



**DECLARATION OF LOCAL PUBLIC HEALTH EMERGENCY**  
**PUBLIC HEALTH ORDER**  
**Summit County, Utah**

**WHEREAS**, Summit County Code of Health §1-1-10(B) provides that the County Health Officer may declare a public health emergency; and,

**WHEREAS**, on January 21, 2020, the Utah Department of Health (“UDH”) activated its Department Operations Center in response to the evolving COVID-19 global pandemic. The UDH recognizes COVID-19 as an imminent threat to the health and safety of the residents of the State of Utah (“Utah”). The UDH, local health departments, and health and medical partners have activated response plans and protocols to prepare for the likely arrival of the virus in Utah. These partners have also worked to identify, contact, and test others in Utah potentially exposed to COVID-19 in coordination with the United States Centers for Disease Control and Prevention (“CDC”); and,

**WHEREAS**, on January 31, 2020, the United States Department of Health and Human Services Secretary Alex Azar declared a public health emergency for COVID-19, beginning on January 27, 2020; and,

**WHEREAS**, the CDC has identified the potential public health threat posed by COVID-19 both globally and in the United States as “high,” and has advised that person-to-person spread of COVID-19 will continue to occur globally, including within the United States; and,

**WHEREAS**, as of March 12, 2020, the CDC indicates that there are over 125,000 confirmed cases of COVID-19 worldwide with over 1,200 of those cases in the United States, including six in Utah, with two in Summit County; and,

**WHEREAS**, the UDH recognizes that confirmed community transmission in the United States significantly increases the risk of exposure and infection to the general public within Utah, which creates an extreme public health risk that may spread quickly; and,

**WHEREAS**, to combat the spread of COVID-19, Utah and various counties, including concurrently with this declaration, Summit County, have each declared local public health emergencies and proclaimed local emergencies; and,

**WHEREAS**, the Summit County Health Officer finds the above facts raise the likelihood of widespread community transmission occurring among the general public and the need for Summit County and the public to work cooperatively and proactively to slow the spread of COVID-19 and address any challenges that may arise due to this disease in Summit County; and,

**WHEREAS**, the Summit County Health Officer does hereby find that there is an imminent and proximate threat to public health from the introduction of COVID-19 into Summit County.

**THEREFORE, PURSUANT TO UCA §26A-1-114 AND SUMMIT COUNTY CODE OF HEALTH §1-1-10(b), BE IT DELCARED BY RICHARD C. BULLOUGH, SUMMIT COUNTY HEALTH OFFICER, AS FOLLOWS:**

Section 1.     **Declaration of Local Public Health Emergency.** It is hereby declared that there is a local public health emergency affecting Summit County, Utah, which exceeds the resources of the community, and assistance is requested from both the State of Utah and the federal government to provide all necessary resources to combat such emergency to protect the community and provide emergency assistance.

Section 2.     **Public Advisories.** The following measures are strongly recommended:

- No mass gatherings over one hundred (100) people should be held.
- Those individuals who are age sixty (60) or older, or who are immunocompromised, should not attend mass gatherings of over twenty (20) people.
- Access to long-term care facilities should be limited to close family relatives and facility staff.
- Where appropriate, employers should encourage their employees to work remotely from home.
- Where employees are sick, employers should encourage them to stay at home.
- Extra-curricular public and private school activities should be cancelled.
- Public and private schools should prepare for the possibility of closure.

Due to the evolving situation with the potential spread of the COVID-19 virus, these recommendations will be continuously reviewed and updated. Where, in the opinion of the Summit County Health Officer, it is warranted, these recommendations may become mandatory.

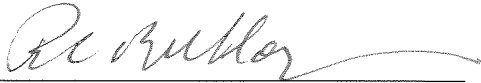
Section 3.     **Duration.** This declaration of a local public health emergency shall expire thirty (30) days after the Effective Date (defined below) unless ratified in written form by the Summit County Board of Health.

Section 4.     **Publication.** This declaration of a local public health emergency shall be on file for public inspection with the Summit County Health Department.


Section 5.     **Notice to Governor.** A copy of this declaration of a local public health emergency shall be sent to the Office of the Governor of the State of Utah.

Effective Date: 3/12/2020

SUMMIT COUNTY HEALTH DEPARTMENT

  
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Richard C. Bullough, PhD  
County Health Officer

Approved as to Form:

  
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David L. Thomas  
Chief Civil Deputy



## **DECLARATION OF LOCAL EMERGENCY**

### **Summit County, Utah**

**WHEREAS**, Summit County Code §5-4-4 provides that a “Declaration of Emergency” may be issued by the Summit County Manager; and,

**WHEREAS**, on January 21, 2020, the Utah Department of Health (“UDH”) activated its Department Operations Center in response to the evolving COVID-19 global pandemic. The UDH recognizes COVID-19 as an imminent threat to the health and safety of the residents of the State of Utah (“Utah”); and,

**WHEREAS**, on February 28, 2020, the State Emergency Operations Center raised its activation level to “Level 3 – Elevated Action.” The Utah Division of Emergency Management (“UDEM”) and the UDH activated a Joint Information System for public information; and,

**WHEREAS**, the United States Centers for Disease Control and Prevention (“CDC”) has identified the potential public health threat posed by COVID-19 both globally and in the United States as “high,” and has advised that person-to-person spread of COVID-19 will continue to occur globally, including within the United States; and,

**WHEREAS**, the UDH recognizes that confirmed community transmission in the United States significantly increases the risk of exposure and infection to the general public within Utah, which creates an extreme public health risk that may spread quickly; and,

**WHEREAS**, due to the identification of COVID-19 cases in Utah, including in Summit County, COVID-19 has created conditions that are or are likely to be beyond the control of local resources, and requires the combined forces of other political subdivisions to combat; and,

**WHEREAS**, the Summit County Health Officer (“Health Officer”) has determined that there is an imminent and proximate threat to the public health within Summit County from COVID-19, and has concurrently declared a Local Public Health Emergency; and,

**WHEREAS**, the mobilization of local resources, the coordination of interagency responses, the acceleration of procurement of vital supplies, and the implementation of mutual aid agreements will be critical to successfully responding to COVID-19; and,

**WHEREAS**, these conditions create a “State of Emergency” within the intent of the “Disaster Response and Recovery Act” found in Utah Code Annotated (“UCA”), Title 53, Chapter 2a, (1953), as amended, and necessitate that Summit County proclaim the existence of a local emergency which allows for the utilization of emergency police powers and resources.

