reaching a milestone in vaccinations administered. Red tier status allows:

- indoor restaurant service (25% capacity);*
- fitness centers and gym re-opening (10% capacity); and*
- retail store capacity expansion to 50%.*

The County must wait at least 3 weeks before moving into the orange tier and must meet orange tier criteria for two weeks (adjusted daily case rate <4, test positivity rate <5%, equity metric rate <5.2%). Early April is the earliest the County could move into the orange tier.

County case rate is 7, adjusted by the State to 5.9, substantially lower than the peak rate of 62 in

January. Test positivity rate is 2.2%, much better than the peak positivity rate of 11.1% at the end of December. The equity metric is 4.0%, measuring the test positivity rate in the lowest 25% of Census tracts in the Healthy Places Index and correlating to those areas with the highest rates of COVID. Total cases in the County are 64,358, rate is flattening. The county is diagnosing 80-120 new cases per day, significantly lower than 1,000 per day in early January.

Though there continues to be disparity in case rates by location throughout the county, the rate is going down across all communities. Most impacted communities are San Pablo, Pacheco and Bay Point (>200 cases per 100,000), followed by Oakley, Pittsburg, Richmond, Antioch and Discovery Bay (>150 cases per 100,000), then Concord, El Sobrante, Pinole, Martinez and Bethel Island (>100 cases per 100,000).

The County performs 4,000-8,000 tests daily, with over 1.2 million tests performed in total. There have been 727 deaths to date, with significantly fewer deaths recorded in February and March. 42 COVID patients currently in Contra Costa hospitals, 7-day average of 46 patients is significantly lower than over 300 in early January. 20% ICU bed availability rate; 10% of ICU patients have COVID. Outbreaks in congregate living facilities decreased dramatically, 13 facilities being monitored for outbreak activity down from 55 facilities in January. Vaccinations have been delivered to all facilities.

Dr. Warne said that although the three available vaccines (Moderna, Pfizer, and Johnson & Johnson) may have different efficacy rates from their research trials, they are all highly effective in the real world. Vaccination adds to existing layers of protection (masking, social distancing, avoiding large gatherings). Approximately 484,000 first doses have been administered to approximately 34% of eligible residents 16 and older (318,000 first doses), and approximately 18% of eligible residents are fully vaccinated (170,000 second doses). 8,000 – 12,000 vaccines are administered per day, 7-day average of 8,800 vaccinations.

The County is focusing on improving vaccination rates for Latino and African American populations. 94% of individuals aged 75 and older and 76% of individuals aged 65-74 have received at least one dose of the vaccine. There is capacity to administer more than 70,000 doses per week, and the amount of doses delivered is increasing - 13,000 additional doses from the Federal government this week. The County has cleared its backlog of eligible vaccine appointment requests.

He reviewed new guidance for fully vaccinated people (which is 2 weeks after receiving the final dose of vaccine), such as gathering in small groups indoors and no quarantine following asymptomatic exposure to COVID. A complete list of guidance for fully vaccinated individuals is on the county COVID webpage.

We are in Phase 1B of vaccination eligibility: individuals age 60 and over or with higher-risk health conditions, in congregate living facilities (group homes, shelters, jails, etc), transportation / logistics workers, education / childcare workers, agriculture / food workers, and emergency services workers. The County COVID webpage outlines how to schedule appointments through health care providers, Contra Costa County, the State (www.myturn.ca.gov) or private sector organizations such as CVS.

Three main variant mutation strains of COVID are being followed. UK variant is more transmissible and results in a more severe illness but is susceptible to the vaccine. 4700 cases of UK variant in the United States, 343 cases in California and 2 cases in the County last week. South Africa/ Brazil variant is not more transmissible, but it is not yet known if the vaccine is as effective on this variant. B-427/B-429 variant, or California/West Coast variant, has recently been classified as a variant of concern by CDC and is considered more transmissible. 169 cases of West Coast variant have been identified in the County. The County is participating in full-genome sequencing to track variants.

Dr. Warne responded to questions that were received in advance of the meeting:

- *Why is Type 1 Diabetes not a condition for possible eligibility to receive a*

vaccine? Dr. Warne explained that the State determines conditions covered. Individuals should contact their healthcare provider, because vaccine providers with access to health records have discretion to vaccinate individuals with comparable health conditions.

- What is the status on getting homebound seniors and their caregivers vaccinated? Dr. Warne responded that as healthcare workers, caregivers could be vaccinated starting in Phase 1A. More than 36,000 vaccine doses were administered to Contra Costa residents and staff working in skilled nursing facilities. Mobile teams reached out to over 70 senior housing complexes, where 97% of residents have first dose, and 47% are fully vaccinated. Planning is underway to reach out to homebound seniors.*
- Why is 3 feet distance not allowed for student spacing when the CDC has recommended that 3 feet is sufficient? Dr. Warne stated that CDC has not yet recommended 3 feet as sufficient, although CDC representatives are considering it. State rules are 6 feet spacing between students but allows 4-6 feet spacing when 6 feet spacing is attempted but not possible.*
- Under red tier guidelines, are rotary or other service clubs able to resume meeting indoors? Not at the present time. Such meetings continue to take place remotely although new guidance on outdoor events and meetings is expected from the State on April 1.*
- What are the rules for garage sales? Follow the same guidance as retail stores.*
- Will the County continue to manage vaccination appointments after www.myturn.ca.gov takes over? The State is planning to transition vaccine allocation management and appointment management to a third-party administrator, Blue Shield, which has been delayed. The County does not yet know if it will continue to manage appointments independently or fully transition to the State-run system. Individuals should sign up with both systems.*

Lynn Mackey provided an update on school re-openings with the County's red tier status, noting that the decision to re-open is determined by individual school boards. All County school districts reported that that every educator was offered a vaccine and was able to make initial appointments. 3-foot spacing model would allow schools to fully re-open. She also noted that County schools report every COVID case to the County and follow OSHA reporting regulations.