**THEREFORE, PURSUANT TO UCA §53-2A-208 AND SUMMIT COUNTY CODE §5-4-4, BE IT DELCARED BY THOMAS C. FISHER, SUMMIT COUNTY MANAGER, AS FOLLOWS:**

Section 1.     **Declaration of Local Emergency.** It is hereby declared that there is a local emergency affecting Summit County, Utah, which exceeds the resources of the community, and assistance is requested from both the State of Utah and the federal government to provide all necessary resources to combat such emergency to protect the community and provide emergency assistance.

Section 2.     **Emergency Police Powers Activated.** The Summit County Manager shall exercise all powers and authority set forth in Summit County Code §5-4-6.

Section 3.     **Emergency Operations Plan Activated.** The Summit County Emergency Operations Plan is now in effect. The incident command system with respect to this local emergency is hereby activated.

Section 4.     **Emergency Operations Center Activated.** The Summit County Emergency Operations Center (“EOC”) is hereby activated.

Section 5.     **Special Event Permits.** Special Event Permits will be subject to review on a case-by-case basis by the Summit County Manager. No further Special Event Permits shall be issued for seven (7) days following the Effective Date.

Section 6.     **Closures.** The following Summit County facilities shall be closed to the general public until further notice:

North Summit Senior Center (Coalville)

South Summit Senior Center (Kamas)

Ledges Events Center and Fairgrounds (Coalville)

Due to the evolving situation with the potential spread of the COVID-19 virus, the closure of Summit County facilities will be continuously reviewed and updated. Where, in the opinion of the Summit County Manager, it is warranted, these closures may be expanded to other facilities.

Section 7.     **County Operations.** County operations will be curtailed consistent with the recommendations contained in the Declaration of Local Public Health Emergency.

Section 8.     **Duration.** This declaration of a local emergency shall expire thirty (30) days after the Effective Date (defined below) unless ratified in written form by the Summit County Council.

Section 9.     **Publication.** This declaration of a local emergency shall be on file for public inspection with the Summit County Clerk.

Section 10.    **Notice to Governor.** A copy of this declaration of a local emergency shall be sent to the Office of the Governor of the State of Utah.

Effective Date: 3/12/2020

SUMMIT COUNTY, UTAH



Thomas C. Fisher  
County Manager

Approved as to Form:



David L. Thomas  
Chief Civil Deputy

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BOARD OF HEALTH  
IN AND FOR SUMMIT COUNTY, STATE OF UTAH

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In the matter of:

**PUBLIC HEALTH ORDER**

COVID-19 Pandemic within Summit County, Utah

Order No.: 2020-01  
Date: March 15, 2020  
Legal Authority: Utah Code §26A-1-114

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On January 21, 2020, the Utah Department of Health (“UDH”) activated its Department Operations Center in response to the evolving COVID-19 global pandemic. The UDH recognizes COVID-19 as an imminent threat to the health and safety of the residents of the State of Utah (“Utah”). The UDH, local health departments, and health and medical partners have activated response plans and protocols to minimize the likely community spread of the virus in Utah and its impact on our healthcare resources. These partners have also worked to identify, contact, and test others in Utah potentially exposed to COVID-19 in coordination with the United States Centers for Disease Control and Prevention (“CDC”).

On January 31, 2020, the United States Department of Health and Human Services Secretary Alex Azar declared a public health emergency for COVID-19, beginning on January 27, 2020.

The CDC has identified the potential public health threat posed by COVID-19 both globally and in the United States as “high,” and has advised that person-to-person spread of COVID-19 will continue to occur globally, including within the United States.

As of March 15, 2020, the CDC indicates that there are over 160,000 confirmed cases of COVID-19 worldwide with over 3,000 of those cases in the United States, including 28 in Utah, with 8 in Summit County.

The UDH recognizes that confirmed community transmission in the United States significantly increases the risk of exposure and infection to the general public within Utah, which creates an extreme public health risk that may spread quickly.

To combat the spread of COVID-19, Utah and various counties and local health departments have each declared local public health emergencies.

The Summit County Health Officer has found that the above facts raise the likelihood of widespread community transmission occurring among the general public and the need for Summit County and the public to work cooperatively and proactively to slow the spread of COVID-19 and address any challenges that may arise due to this disease in Summit County.

On March 12, 2020, the Summit County Health Officer declared a Local Public Health Emergency concerning COVID-19. Simultaneously, the Summit County Manager declared a Local Emergency in Summit County, Utah.

On that same date, Summit County and Park City announced the closure of many of their public facilities, including senior centers, fitness facilities, recreation facilities, event centers, and libraries.

On March 13, 2020 at 4 pm (MST), the Governor dismissed all Utah public schools for two weeks to combat the spread of COVID-19 (the "School Dismissal"). The School Dismissal means that students will not be allowed to attend school, but staff, faculty, and food services personnel will be allowed to be in the school facility.

On March 14, 2020 at 10 am (MST), the Summit County Health Officer and the UDH State Epidemiologist announced "a new case of COVID-19 that is the first instance of community spread of the disease in Utah. Community spread means spread of an illness for which the source of infection is unknown. In the Summit County case, the patient had no history of travel and no known contact with any person who has been confirmed to have COVID-19" (the "Community Spread"). On March 14, 2020, Deer Valley Resort, Park City Mountain Resort, Park City Resort at the Canyons Village, and Woodward Park City, announced that they would voluntarily suspend operations.

Utah Code §26A-1-114(1)(e) empowers a local health department to "close theatres, schools, and other public places and prohibit gatherings of people when necessary to protect the public health."

As of March 14, 2020, Summit County was determined by the UDH to have the highest proportion of individuals testing positive for the COVID-19 virus in Utah, with 6 of the 8 confirmed cases within Summit County determined to be travelers to Summit County who contracted the virus in locations outside of Utah. Given Summit County's and Park City's prominence as tourist destinations for domestic and international travelers, and given the heightened risk of further Community Spread through public contacts among visitors, locals, and the service providers in close contact where people gather, with many such contacts having likely occurred, the Summit County Health Officer has determined that the closure of a wide



variety of venues and facilities where members of the public congregate within Summit County is critical to minimize further Community Spread and to soften the demand curve likely to be placed on Summit County's healthcare systems, facilities, supplies, and providers.