The following individuals spoke during the Public Comment period:

- Mike McDermott asked if Contra Costa County will expand vaccine availability to age 50 and over, expressed appreciation for his recent positive vaccination experience at the Miller Wellness Center, and noted that the median age of residents correlates with higher vaccination rates in cities. Dr. Warne said the County is considering expanding eligibility to 50 and over. Chair Andersen stated that she has been told this expansion will happen very soon, possibly in next week.*
- (415) 640-3569 from Richmond asked several questions: 1. Which [special] districts are currently being tested for COVID? The County is not publishing tests results. Could the new testing instrument for water/sewage be used in Contra Costa County? Dr. Warne responded that testing through water/sewer districts is conducted via independent research projects and although it is a useful measuring tool, the County has no authority over the data collected. 2. How is the \$40 million mentioned in the February meeting being applied? 3.*

CO2 levels are a good indication of overall air quality. Is the County providing assistance to schools or other locations to purchase air filter machines? Dr. Warne noted there are many methods to reduce spread in schools, including ventilation and air filter machines, and believes ventilation will factor into schools' mitigation plans. Superintendent Mackey noted that the county has been helping County schools navigate Cal-OSHA and the State Health Department ventilation guidance. 4. Is the County participating in the National Association of County and City Health Officials (NACCHO) Preparedness Summit? Dr. Warne is not familiar with this summit, but the County works closely with NACCHO, the California Conference of Local Health Officers, and the Association of Bay Area Health Officers. The caller also stated that the listed CVS locations are all in East County. Dr. Warne responded that there are not many CVS stores located in West County. Chair Andersen stated that the Board and the Health Department have rioritized placing vaccination sites in disadvantaged communities to help address vaccine equity.

- Dan Sharoni asked to speak with Lynn Mackey about the continued importance of testing and how he can help keep schools open. Superintendent Mackey provided her contact information via the moderator.*

4. RECEIVE and APPROVE the Record of Action for the February 18, 2021 meeting.

The Committee approved the Record of Action for the February 18, 2021 meeting as presented.

AYE: Chair Candace Andersen, Vice Chair Karen Mitchoff
Passed

5. The next meeting is currently scheduled for April 15, 2021.

Chair Andersen confirmed the next meeting date as noticed.

6. Adjourn

Chair Andersen adjourned the meeting at 2:50 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

3.

Meeting Date: 03/18/2021
Subject: COVID 19 UPDATES
Submitted For: Candace Andersen, District II Supervisor
Department: Board of Supervisors District II
Referral No.:
Referral Name:
Presenter: Dr. Thomas Warne, Deputy County Health Officer **Contact:** Julie DiMaggio Enea (925) 655-2056

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 21 public meetings on May 7, 14, 21 and 28; June 4, 11, 18, and 25; July 2, 9, 16, 23 and 30; August 13; September 3 and 17; October 15; November 19; December 17, 2020; January 21, and February 18, 2021, covering recreation and lifestyle services, in-home and other personal services, small businesses, religious gatherings, schools, and dining; a plan to move to fully to Stage 2 and, regrettably, the second surge that required postponement of many planned Phase 2 re-openings. A record of all prior Committee meetings is posted on the County website at this [link](#). The committee has moved to a monthly meeting schedule unless changing circumstances dictate otherwise, taking up new developments in the pandemic and discussing a roadmap to recovery.

The State subsequently moved to a four-tier reopening plan, which has been the Committee's primary reference point since late August. Under the State's new Blueprint for a Safer Economy, every county is assigned to a tier by the State based on its test positivity and adjusted case rate (see Tier chart at the end of this section). The State reviews data weekly and tiers are updated on Tuesdays. To move forward, a county must meet the next tier's criteria for two consecutive weeks. On September 29, Contra Costa County progressed from the Purple (most restrictive) Tier to the Red Tier, and on October 27, progressed again to the Orange Tier. Following a resurgence of new cases and increase in hospitalizations, the County, on November 16, was moved back to the Purple Tier where it has remained until March 14, when the County will again move to the Red Tier. Additionally, Governor Newsom implemented a Regional Stay-at-Home Order between December 3, 2020 and January 25, 2021 in response to concerns about shrinking ICU capacity. [Click to learn more about tier assignments and metric details.](#)

County risk level	New cases	Positive tests
WIDESPREAD Many non-essential indoor business operations are closed	More than 7 daily new cases (per 100k)	More than 8% Positive tests
SUBSTANTIAL Some non-essential indoor business operations are closed	4 - 7 daily new cases (per 100k)	5 - 8% Positive tests
MODERATE Some indoor business operations are open with modifications	1 - 3.9 daily new cases (per 100k)	2 - 4.9% Positive tests
MINIMAL Most indoor business operations are open with modifications	Less than 1 daily new cases (per 100k)	Less than 2% Positive tests

Late December 2020 brought the availability of two vaccines, one from Pfizer and one from Moderna. Both available vaccines require two injections a few weeks apart. The first injection starts building protection. A second injection a few weeks later is needed to get the most protection the vaccine has to offer. In response to guidelines from the State, Contra Costa Health Services (CCHS) and other healthcare providers in the County are now offering the vaccine at no cost to all residents who are 65 or older. [Click here to request an appointment from CCHS](#)

These basic precautions should continue to be taken:

- Stay home from work or school if you feel sick
- Wash your hands often
- Wear face masks whenever you are near someone outside your immediate household
- Observe physical distancing outside the home and do not make unnecessary trips or visits
- Get tested and follow the health instructions if you test positive or were exposed to someone who tested positive

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](#)

Referral Update:

Deputy County Health Officer Dr. Thomas Warne will provide a COVID-19 update at today's meeting. Following Dr. Warne's remarks, the Committee will allow for Public Comment and will address questions specific to Dr. Warne's comments, the current Health Order, the vaccination allocation framework, and other guidance documents, attached. County Superintendent of Schools Lynn Mackey may be available to provide an update on local school openings and respond to questions.