**THEREFORE, PURSUANT TO UTAH CODE §26A-1-114 AND SUMMIT COUNTY CODE OF HEALTH §1-1-10(b), BE IT HEREBY ORDERED BY RICHARD C. BULLOUGH, PHD, SUMMIT COUNTY HEALTH OFFICER, AS FOLLOWS:**

Section 1.     **Restaurants, Bars, and Taverns.** Effective at 5 pm (MST) on March 15, 2020, all restaurants, coffee/tea shops, employee cafeterias, self-serve buffets, salad bars, unpackaged self-serve food services, bars, taverns, nightclubs, private liquor clubs, and saloons in Summit County shall immediately close to members, guests, patrons, customers, and the general public. Notwithstanding the foregoing, restaurants may operate on a limited basis subject to the following operational restrictions and prohibitions, so long as the restaurant notifies the Summit County Health Department (the "Health Department") that it intends to operate on a limited basis hereunder and executes a memorandum of understanding with the Health Department:

- Prohibition on all dine-in food service, whether inside or outside the establishment, and prohibition of admitting members, guests, patrons, and customers inside the establishment.
- Curbside take-out or drive-thru food service is permitted. Cash payments are strongly discouraged. Staff who take cash or credit card payments shall use cleansing measures between each transaction, including using any best practices issued by the Health Department. Where possible, on-line (e.g.; *Venmo*, *Squarecash*, *Googlepay*, and similar payment apps) and telephonic credit card transactions are highly encouraged. Staff who handle cash or credit cards shall not be involved in the preparation, handling, or delivery of food.
- Employees must take food items to the curb and give the items to members, guests, patrons, and customers through the car window.
- For hotel restaurants, food items may only be delivered as room service or curbside service as described above.
- Third party food delivery services (i.e. *Uber Eats*, *Door Dash*, etc.) are prohibited.
- Management shall and must ensure, on a daily basis, that no employee who presents symptoms of illness will be permitted to work.

Due to the evolving situation with the potential spread of the COVID-19 virus, violations of these operational restrictions shall result in the immediate closure of individual businesses and

establishments to all business activity. Businesses found to be in violation will not be re-opened pending a rescission of this and any subsequent Public Health Order with respect to COVID-19.

Section 2.     **Resorts.** Effective at 5 pm (MST) on March 15, 2020, all ski and other recreational resorts in Summit County, including but not limited to Deer Valley Resort, Park City Mountain Resort, Park City Resort at the Canyons Village, Utah Olympic Park and Woodward Park City, shall be closed to members, guests, patrons, and the general public.

Section 3.     **Movie, Cinematic, and Live Performance Theatres and Venues.** Effective at 5 pm (MST) on March 15, 2020, all movie, cinematic, dance clubs, music clubs, discotheques, golf clubs, country clubs, and live performance theatres and venues in Summit County, including but not limited to the Redstone 8 Theatre and the Holiday Village 4 Theatre, shall be closed to members, guests, patrons, and the general public.

Section 4.     **Lodging.** Effective at 5 pm (MST) on March 15, 2020, with respect to all lodging facilities in Summit County, all communal pools, hot tubs, locker rooms, saunas, steam rooms, fitness centers, gyms, conference rooms, and spas shall be closed to members, guests, patrons, and the general public. Management shall implement social distancing measures in lobbies and communal areas of the establishment, including lines for front desk and concierge, and cleansing measures between each transaction for staff who have to handle cash and credit cards at check-in. Shuttle services shall adhere to guidance provided by the Health Department. Management shall post signage approved by the Health Department which advises members, guests and patrons of COVID-19 protocols.

Section 5.     **Transportation.** Park City Transit shall transition to Spring service levels. Management shall implement cleansing measures in accordance with the standards set forth in the Contagious Virus Response Plan of the American Public Transportation Association. The Kimball Circulator Service shall be suspended until further notice.

Section 6.     **Public Gathering Places.** Effective at 5 pm (MST) on March 15, 2020, all museums, gyms, exercise studios, spas, fitness centers, health clubs, indoor recreational facilities, churches, and all entertainment venues, including without limitation music performance venues, live stage performances, and lectures, shall be closed to members, guests, patrons, and the general public.

Section 7.     **General Protocols for Businesses.** Effective immediately, all establishments shall comply with the following regulations:

- Implement social distancing (six feet) measures in communal areas of the establishment.

- Staff who have to take cash or credit cards shall use cleansing measures, including best practices issued by the Summit County Health Department, between transactions. Cash transactions are discouraged, but not prohibited.
- Management shall and must ensure, on a daily basis, that no employee who presents symptoms of illness will be permitted to work.
- Members, guests, patrons, or customers who present symptoms of illness shall be excluded from the establishment.
- Management shall post signage approved by the Summit County Health Department which advises patrons of COVID-19 protocols.

**Section 8. Special Event Permits.** The Summit County Health Department shall not approve any new special event permits.

**Section 9. General Prohibitions.** Effective immediately, the following prohibitions shall apply throughout Summit County:

- No mass gatherings over one hundred (100) people shall be held; provided, however, that in the event any individual over the age of sixty (60) is present, the size of such gathering shall be limited to twenty (20) people.
- Access to long-term care facilities shall be limited to close family relatives and facility staff.

**Section 10. Duration.** This Order shall expire thirty (30) calendar days after the Effective Date. The Summit County Health Officer shall re-evaluate this Order in fourteen (14) calendar days.

**Section 11. Publication.** This Order shall be on file for public inspection with the Summit County Health Department.

**Section 12. Appeal.** This Order may be appealed to the Summit County Board of Health within ten (10) calendar days in accordance with Summit County Code of Health §1-1-9.

**Section 13. Violations.** An initial violation of this Order is punishable as a Class B Misdemeanor. Subsequent violations are punishable as Class A Misdemeanors. Each day of violation constitutes a separate offense (Utah Code §26A-1-123(1)(a) and (b); Summit County Code of Health §1-1-8(A)).