The most significant developments since our last meeting on February 18, 2021 is the announcement that the County will be moved to the Red Tier effective March 14 and the rapid expansion of the County's vaccination program. Contra Costa was poised to enter red tier on Wednesday next week, but will transition a few days earlier after the state met a goal of administering 2 million doses of COVID-19 vaccine in high-risk, economically disadvantaged communities on Friday. That triggered a relaxation of the blueprint's requirements. Contra Costa County kicked off a countywide drive to provide 1 million doses of COVID-19 vaccine by July 4. This ambitious goal has been frustrated by shortages in the vaccine and obstructions to shipping the vaccine to California due to the nation's severe weather storms. Nevertheless, more than 385,000 doses of vaccine have been administered to county residents and the county's COVID metrics continue to improve. Nearly 130,000 County residents have been fully vaccinated. Vaccine eligibility is rapidly expanding in California, and Contra Costa has coordinated with the State to build capacity to fill thousands of new requests.

Vaccine appointments are ***not*** first come, first served. Contra Costa established a [vaccine allocation framework](#) that follows [State and Federal guidelines for prioritizing immunization](#). That means someone in a higher-risk group, especially someone who is 75 or older, might receive an earlier appointment than a younger person, even if they requested their appointment later. See the Distribution Phases illustration below.

It is important to know that even though any County resident who is 65 or older is eligible for vaccine, appointments may be weeks away for some people. CCHS is working hard with many partners, including other health providers in the County, to

increase capacity so everyone can be vaccinated more quickly. Contra Costa Health Services will promptly respond to requests with an email that contains more information.

Contra Costa County has opened 20 vaccination sites and is opening more every day across the county at health centers and other large facilities to vaccinate eligible individuals. CCHS has also begun shifting staffing from COVID testing sites to vaccination efforts to increase capacity. We also have activated our volunteer Medical Reserve Corps to give vaccine, and the health department is working with fire agencies to use paramedics to administer vaccine.

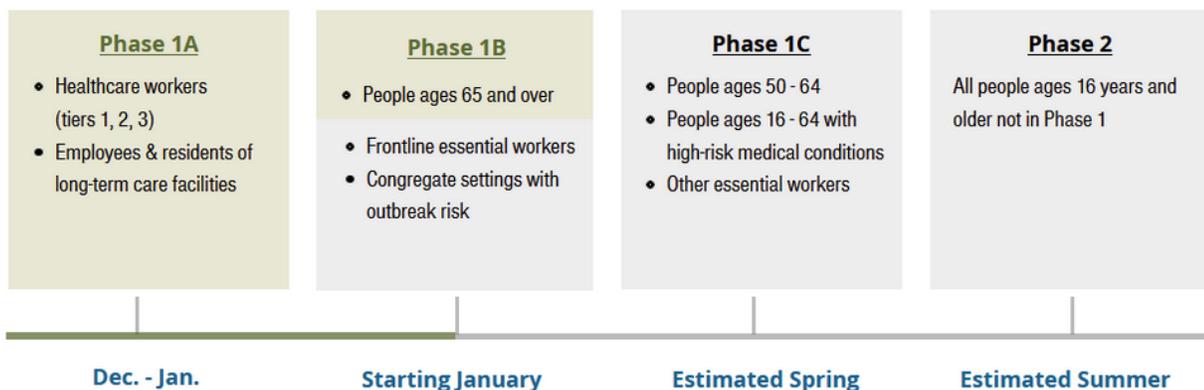
Private health systems such as Kaiser, Sutter and John Muir Health — who are the primary healthcare providers for the vast majority of Contra Costa residents — have scaled up their efforts to vaccinate their own members and let them know when it's their turn. Pharmacies have also come online to provide vaccinations as more people become eligible. CVS and Walgreens are already vaccinating those living in long-term care facilities and their staff.

About 900,000 Contra Costa residents will be eligible for vaccine once the County reaches Phase 2 of the [distribution plan](#). To reach community-immunity levels, 75% of those eligible (725,000 people) would need to be vaccinated in the county. In order to immunize 725,000 people over the next six months (104 business days), roughly 7,000 people will need to be vaccinated every business day on average. The vaccination dashboard for doses administered per day indicates we are substantially meeting that goal.

[Click here for the latest about COVID-19 vaccination in Contra Costa.](#) The chart below outlines the order in which people will become eligible to get vaccinated based on criteria developed by the [Centers for Disease Control & Prevention \(CDC\)](#) and the [California Department of Public Health \(CDPH\)](#).

Vaccine doses purchased with U.S. taxpayer dollars will be given at no cost to individuals. Vaccination providers may charge an administration fee, usually billed to an individual's insurance.

Distribution Phases at a Glance



With the improving metrics, the State will promulgate new health orders any time now to allow more business and community activities. However, vigilance is still recommended because no vaccine is perfect, and there is no guarantee that the highly effective vaccines we now use will work as well against future variants of the COVID-19 virus.

Schools: The state health department has released new school guidance. There is a [state hub](#) of local school information providing more transparency on the status of school re-openings. See [this letter](#) for more information. The State, on January 14, 2021, also updated its [COVID-19 and Reopening In-Person Instruction Framework & Public Health Guidance for K-12 Schools in California, 2020-2021 School Year](#). California has dedicated 10% of the State's vaccine supply to education workers and on February 18, Contra Costa County updated its eligibility policy for COVID-19 vaccine to extend vaccination eligibility to residents who work in the education and childcare sector, food and agriculture workers, and emergency services workers as defined by [Phase 1B of California's vaccination plan](#).

Updated County Health Orders: The County Health Officer issued two new Health Orders, attached, repealing local restrictions on certain high-risk business sectors and congregate living and residential care facilities. Rescission of these orders will align the County with revised State guidelines for these and other sectors.

The Health Officer also updated the Order on Mass Quarantine, attached, to include a new exception from the quarantine requirement for specified persons who have been fully vaccinated with a COVID-19 vaccine.

Recommendation(s)/Next Step(s):

RECEIVE status report on the County's COVID-19 status, the County's vaccination allocation framework, and school re-openings.

Attachments

Health Order Repealing Specified Business Restrictions 3-10-21

Health Order Repealing LTC Facility Restrictions 3-8-21

Health Order Updating Mass Quarantine Requirements 2-25-21

County Vaccination Allocation Framework 1-26-21

Minutes Attachments

No file(s) attached.



**ORDER OF THE HEALTH OFFICER OF THE COUNTY OF CONTRA COSTA
REPEALING PRIOR ORDERS IMPOSING RESTRICTIONS ON SPECIFIED
BUSINESS ACTIVITIES TO PREVENT THE SPREAD OF THE COVID-19 VIRUS**

ORDER NO. HO-COVID19-42

DATE OF ORDER: MARCH 10, 2021

Summary of the Order

This Order of the Health Officer rescinds Health Officer Order No. HO-COVID19-35 and Health Officer Order No. HO-COVID19-36 (collectively the “Prior Orders”), effective immediately. Health Officer Order No. HO-COVID19-28, which aligns Contra Costa County (the “County”) with restrictions on business activities set forth in the State of California’s Blueprint for a Safer Economy (“State Blueprint”), remains in full force and effect. As of the date of issuance of this Order, Contra Costa County is in the widespread (purple) tier of the State Blueprint.

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. Basis of Order.** On November 4, 2020, the County was in the orange (moderate) tier of the State Blueprint. In response to a rise in the daily rate of cases of Coronavirus Disease 2019 (COVID-19) in the County, the Health Officer issued Health Officer Order No. HO-COVID19-35. Health Officer Order No. HO-COVID19-35 imposed restrictions on several business sectors that were consistent with stricter restrictions in the red (substantial) tier of the State Blueprint. Six days later, the County moved into the red tier, and the COVID-19 case rate continued to rise. Again in an effort to get control over the transmission of the virus causing COVID-19, on November 13, 2020, the Health Officer issued Health Officer Order No. HO-COVID19-36, which imposed restrictions on specified business sectors that were consistent with stricter restrictions in the purple (widespread) tier of the State Blueprint. Thereafter, in response to declining availability of adult space in hospital intensive care units, the Acting State Public Health Officer issued a Regional Stay at Home Order, which imposed additional restrictions in the County effective on December 16, 2020.



The Regional State at Home Order was lifted on January 25, 2021, COVID-19 case rates are now falling, and the County is now in the widespread tier. Because the restrictions established by the State in the widespread tier are currently mandated by Health Officer Order No. HO-COVID19-28, there is no need now for the restrictions set forth in the Prior Orders. Rescission of the Prior Orders will also bring the County into conformance with revised State guidelines for operation of places of worship and cultural ceremonies (eliminating a maximum capacity restriction in response to an order issued by the U.S. Supreme Court) and gyms and fitness centers (allowing use of indoor pools for drowning prevention classes).

2. **Rescission of Prior Orders.** Health Officer Order No. HO-COVID19-35 and Health Officer Order No. HO-COVID19-36 are hereby rescinded.
3. **Effective Date and Time.** This Order takes effect immediately upon issuance.
4. **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:



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

March 10, 2020





**ORDER OF THE HEALTH OFFICER OF THE COUNTY OF CONTRA COSTA
REPEALING PRIOR ORDERS THAT IMPOSED RESTRICTIONS ON CONGREGATE
LIVING FACILITIES AND CERTAIN LICENSED HEALTHCARE AND OTHER
RESIDENTIAL CARE FACILITIES TO PREVENT THE SPREAD OF THE COVID-19
VIRUS**

ORDER NO. HO-COVID19-41

DATE OF ORDER: MARCH 8, 2021

Summary of the Order

This Order of the Health Officer rescinds Health Officer Order No. HO-COVID19-15, as amended by Health Officer Order No. HO-COVID19-19, and Health Officer Order No. HO-COVID19-21 (collectively the “Prior Orders”), effective immediately.

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. Basis of Order.** On May 29, 2020, the Health Officer issued Health Officer Order No. COVID19-15, which required congregate living facilities in Contra Costa County, to follow specified testing, collaboration, reporting and guidance requirements of the Contra Costa County Health Department for the purpose of reducing the risk of transmission of the virus that causes Coronavirus Disease 2019 (“COVID-19”). On June 22, 2020, Health Officer Order No. COVID19-19 was issued to amend the above order, requiring additional testing and placement of residents into cohorts based on test results. On June 26, 2020, the Health Officer issued Health Officer Order. No. COVID19-21, which imposed requirements on licensed healthcare facilities and specified communal residential facilities aimed at preventing the spread of COVID-19, including screenings, keeping entry and exit logs, masking and social distancing, and communal dining restrictions.

The above referenced orders were issued because, in the absence of applicable State regulations at the time, local restrictions were necessary to protect persons working and residing in these facilities from the spread of COVID-19. Since then, regulations have been adopted by the California Department of Public Health and the California Department of



Community Care Licensing and the Center for Medicare and Medicaid Services. For this reason, the above referenced orders are no longer necessary.