Effective Date: March 15, 2020

**BY ORDER OF THE SUMMIT COUNTY HEALTH OFFICER**



Richard C. Bullough, PhD  
County Health Officer

Approved as to Form:



Margaret Olson  
Summit County Attorney

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BOARD OF HEALTH  
IN AND FOR SUMMIT COUNTY, STATE OF UTAH

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In the matter of:

**PUBLIC HEALTH ORDER**

COVID-19 Pandemic within Summit County

Order No.: 2020-02

Date: March 23, 2020

Legal Authority: Utah Code §26A-1-114

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The Summit County Health Officer issued his Public Health Order 2020-01 on March 15, 2020.

On March 16, 2020, President Trump and the White House Coronavirus Task Force issued guidelines to help protect Americans during the global COVID-19 outbreak.

On March 17, 2020, Joseph K. Miner, MD, the Executive Director of the Utah Department of Health, issued his State Public Health Order (the “Original State Order”).

On March 21, 2020, Dr. Miner issued a new State Public Health Order which superseded his previous Original State Order (the “Amended State Order”). The Amended State Order provides: “Third-party delivery service (e.g., Uber Eats and DoorDash) is permitted except as otherwise prohibited or restricted by the Local Health Authority in coordination with the Department.”

On March 18, 2020, Dr. Miner was consulted by Summit County concerning third-party food delivery service under its Public Health Order 2020-01. Dr. Miner gave written consent for Summit County to prohibit third-party food delivery service.

Utah Code §26A-1-106(2) provides that “[r]egulations or standards relating to public health or environmental health services adopted or established by a local health department may not be less restrictive than [State Department of Health orders].”

Utah Code §26A-1-114(1)(e) empowers a local health department to “close theatres, schools, and other public places and prohibit gatherings of people when necessary to protect the

public health.” It further empowers the local health department to “exercise physical control over property and over individuals as the local health department finds necessary for the protection of the public health” (Utah Code §26A-1-114(1)(b)), and to do so through the issuance of “notices and orders.” Utah Code §26A-1-114(1)(k).

Utah Code §53-2a-209(4) allows the Governor to suspend enforcement of statutes through an emergency executive order. As of this date, the Governor has not issued an emergency executive order that suspends Utah Code §26A-1-114. In consequence of such, neither Public Health Order 2020-01, nor Public Health Order 2020-02 (this “Order”) is preempted by the State of Utah.

As of March 23, 2020, the United States Centers for Disease Control and Prevention (the “CDC”) indicates that there are over 335,000 confirmed cases of COVID-19 worldwide with over 33,000 of those cases in the United States, including 181 in Utah, with 50 in Summit County.

The Summit County Health Officer finds that there is a continuing and immediate threat to the public health of Summit County residents and visitors from the COVID-19 virus, which necessitates this Order.

**THEREFORE, PURSUANT TO UTAH CODE §26A-1-114 AND SUMMIT COUNTY CODE OF HEALTH §1-1-10(b), BE IT HEREBY ORDERED BY RICHARD C. BULLOUGH, PHD, SUMMIT COUNTY HEALTH OFFICER, AS FOLLOWS:**

Section 1. **Amendments to Section 9 (General Prohibitions).** Effective immediately, Section 9 of the Public Health Order 2020-01 is hereby deleted in form and substance, and replaced with the following prohibitions and limitations:

- Gatherings of more than ten (10) individuals is prohibited; provided, however, that this prohibition of gatherings of more than ten (10) individuals does not apply to critical government services such as fire, police, emergency response, and court services, or to other necessary services such as hospitals, domestic violence shelters, homeless shelters, licensed or contracted residential care providers, grocery stores, stores that sell other commodities, gas stations, convenience stores, building and construction worksites (subject to Section 2 below), and the shipping, transportation, and airline industry (the “Exempted Services”). These Exempted Services are encouraged to use appropriate precautions to prevent and control the spread of COVID-19. Grocery stores and gas stations are encouraged to remain open to provide necessary food items, fuel and other goods.
- This Order shall not be interpreted as requiring a business to limit staff in a single location to a maximum of ten (10) employees. Rather, businesses are encouraged to use social distancing and teleworking wherever possible.

- This prohibition on gatherings does not apply to a family with more than ten (10) people in the same household.
- Access to long-term care facilities shall be governed by the guidance issued by the Centers for Medicare and Medicaid Services, Center for Clinical Standards and Quality.

Section 2.     **Building and Construction.** Effective immediately, the following restrictions and limitations shall apply to all commercial and residential building and construction work sites within Summit County:

- Management shall instruct all employees to clean their hands often with an alcohol-based hand sanitizer that contains at least 60-95% alcohol, or wash their hands with soap and water for at least 20 seconds. Soap and water should be used preferentially if hands are visibly dirty.
- Management shall provide soap and water and/or alcohol-based hand rubs on the job site, and shall ensure that adequate supplies are maintained. Place hand rubs in multiple locations to encourage hand hygiene.
- Employees are not to congregate in lunch areas.
- Employees are not to share tools.
- Employees are not to share personal protection equipment (“PPE”). Sanitize reusable PPE per manufacturer’s recommendation prior to each use. Ensure used PPE is disposed of properly.
- Employees shall utilize disposable gloves where appropriate. Management shall instruct employees to wash hands after removing gloves.
- Management shall disinfect reusable supplies and equipment.
- Management shall identify specific locations and practices for daily trash such as: paper, hand towels, food containers, etc. Instruct workers responsible for trash removal in proper PPE/hand washing practices.
- Management shall provide routine environmental cleaning (doorknobs, keyboards, counters, and other surfaces).
- Employees shall not use a common water cooler. Management shall provide individual water bottles or instruct employees to bring their own.

- Employees shall utilize shoe sanitation tubs (non-bleach sanitizer solution) prior to entering/leaving jobsite.
- Management shall instruct employees to change work clothes prior to arriving home; and to wash clothes in hot water with laundry sanitizer.
- If possible, Management shall not stack trades (authorizing multiple trades to work in same area at same time)
- Employees shall utilize disposable hand towels and no-touch trash receptacles.
- Management shall request additional/increased sanitation (disinfecting) of portable toilets.
- Employees shall avoid cleaning techniques, such as using pressurized air or water sprays that may result in the generation of bioaerosols.
- Management shall ensure, on a daily basis and at the beginning of each shift on the work site, that no employee who presents any symptom of illness consistent with COVID-19 will be permitted to work. Employees who appear to have acute respiratory illness symptoms (i.e. cough, shortness of breath) upon arrival to work or become sick during the day shall be separated from other employees and sent home immediately.