2. **Rescission of Prior Orders.** HO-COVID19-15, as amended by Health Officer Order No. HO-COVID19-19, and Health Officer Order No. HO-COVID19-21 are hereby rescinded.
3. **Effective Date and Time.** This Order takes effect immediately upon issuance.
4. **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:



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

March 8, 2020





ORDER OF THE HEALTH OFFICER OF THE COUNTY OF CONTRA COSTA

UPDATED MASS QUARANTINE ORDER

NO. HO-COVID19-40

DATE OF ORDER: FEBRUARY 25, 2021

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 standard 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 December 10, 2020, Order of the Health Officer of the County of Contra Costa, No. HO-COVID19-38, directing close contacts of persons diagnosed with COVID-19 to quarantine themselves, with an exception for certain essential workers in critical infrastructure sectors. Based on updated guidance from the Centers for Disease Control and Prevention, this Order includes a new exception from the quarantine requirement for specified persons who have been fully vaccinated with a COVID-19 vaccine.

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. Health Officer Order No. HO-COVID19-38 is hereby superseded.
2. All persons who have had close contact with a person with COVID-19 (“Case), as described below in Section 3, must quarantine themselves. These persons are required to follow all instructions in this Order and the Public Health guidance documents referenced in this Order.
3. 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 in any setting. Examples may include, but are not limited to, 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. Provide or provided care to the Case without wearing a mask, a face shield or goggles, gown, and gloves; or
 - d. Worked with the Case; or
 - e. Attended a social gathering with the Case; or
 - f. Have been identified as close contacts by the Contra Costa County Health Services Department; or
 - g. 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 SARS-CoV-2, the virus that causes COVID-19) and until he or she is released from isolation.



4. Instructions. All persons who have had close contact with a Case shall comply with the following requirements:

a. Stay in their home or another residence through 10 days from the last date that they were in contact with the person infected or likely to be infected with the COVID-19 virus. Persons are required to quarantine themselves for the entirety of this 10-day period because they are at high risk for developing and spreading COVID-19. Because there is a small risk of virus transmission after the 10-day period, to lessen the risk of outbreaks, persons who live in long-term care facilities or detention facilities and who have had close contact with a Case must remain in quarantine for an additional four days, for a total of 14 days.

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 be tested for SARS-CoV-2, 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 For Close Contacts,” posted at <https://www.coronavirus.cchealth.org/for-covid-19-patients>.

d. Between day 7 and day 10 of the quarantine period, consider being tested for the SARS-CoV-2 virus. A negative test does not negate the quarantine requirement.

e. If a quarantined person becomes sick with fever, cough, or shortness of breath (even if symptoms are very mild), he or she shall isolate themselves at home and away from other people and follow the “Self-Isolation Instructions for Confirmed Cases Instructions,” posted at <https://www.coronavirus.cchealth.org/for-covid-19-patients>. This is because the person is likely to have COVID-19 and if so, can spread the virus 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.

5. Work Restriction. To lessen the risk of outbreaks, persons who work in detention facilities or long-term care facilities and are subject to the quarantine requirement shall not return to work in those facilities for 14 days, beginning with the first day of the required quarantine period.

6. Exceptions. Notwithstanding the foregoing, the persons described below are exempt from the quarantine requirements in this Order:

a. Any person who has had close contact with a Case if:

(1) The person is fully vaccinated with a COVID-19 vaccine;

(2) At least two weeks and less than three months have passed since the person’s receipt of the last dose of the vaccine series or receipt of a single-dose vaccine, whichever is applicable; AND



(3) The person has had no symptoms of COVID-19 since the most recent close contact with a Case.

b. Any person who has had close contact with a Case who is employed in any of the critical infrastructure sectors designated by the State of California Public Health Officer (see <https://covid19.ca.gov/img/EssentialCriticalInfrastructureWorkers.pdf>) and has been determined by his or her respective employer to be part of the essential workforce if:

(1) The worker informs his or her employer about the worker's close contact to a lab-confirmed Case;

(2) The worker is asymptomatic, and the worker's employer determines, based on staffing needs, that the worker needs to report to work; AND

(3) The worker returns to work.

7. 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.

8. This Order shall become effective at 6:00 a.m on February 27, 2021, and will continue to be in effect until it is extended, rescinded, superseded, or amended in writing by the Health Officer.

9. 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.

10. If any provision of this Order or its application to any person or circumstance is held to be invalid, then the reminder 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.

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

IT IS SO ORDERED:



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

Dated: February 25 2021



Contra Costa County Ethical Framework for Vaccine Allocation

Phase 1A & Phase 1B, Tier 1

1/26/2021

RECOMMENDATIONS

Based on recommendations from the California Department of Public Health and current vaccine supply, the Committee supports expanding vaccine access to all populations in Phase 1A and Phase 1B, Tier 1. Eligible groups are outlined in the sections below.

Vaccine administration within this population is intended to mitigate occupational exposure for those working in the human health care infrastructure, and to protect those at highest risk of COVID-19 related death or serious illness. At this time, Contra Costa is no longer including veterinarians and veterinarian staff in Phase 1A.