**Section 3. Hair and Nail Salons; Tanning Salons.** Effective immediately, all hair salons, nail salons, beauty shops, cosmetology salons, esthetician salons, advanced practice esthetician salons, eyelash salons, barber shops, and tanning salons shall comply with the following restrictions and limitations:

- All employees shall wash their hands frequently throughout the business day.
- Sanitizer shall be available at each workstation and throughout the establishment.
- All lobbies shall be closed to clients, patrons and customers.
- Social distancing (minimum of six feet) shall be implemented between workstations. “Workstation” is defined as the entire space used by clients, patrons, customers, and cosmetologist to provide services. The parameter of each individual workstation shall be separated by at least six feet.



- All tools, chairs, and supplies shall be sanitized consistent with standards issued by the Summit County Health Department (the “Health Department”) after serving each client, patron, or customer.
- Lobbies and establishments shall be cleaned frequently.
- All establishments shall operate at 50% or less occupancy.
- Management shall ensure, on a daily basis and at the beginning of each shift, that no employee who presents any symptom of illness consistent with COVID-19 will be permitted to work. Employees who appear to have acute respiratory illness symptoms (i.e. cough, shortness of breath) upon arrival to work or become sick during the day shall be separated from other employees and sent home immediately.
- Cash payments are strongly discouraged. Staff who take cash or credit card payments shall use cleansing measures between each transaction, including using any best practices issued by the Health Department. Where possible, on-line (e.g.; *Venmo*, *Squarecash*, *Googlepay*, and similar payment apps) and telephonic credit card transactions are highly encouraged.
- Clients, patrons and customers shall be screened by phone and/or in-person prior to entering the establishment. If they are exhibiting any of the following symptoms, the client, patron or customer shall be rescheduled to the later of fourteen (14) days or three (3) days following the elimination of symptoms:
  - Cough
  - Shortness of Breath
  - Chills
  - Fever
  - Sneezing with nasal discharge

Section 4.     **Physical Therapy Clinics and Services.** Effective immediately, all physical therapy clinics and services shall comply with the following restrictions and limitations:

- Only essential therapy shall be administered on-site. Non-essential services shall not be provided in the physical location of the clinic. All lower acuity and routine visits shall either be delayed or transitioned to telehealth/virtual visits. For those services that are essential, and that cannot be done remotely, the following measures shall immediately be implemented:
  - Screening
    - Patients shall be screened by phone and/or in-person prior to entering the clinic or facility. If they are exhibiting any of the following symptoms, the patient shall be rescheduled to the later of fourteen (14) days or three (3) days following the elimination of symptoms:

- Cough
  - Shortness of Breath
  - Chills
  - Fever
  - Sneezing with nasal discharge
  - All clinical and support staff shall also conduct daily self-screening for symptoms. Any employee presenting symptoms consistent with COVID-19 must be sent home to self-quarantine for fourteen (14) days.
- Spacing and Distancing
  - All lobbies shall be closed to patients, clients or patrons. Waiting areas shall be restricted to outside the clinic or facility. For example, patients may wait in their car and receive a notice when their treatment is available.
  - All non-remote care must be one-on-one. Group therapy sessions are prohibited.
  - Patient spacing must be actively monitored.
  - Vendors, observers, and other non-essential individuals are prohibited from entering the clinic or facility.
  - Social distancing (minimum of six feet) shall be implemented between workstations. “Workstation” is defined as the entire space used by patient and therapist to provide therapy. The parameter of each individual workstation shall be separated by at least six feet.
  - All clinics and facilities shall operate at 50% or less occupancy, unless otherwise able to achieve acceptable social distancing.
- Hygiene
  - Handwashing and hygiene protocols must be implemented with clinical and support staff.
  - Mandatory hand washing upon patient arrival and departure must be implemented.
  - All tools, chairs, and supplies shall be sanitized consistent with standards issued by the Health Department after serving each patient.
  - Alcohol-based sanitizer and/or soap and water must be available in all clinics and facilities for patient and employee use.
  - Sanitizer shall be available at each workstation and throughout the clinic or facility.
  - Lobbies and clinics shall be cleaned frequently.
  - Cash payments are strongly discouraged. Staff who take cash or credit card payments shall use cleansing measures between each transaction, including using any best practices issued by the Health Department. Where possible, on-line (e.g.; *Venmo*, *Squarecash*, *Googlepay*, and similar payment apps) and telephonic credit card transactions are highly encouraged.

Section 5.     **Child Day Care Centers and Facilities.** Effective immediately, all child day care centers and facilities shall comply with the following restrictions and limitations:

- Providers shall conduct a health and wellness check of children and staff upon their arrival at the center or facility each day. Health and wellness checks are a great way for providers to take a few moments to notice how each child or staff member is looking, feeling, and acting when they first arrive. A child or staff member who presents signs of illness shall be sent home. Upon arrival, all children and staff shall wash their hands with soap and water.
- Providers shall question the adult who drops off the child as to whether any other family members residing in the home present signs of illness. Where other family members present such signs of illness, the provider shall prohibit the child from entering the center or facility, and send him or her home with the adult. Providers shall keep a daily log of every person who is physically present at the center or facility, including children, children's family, staff, and visitors. The log should include: date, time, name, association (child, parent, teacher, staff, etc.), health and wellness check results, and reliable phone number.
- Providers shall restrict groups of individuals within the center or facility to ten (10) or less. These groups include children and staff. A provider can allow more than ten (10) individuals in the center or facility if each group of ten (10) individuals or less is in a room separated by full walls from the other group(s).
- Providers shall limit child drop-off or pick-up at the clinic or facility to one family at a time. No other families shall be present during the drop-off or pick-up.
- Providers shall conduct daily health and wellness checks on all children and staff throughout the day. Having conducted a health and wellness check upon arrival will make it easier to notice if the child's or staff member's behavior or symptom's change throughout the day.
- Provider shall ensure that any visitors to any center or facility, including families seeking care, wash their hands with soap and water or an alcohol-based hand sanitizer before touching any center or facility surface.
- Providers must stay vigilant about hand hygiene and keeping a close eye on children and staff who are showing signs of illness.
- Providers shall protect children and staff by taking the following additional precautions:
  - Staff must wash their hands frequently throughout the day with soap and water for at least twenty (20) seconds. If soap and water are not available, use an alcohol-based hand sanitizer.
  - Staff must avoid touching their eyes, nose, and mouth with unwashed hands.
  - If possible, staff should cover coughs or sneezes with a tissue, then throw the tissue in the trash.

- Staff must clean and disinfect frequently touched objects and surfaces. More specifically, staff must ensure that surfaces and areas that are used and touched often are cleaned and sanitized after each use (i.e.; shared toys, keyboards, desks, and remote controls), or at least twice a day (i.e.; doorknobs, light switches, toilet handles, sink handles, and counter tops).

Section 6.     **Dental Clinical Services.** Effective immediately, all dental clinical services shall implement protocols to prevent potential exposure to and spread of COVID-19 consistent with the Utah Dental Association’s guidelines.

Section 7.     **No Other Amendments.** Except as set forth in this Public Health Order 2020-02, Public Health Order 2020-01 shall remain in full force and effect, and unamended.

Section 8.     **Duration.** This Order shall expire on April 22, 2020. The Summit County Health Officer shall re-evaluate this Order in fourteen (14) calendar days.


Section 9.     **Publication.** This Order shall be on file for public inspection with the Summit County Health Department.

Section 10.    **Appeal.** This Order may be appealed to the Summit County Board of Health within ten (10) calendar days in accordance with Summit County Code of Health §1-1-9.


Section 11.    **Violations.** An initial violation of this Order is punishable as a Class B Misdemeanor. Subsequent violations are punishable as Class A Misdemeanors. Each day of violation constitutes a separate offense (Utah Code §26A-1-123(1)(a) and (b); Summit County Code of Health §1-1-8(A)).

Effective Date: March 23, 2020

**BY ORDER OF THE SUMMIT COUNTY HEALTH OFFICER**

  
\_\_\_\_\_  
Richard C. Bullough, PhD  
County Health Officer

Approved as to Form:

  
\_\_\_\_\_  
Margaret H. Olson  
Summit County Attorney





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SUMMIT COUNTY COUNCIL AND ITS BOARD OF HEALTH  
IN AND FOR SUMMIT COUNTY, STATE OF UTAH

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In the matter of:	:	<b>JOINT PUBLIC HEALTH ORDER</b>
	:	<b>STAY-AT-HOME</b>
COVID-19 Pandemic within Summit County	:	
	:	Order No.: 2020-03
	:	
	:	Date: March 25, 2020
	:	
	:	Legal Authority: Utah Code §26A-1-114
	:	Utah Code §17-50-
	:	302(1)(a)(ii)
	:	Summit County Code
	:	§4-5-6(A)
	:	

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On March 12, 2020, the Summit County Health Officer (the “SCHO”) issued his Declaration of Local Public Health Emergency with regard to the COVID-19 (Coronavirus) pandemic.

On that same date, the Summit County Manager (the “Manager”) made his Declaration of Local Emergency.

The SCHO issued his Public Health Order 2020-01 on March 15, 2020, closing recreational resorts, as well as movie, cinematic, and live performance theaters and venues, and imposing limitations on restaurants, bars, taverns, and lodging.

On March 16, 2020, President Trump and the White House Coronavirus Task Force issued guidelines to help protect Americans during the global COVID-19 outbreak, which guidelines included social distancing practices and avoiding gatherings of over ten (10) individuals.

On that same date, the Health Officer of the City and County of San Francisco, California, issued his Order No. C19-07 directing individuals within his jurisdiction to shelter-in-place from March 17, 2020 to April 7, 2020 for the express intent of preventing the spread of COVID-19. California has the third highest confirmed cases of the virus in the United States.

On March 17, 2020, Joseph K. Miner, MD, the Executive Director of the Utah Department of Health, issued his State Public Health Order, which restricted certain businesses and gatherings of over ten (10) individuals.

On March 18, 2020, the Governor of New York issued his Executive Order No. 202.6, which ordered all non-essential businesses within the State of New York to decrease their on-site workforces by 50% from March 20, 2020 to April 17, 2020, so as to prevent the spread of COVID-19. New York is the epicenter of the spread of COVID-19 in the United States; having the vast majority of confirmed cases of any state and the most deaths.

On March 21, 2020, the Health Officer of Los Angeles County, California, issued his Safer at Home Order for Control of COVID-19, which prohibits all public and private gatherings, and closed all non-essential businesses from March 21, 2020 to April 19, 2020.

On the same date, Dr. Miner issued a new State Public Health Order which superseded his previous order; providing additional guidelines for the prevention of the spread of COVID-19.

On March 23, 2020, the SCHO issued Public Health Order 2020-02, which placed further restrictions on businesses and public gatherings.

On that same date, the Governor of the State of Washington ordered a statewide shelter-in-place for two weeks. Washington has the second highest number of deaths from COVID-19 in the United States.

On that same date, the Public Health Director of Pitkin County, Colorado, issued his Standing Public Health Order which directed that residents stay-at-home until April 17, 2020. That order also directed that all visitors to Pitkin County return home immediately by the fastest and safest available means. Further, non-resident homeowners were strongly encouraged to leave or not travel to Pitkin County.

A recent study of COVID-19 infection rates among ski towns in the western United States shows that while the average confirmed cases per 100,000 residents in the United States is 16, ski towns have a significantly higher rate. For example, if ski town population is mathematically projected, the United States has 16 cases per 100,000 residents, Pitkin County has 100 cases per 100,000 residents, and Summit County has the highest rate of all ski towns at 196 cases per 100,000 residents.

Utah Code §26A-1-106(2) provides that “[r]egulations or standards relating to public health or environmental health services adopted or established by a local health department may not be less restrictive than [State Department of Health orders].”

Utah Code §26A-1-114(1)(e) empowers a local health department to “close theatres, schools, and other public places and prohibit gatherings of people when necessary to protect the public health.” It further empowers the local health department to “exercise physical control over property and over individuals as the local health department finds necessary for the protection of the public health” (Utah Code §26A-1-114(1)(b)), and to do so through the issuance of “notices and orders.” Utah Code §26A-1-114(1)(k).