Vaccine Allocation within Phase 1A

Tier 1

- Acute care, psychiatric and correctional facility hospital staff
- Staff and residents of skilled nursing facilities, residential care facilities for the elderly, and similar settings for older or medically vulnerable individuals
- Paramedics, EMTs and others providing emergency medical services
- Dialysis center staff

Tier 2

- Intermediate care facilities for persons who need non-continuous nursing supervision and supportive care
- Home health care and in-home supportive services staff
- Community health workers, i.e. Promotoras, African American Health Conductors, CORE Team, SPIRIT workers, homeless outreach workers, etc.
- Public health field staff
- Primary Care clinic staff, including Federally Qualified Health Centers, Rural Health Centers, correctional facility clinics, and urgent care clinics

Tier 3

Other settings and health care workers, including:

- Specialty clinics
- Laboratory workers
- Dental and other oral health clinics
- Pharmacy staff not working in settings at higher tiers

Vaccine Allocation within Phase 1B, Tier 1

- Individuals age 65 and older, prioritizing those 75 years or older due to increased risk of death and serious illness
- When further prioritization is needed within age groups, vaccine should preferentially be offered to individuals based on:
 1. Place of residence in relation to the California Health Places Index (HPI), prioritizing communities that have been disproportionately impacted by the pandemic
 2. Occupational risk of exposure
 3. Underlying medical condition or disability

Other eligible populations:

- Detention inmates and staff working inside county detention facilities who are unable mitigate their risk of exposure
- Individuals working within the Contra Costa County Emergency Operations Center and Contra Costa Health Services Department Operations Centers

Doses may be promptly offered to people in lower priority groups when:

- Demand subsides in the current groups
- Doses are about to expire according to labeling instructions
- Doses that have been thawed and would otherwise go to waste

BACKGROUND

Committee Overview

As Contra Costa County prepared to receive initial supplies of COVID-19 vaccine, Contra Costa Health Services convened an Ethical and Equitable Allocations Committee to ensure a fair, transparent, and evidence-based approach to access during the early stages of availability. Committee participants were chosen to include stakeholders from across the county system with various backgrounds and interest, and to represent those groups that have been most impacted by the pandemic. The Committee understands the need for flexibility as evidence emerges and medical realities change throughout the phased distribution of COVID-19 vaccine. The recommendations from this Committee are based on the best available and most up to date scientific information along with data trends specific for our unique community. As our county moves through the phases of vaccine allocation, the Committee make-up will change to match the interests and voices of those within each group.





Ethical Framework

Contra Costa County maintains that all persons are worthy of receiving the COVID-19 vaccine, regardless of a persons' payer status, socioeconomic status, age, race, gender, ethnicity, national origin, sexual orientation, religious affiliation, or disability

The Committee endorses the guidelines outlined by the Center for Disease Control and Prevention (CDC), Advisory Committee on Immunization practices (ACIP) and California Department of Public Health (CDPH). The ethical framework which has guided these recommendations are grounded in the fundamental commitment that the response to the current pandemic will protect and promote the public's health and its socioeconomic well-being in the short and long term. To honor this commitment, the vaccine allocation response must promote the common good by balancing three main ethical objectives.

1. To protect the population's health by maximizing benefit in the form of reducing mortality and serious morbidity
2. Respect individuals and groups at highest risk of health disparities
3. Protect against systemic inequality by promoting equity in access

The Committee is committed to ensuring that the most impacted areas of our community receive vaccine, while working within the state and federal framework.

Conclusion

Despite vaccines being distributed, the Committee asks our community to continue to adhere to hand washing, social distancing, masking, and other safe practices to decrease disease transmission. Contra Costa County is committed to the health and well-being of all persons and the hope is that this allocation model will honor that commitment.



RECORD OF ATTENDANCE

Ad Hoc Committee on COVID-19 Economic Impact and Recovery

February 18, 2021

Caller 1	Edward Booth	Marisa Lujan
Caller 2	Emily Johnson	Mary Schreiber
Caller 3	Emily Justice	Melissa Esposito
Caller 4	Erin Steffen	Mendy Gonzales
Caller 5	Gastronomic Games LL	mendygonzales
Caller 6	Gayle Israel	Mike McDermott
Caller 7	Hannah Robbins	mitch
Caller 8	health services (Chris Farnitano # MD Health Officer)	Healthfree
Caller 9	Heather Schiffman # Contra Costa AOR GAD	mkinyon
Caller 10	HS (Hilary Shen)	MWihelm
Caller 11	iPad	Nicole Bartholow
Caller 12	iPhone	Nicole's iPhone
8LHr30	Jack Tickner	Oleg K
Alison D.	Jennifer Usher	pamela
Amrita Kaur # WDB staff	Jennifer's iPhone	Patrick's iPhone
Angie	Jerry L	paula
Anne O	jessica lucia	Randy Sawyer
Anouschka	Jill Ray	Russell
B	jodi magee	Ruth Vale
Beverly	JULIE ENEA	Sarah Chodakewitz
Brandee Cerejo	Juliet	Shelley Clark
Brian Triplett	K (Kirsten VanderVorst)	Shirley
Call_in_user_1	Kellie Jonas Ikenberry	SONIA BUSTAMANTE
Cecelia (GALAXY CAKE)	Kelly Carlson	Stacey Carroll
charissa	Kevin Schmidtbauer	stgreen
Christine Laymon	kimberly's iPhone	Supervisor Candace Andersen
Colleen Awad	Kristen Burkhardt	Supervisor Karen Mitchoff (Karen Mitchoff)
Cora	lchow	Tia Patty
Daryn Nabeta	Lee	Tiffany I
David Z	lee_b	TNGJC (Tiff)
db	Lia Bristol	Tom K
Denise Zabkiewicz	Lisa Lampe	Tom K (T Kano)
Diana Becton's Wedding	Loretta R	W M
dorothystewart	Lynn Mackey (Lynn Mackey)	Wanda Davis
Dr. Tom Warne (Tom Warne)	Madeline Kronenberg	wharper
edelyn baldonado		WILLIAM's iPad (3)



AD HOC COMMITTEE ON COVID-19 ECONOMIC IMPACT AND RECOVERY

THE RECORD OF ACTION FOR
FEBRUARY 18, 2021

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

Attendees: Lynn Mackey, County Superintendent of Schools
See Attendance Record, attached.

1. Introductions

Chair Andersen called the meeting to order at 1:30 p.m., introduced the Committee members, the Deputy County Health Officer and the County Superintendent of Schools, and explained the format of the meeting.