The Manager has authority to issue curfew and evacuation orders, so long as they are deemed necessary for the preservation of life. Summit County Code (“SCC”) §5-4-6(A)(4) & (6); §5-4-9. Any such order in excess of seven (7) days must be approved by the Summit County Council (the “Council”). SCC §5-4-6(A)(1).

Utah Code §17-50-302(1)(a)(ii) authorizes a county to “exercise a power, or perform a function that is reasonably related to the safety, health, morals, and welfare of county inhabitants, except as limited or prohibited by statute.”

As of March 26, 2020, the United States Centers for Disease Control and Prevention (the “CDC”) indicated that there are over 460,000 confirmed cases of COVID-19 worldwide with over 62,000 of those cases in the United States, including 346 in Utah, with 97 in Summit County.

Models suggest that if current conditions persist, assuming no further measures are enacted, the health care system within the State of Utah will reach maximum capacity within two weeks or less.

On March 25, 2020, the Utah Academy of Family Physicians called on state and local leaders to issue stay-at-home orders for every community to slow the spread of COVID-19 cases, stating “We are gravely concerned about the impact of COVID-19 on the public and on practicing family physicians providing primary care in Utah. We need to take these steps now to keep our health care system from breaking down under the strain of the coming surge . . . Urgent action is required if we are to keep primary care workforce protected and healthy enough to respond to his pandemic.”

Summit County (the “County”) with a population of 42,000 residents is the epicenter for COVID-19 in the State of Utah, having nearly a third of all Utah cases, as well as reporting the first case of community spread in the state. While data is ever emerging, the County’s rate of occurrence of confirmed COVID-19 cases generally rivals that of New York City and continues to grow exponentially. In fact, the County’s per capita rate is twenty times greater than the second most affected county, Salt Lake County.



The County's unique position as both a major tourist destination and a large second home community adds to the public health risk, as non-residents have been sources of the COVID-19 spread within the County.

The County has an important and substantial interest in protecting the health of its citizens and visitors from the spread of the COVID-19 virus.

The SCHO, Council, and Manager jointly find that there is a continuing and immediate threat to the public health of County residents and visitors from the spread of the COVID-19 virus, which necessitates this Joint Public Health Order (this "Order"), which Order and its restrictions are no greater than necessary to carry out the purpose of preventing the spread of COVID-19 within the County.

This Order applies countywide, both to the unincorporated and incorporated portions of the County.

**THEREFORE, PURSUANT TO UTAH CODE §26A-1-114, UTAH CODE §17-50-302, SUMMIT COUNTY CODE §5-4-6, AND SUMMIT COUNTY CODE OF HEALTH §1-1-10(b), BE IT HEREBY ORDERED BY RICHARD C. BULLOUGH, PHD, SUMMIT COUNTY HEALTH OFFICER, THE SUMMIT COUNTY COUNCIL, AND THOMAS C. FISHER, SUMMIT COUNTY MANAGER, IN CONSULTATION WITH THE SUMMIT COUNTY BOARD OF HEALTH, AS FOLLOWS:**

Section 1.     **Purpose.** The intent of this Order is to ensure that the maximum number of people self-isolate in their places of residence to the maximum extent feasible, while enabling essential services to continue, to slow the spread of COVID-19 to the maximum extent possible. When people need to leave their places of residence, whether to obtain or perform vital services, or to otherwise facilitate authorized activities necessary for continuity of social and commercial life, they should at all times reasonably possible comply with Social Distancing Requirements as defined in Section 7 below. All provisions of this Order should be interpreted to effectuate this intent.

Section 2.     **Stay-at-Home Order.** All individuals currently living within Summit County, Utah (the "County") are ordered to stay at their place of residence. To the extent individuals are using shared or outdoor spaces, they must at all times as reasonably possible maintain Social Distancing Requirements when they are outside their residence. All persons may leave their residences only for "Essential Activities," "Essential Governmental Functions," "Essential Travel," or to operate "Essential Businesses" (as all are defined in Section 7 below). Individuals experiencing homelessness are exempt from this Section (but should use COVID-19 risk mitigation practices).

Section 3.     **Business Closures.** All businesses with a facility in the County, except Essential Businesses (as defined below in Section 7), are required to cease all activities at facilities located within the County except “Minimum Basic Operations” (as defined in Section 7 below). For clarity, businesses may also continue operations so long as their employees or contractors are performing activities at their own residences (i.e., working from home) and customers are not entering their residences for such business activity. All Essential Businesses are strongly encouraged to remain open. To the greatest extent feasible, Essential Businesses shall comply with Social Distancing Requirements, as defined in Section 7, including by maintaining six-foot social distancing for both employees and members of the public, including, but not limited to, when any customers are standing in line.

Section 4.     **Public and Private Gatherings Prohibited.** All public and private gatherings of any number of people are prohibited, but this restriction shall not apply to members of the same household or living unit, and excepting for the limited purposes as expressly permitted in Section 7. Nothing in this Order prohibits the gathering of members of a household or living unit.

Section 5.     **Travel Restrictions.** All travel, including, but not limited to, travel on foot, bicycle, scooter, motorcycle, automobile, or public transit, except “Essential Travel” and “Essential Activities” (as each is defined below in Section 7), is prohibited. People must use public transit only for purposes of performing Essential Activities or to travel to and from work for the purpose of working at the Essential Businesses or maintaining Essential Governmental Functions. People riding on public transit must comply with Social Distancing Requirements as defined in Section 7 below, to the greatest extent feasible. This Order allows travel into or out of the County to perform Essential Activities, operate Essential Businesses, or maintain Essential Governmental Functions.

Section 6.     **Evidentiary Basis of Restrictions.**

A.     This Order is issued based on evidence of the rapidly increasing occurrences of COVID-19 within the County, scientific evidence and best practices regarding the most effective approaches to slow the transmission of communicable diseases generally and COVID-19 specifically, the unique position of the County as a major resort destination and second home community, and 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. Due to the outbreak of the COVID-19 virus in the general public, which is now 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 COVID-19 virus have no symptoms or have mild symptoms, which means they may not be aware they carry the virus. Because even people without symptoms can transmit the disease,

and because evidence shows the disease is easily spread, gatherings can result in preventable transmission of the virus. The scientific evidence shows that at this stage of the emergency, it is essential to slow virus transmission as much as possible to protect the most vulnerable populations and to prevent the health care system from being overwhelmed, as the County has only a single hospital. One proven way to slow the transmission is to limit interactions among people to the greatest extent practicable. By reducing the spread of the COVID-19 virus, this Order helps preserve critical and limited healthcare capacity in the County.