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 #3.

3. RECEIVE status report on the County's COVID-19 status, the County's vaccination allocation framework, and school re-openings.

Dr. Warne Introduced himself and described his background as Deputy Health Officer for the county and a primary care physician at West county Health Center in San Pablo.

He reviewed the current dashboard statistics; the case rate is 15.2 new cases per day per 100,000 and the test positivity rate is 4.3%. We have vaccinated 238,955, which is almost a quarter of the county's goal to distribute 1 million vaccinations by July 4th. He notes that these numbers have fallen dramatically from our Winter peak and continue to decrease. He attributes this to the use of face masks, physical distancing, and stay at home orders.

In order for schools to re-open, less than 25 cases per day for 5 consecutive days was needed, we met this requirement in early January. Overall cases in the County are 61,000. There has been a gradual decline in cases per day. We are at just over 200

per day now.

Dr. Warne reviewed case rates by town/city and highlighted that case rates have fallen substantially even in the worst hit communities. Bay Point and San Pablo continue to have the highest case rates. We see rates as high as 10X that of the least affected communities in the county.

There was a moderate surge in hospitalizations in January, but hospitals were able to flex within their walls to provide for patients. Dr. Warne states that this is testament to our health care system. There are currently 127 ICU beds occupied and 41 available. This number varies according to need.

He said he expects to see an increase in vaccine supply but has seen a temporary decrease in the past few weeks. Dr. Warne states that the supply is not yet robust enough for the county given that we have the capacity to deliver about 30,000 vaccines per week. We remain a leader amongst the biggest counties in California in terms of vaccinations.

About 28% of vaccines have gone to those 65-74 and about 32% have gone to those 75 and older. About 50% of that age group that are eligible have gotten the vaccine.

The hardest hit communities have seen relatively lower rates of vaccinations. Supervisor Anderson pointed out that this could be due to the large number of older individuals and health care workers in certain areas. We know that Bay Point has the lowest vaccine rate, yet, is one of the most impacted communities.

Dr. Warne updates that there will be a shift in the way that vaccines are allocated. The state will be using a third-party administrator, Blue Shield, in hopes of increasing vaccination rates statewide. The goal is to administer 3 million a week across the state by March 1st. This will impact the county since it is currently managing allocation, but will remain very involved. This shift will likely happen in mid March. We are continuing to encourage people to make appointments on the county website, but this will shift over to the state website MyTurn.

The federally run vaccination site at the Oakland Coliseum is now open and can administer up to 6,000 shots per day, appointments can be made through MyTurn. This will be an additional resource for county residents.

We will continue to place schools in different risk tiers and use CDC recommendations on how to conduct school within those tiers. We have reached the point where tk-6 schools can reopen with appropriate safety plans. Middle and High Schools can reopen when we are in the red tier. Supervisor Anderson notes that we will be opening up vaccine administration to educators and other essential workers.

Dr. Warne went on to discuss the phases we have gone through and reiterated that we will need more supply. Vice Chair Mitchoff noted that the lack of supply has been in part due to the weather in the US that has prevented transportation of vaccines. Dr. Warne states that the release of the Johnson & Johnson vaccine may boost supply.

He responded to several questions that were received in advance of the meeting:

- *Are there any rumblings that the tier system is being eliminated? Dr. Warne explained that he has not heard discussions that would lead him to believe that it would be eliminated in the near future. The tier system has worked well and has allowed the county to increase or decrease restrictions in ways that are predictable and consistent.*
- *Do you know when they plan to drop the need for quarantine after traveling out of the area? Dr. Warne explained that there has been no word on this yet. It is a state recommendation. It is a strong recommendation and serves as guidance but is not an order. The state is discouraging travel for tourism and recreation. If travel is necessary, it is recommended that you self-quarantine for 10 days and always use face coverings and practice physical distancing while traveling outside of the state.*
- *Will the travel ban be lifted for youth sports in California? Has the Health Department heard anything from the state regarding youth sports? Dr. Warne explained that he has heard discussions from the state regarding the loosening of guidelines for both youth and adult sports. This has not been announced and is not final yet, but we do expect to see further guidance in the future. Changes will likely include the allowance of certain sports in more restrictive tiers. This may depend on case rates in the area, parental consent, and testing processes.*
- *What is the projection for moving into the red tier? Dr. Warne explained that test positivity rates have dropped but the case rate is still higher than what is needed to move into the red tier. We need to get below 7 case rates per 100,000 individuals for 2 weeks in order to move into the red tier. Optimistically, we may be moving into the red tier in about 3-4 weeks from now.*
- *When is the governor going to transition into age-based vaccination groups and how does this impact the essential worker group? Dr. Warne explained that while the state has not updated future plans for vaccination phases, there have been discussions that the state plans to move into a primarily age-based approach.*
- *Why is md usd struggling when so many other districts are opening? Dr. Warne explained that the school board makes the decisions on how and when to open. The Health department is here to assist in any way they can.*
- *There was a question about self service at convenience stores. Dr. Warne explains that the county does not have specific guidelines on this, we defer to state guidance for the industry sector. He believes self-service kiosks are generally prohibited*
- *How common are variants in our county? What are the impacts of those variants on immunity and vaccines? Dr. Warne explained that we are not strongly affected by these variants in our county and have not had any cases of the UK, South African, or Brazil variance. The UK variant, B117-UK, is a mutation of COVID that is highly transmissible and infective. There are also concerns that it could result in more severe disease and that vaccines could be less protective against variants. It continues to be important to keep our guard up despite recent gains.*

Lynn Mackey provided an update on changes in County schools opening status and shared that 9 schools submitted plans to open while in the purple tier. She noted that many districts throughout the county have plans to reopen as well as tentative

opening dates on their respective websites. She states that reopenings are going well.

Chair Andersen invited public comment and gave instructions:

- Mike McDermott asked about new work categories that will be opened up for vaccines, specifically education and childcare workers. Will this include anybody who is working at a school? How are you qualifying people for this category? Dr. Warne states that anyone working in a student-facing situation would certainly qualify. He lists the states qualifications and says that it is broad and comprehensive in terms of who qualifies within education and childcare.*
- Anoushka had a question in regards to sports; are supervisors in line with the state recommendations on this subject? During the last Ad Hoc meeting, there was a comment about the doctors who wrote a letter. She requested that a public statement be made stating that they were incorrect on three points; no one responded to the doctors, the date was not refuted, and that Ms. Miichoff stated that the doctor's backed down when they were in fact just waiting on a reply. She also requested that the concerns in their January 23rd letter be addressed. Chair Anderson stated that a letter was sent last week in response to the doctors written by Dr. Farnitano. She stated that they would send a copy of that letter to anyone who wants it. We will not create new guidelines; we will go by the state guidelines. Dr. Warne states that he cannot speak to what exactly will be in the guidelines, but it has been discussed that sports will be allowed in more restrictive tiers. The county plans to follow state recommendations and guidelines. The letter was responded to last week. At the county level, we do rely on the body of expertise on the federal level in terms of the best approaches. In this case, it is clear that PCR tests are the gold standard. Certainly, false positives can be a factor but it is a small factor and they are very accurate. This is governed by expert authorities at the federal level.*
- Mindy Gonzalez asked if our county was going to stick to state guidelines and not try to make more strenuous guidelines. She stated that CDC spacing is also a guideline not a mandate. Where does the county stand on this guideline of spacing given that it is not a mandate? Are the academic metrics can be expected to be met in regards to standardized testing and how will learning loss be addressed in our community? Lynn states that there is a bit of latitude as far as spacing. For students, it is 4 feet and adults need to be 6 feet apart. Schools have opened earlier without that spacing. It is an option for schools to submit a plan with other safety measures that have less than 4 feet of space to be reviewed by the state. We have been communicating about outdoor education. There is debate around state testing, we will be hearing more about this. Lynn states that she does not think mandated state testing is a priority. There have been other discussions as to how to mitigate learning loss. More information on this can be found on the State Hub.*
- 666-6666 had multiple questions. When will we stop wearing masks? Do any of you have any reservations about taking the vaccine? Do you intend to get the shot soon? Suppose teachers do not want to get the shots, is there room in our society for people who have misgivings and refuse the shot? The students have a choice to stay at home in San Ramon and many HS opted to stay at home, is this on the teachers to ensure that all high school students are following regulations? How many people have been hospitalized with the flu since*

October? I read the other day that it was 165. Dr Warne explained that we cannot predict when we will stop wearing masks and we know that they have been highly effective in reducing transmission. It has been a powerful tool in containment and know that these measures have saved lives. He also states that there are certainly room in society for those who do not get the shots, although we will be strongly encouraging people to get shots. He has gotten both of his shots. There will not be exclusion based on vaccination status. Cannot provide how many people have been hospitalized with the flu since October, that information typically isn't tracked at the county level. We do know that the flu season has been much less severe this season. Lynn states that she has not been vaccinated given that this is the first day that educators are able to sign up but does not have hesitancy towards it. Students will not be forced to go back to school. Karen states that she has been vaccinated as well since she is over 65.

- Jerry wanted to follow up on the Becton wedding, he requests it be condemned after going after businesses and fining people for defying regulations. Vice Chair Mitchoff responded that both Candace and herself were critical of the DA. None of the supervisors knew about the situation before it happened. Chair Anderson came out very strongly that she was frustrated that the DA did move forward with the wedding. We do not have the ability to discipline an elected official but it was not a good judgment. Relative to Ms. Becton, Vice Chair Mitchoff clarified that she was smirking at the situation, not the question, and is very frustrated with the DA.*
- Dorothy attempted to ask a question in regards to whether or not pre-school teachers would be able to get vaccinated. Supervisor Anderson stated that they are eligible to get vaccinated.*
- Shelly wanted to take the time to thank supervisor Anderson and reiterate how important it is to get our teachers vaccinated.*
- Kristen Burkhardt wanted to draw attention that the Oakley school district had quite a debacle of a meeting last night and was wondering what the county can do to hold these districts accountable? She states that she has pleaded their case to the district and union and questions what the county can do to assist? Lynn did hear about Oakley board meeting. If three people resign, they can assign county board members in interim. She states that she cannot talk specifically about that, but will be looking into it. She wants to support those board members and try to get schools open.*
- 555-5555- As a teacher, I don't want to get the shot and do not think it's beneficial for me. If I don't want to get the shot as a teacher, I shouldn't have to. She states that people should have their choice to receive the shot. Is there room in our society to disagree and not get the shot? Dr. Warren states that we certainly want to provide access for all teachers to get vaccinated if they want to. CDC stated that vaccination of teachers should not be a prerequisite for opening schools. We know that greater delivery and access of vaccines along with other prevention measures are necessary in order to make it a safe environment for everyone. We see it as an important tool but will not force anyone to get the vaccine.*

Vice Chair Mitchoff reiterated the importance of this subject and the supervisors' continued attention to the community.

4. RECEIVE and APPROVE the Record of Action for the January 21, 2021 meeting.

The Committee approved the Record of Action for the January 21, 2021 meeting as presented.

AYE: Chair Candace Andersen, Vice Chair Karen Mitchoff

Passed

5. The next meeting is currently scheduled for March 18, 2021.

Chair Andersen confirmed the next meeting date as noticed.

6. Adjourn

Chair Andersen adjourned the meeting at 3:21 p.m.

For Additional Information Contact:

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