B. This Order also is issued in light of the existence of 97 confirmed cases of COVID-19, as of March 26, 2020, including a significant and increasing number of suspected cases of community transmission and likely further significant increases in transmission. Widespread testing for COVID-19 is not yet available but is expected to increase in the coming days. Ski areas in the western United States, including the County, have a much higher rate of confirmed cases than the rest of the United States or other areas of Utah, which exacerbates the health risks to County residents. While Public Health Order 2020-01 required the closure of ski resorts in Summit County, it is likely that the virus accelerated its entry into the community prior to the closure and that undetected cases within Summit County remain unusually high for its population. This Order is necessary to slow the rate of spread.

#### Section 7.     **Definitions and Exemptions.**

A. For purposes of this Order, individuals may leave their residence only to perform any of the following “Essential Activities.” But people at high risk of severe illness from COVID-19 and people who are sick are urged to stay in their residence to the extent possible except as necessary to seek medical care.

i. To engage in activities or perform tasks essential to their health and safety, or to the health and safety of their family or household members, such as, by way of example only and without limitation, obtaining medical supplies or medication, visiting a health care professional, or obtaining supplies they need to work from home.

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, and products necessary to maintain the safety, sanitation, and essential operation of residences.

iii. To engage in outdoor activity, provided the individuals comply with Social Distancing Requirements as defined in this Section, such as, by way of example and without limitation, walking, hiking, or running. Do not congregate in groups at trailheads, parks or recreational areas.

iv. To perform work providing essential products and services at an Essential Business or to otherwise carry out activities specifically permitted in this Order, including Minimum Basic Operations.

v. To care for a family member or pet in another household.

B. For purposes of this Order, individuals may leave their residence to work for or obtain services at any “Healthcare Operation,” including hospitals, clinics, dentists, pharmacies, physical therapy clinics and services, 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 Operation also includes veterinary care and all healthcare services provided to animals. This exemption shall be construed broadly to avoid any impacts to the delivery of healthcare, broadly defined. Healthcare Operations does not include fitness and exercise gyms and similar facilities. With respect to physical therapy clinics and services, the restrictions and limitations in Public Health Order 2020-02 shall continue to apply. Non-urgent medical, dental, and veterinary procedures are restricted per Utah Department of Health orders.

C. For purposes of this Order, individuals may leave their residence to provide any services or perform any work necessary to the operations and maintenance of “Essential Infrastructure,” including, but not limited to, public works construction, residential and commercial construction, airport operations, water, sewer, gas, electrical, oil refining, roads and highways, public transportation, solid waste collection and removal, internet, and telecommunications systems (including the provision of essential global, national, and local infrastructure for computing services, business infrastructure, communications, and web-based services), provided that they carry out those services or that work in compliance with Social Distancing Requirements as defined this Section, to the extent possible. In residential and commercial construction and the regulation of construction sites, the restrictions and limitations in Public Health Order 2020-02 shall continue to apply.

D. For purposes of this Order, all first responders, emergency management personnel, emergency dispatchers, court personnel, and law enforcement

personnel, and others working for or to support Essential Businesses are categorically exempt from this Order. Further, nothing in this Order shall prohibit any individual from performing or accessing “Essential Governmental Functions.” Essential Government Functions means all services needed to ensure the continuing operation of government agencies and provide for the health, safety and welfare of the public. All Essential Governmental Functions shall be performed in compliance with Social Distancing Requirements as defined this Section, to the extent possible.

E. For the purposes of this Order, covered businesses include any for-profit, non-profit, or educational entities, regardless of the nature of the service, the function they perform, or its corporate or entity structure.

F. For the purposes of this Order, “Essential Businesses” means:

i. Healthcare Operations and Essential Infrastructure;

ii. Grocery stores, supermarkets, food banks, convenience stores, and other establishments engaged in the retail sale of canned food, dry goods, fresh fruits and vegetables, pet supply, fresh meats, fish, and poultry, and any other household consumer products (such as cleaning and personal care products). This includes stores that sell groceries and also sell other non-grocery products, and products necessary to maintaining the safety, sanitation, and essential operation of residences;

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. Newspapers, television, radio, and other media services;

vi. Gas stations and auto-supply, auto-repair, and related facilities;

vii. Banks and related financial institutions;

viii. Hardware stores;

ix. Plumbers, electricians, exterminators, and other service providers who provide services that are necessary to maintaining the safety, sanitation, and essential operation of residences, Essential Activities, and Essential Businesses. Public Health Order 2020-02 as it pertains to construction sites shall apply;

x. Businesses providing mailing and shipping services, including post office boxes;

xi. Educational institutions—including public and private K-12 schools, colleges, and universities—for purposes of facilitating distance learning or performing essential functions, provided that social distancing of six-feet per person is maintained to the greatest extent possible;

xii. Laundromats, dry cleaners, and laundry service providers;

xiii. Restaurants and other facilities that prepare and serve food, but only for curbside pick-up and drive-thru service. The provisions of Public Health Order 2020-01, as it applies to restaurants, bars, and taverns shall continue to apply. 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 takeaway 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;

xiv. Businesses that supply products needed for people to work from home;

xv. Businesses that supply other Essential Businesses with the support or supplies necessary to operate;

xvi. Businesses that existed on March 12, 2020, which had as part of their local and state permits on that date, the shipment or delivery of groceries, food, goods or services directly to residences. Third-party food delivery services, as set forth in Public Health Order 2020-01, continue to be prohibited;

xvii. Airlines, taxis, and other private transportation providers providing transportation services necessary for Essential Activities and other purposes expressly authorized in this Order;

xviii. Home-based care for seniors, adults, or children;

xix. Residential facilities and shelters for seniors, adults, and children;

xx. Professional services, such as legal or accounting services, when necessary to assist in compliance with legally mandated activities;

xxi. Child day care centers and facilities providing services that enable employees exempted in this Order to work as permitted. The restrictions and limitations in Public Health Order 2020-02 shall continue to apply.

G. For the purposes of this Order, “Minimum Basic Operations” include the following, provided that employees 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 the value of the business’s inventory, ensure security, process payroll and employee benefits, or for related functions.

ii. The minimum necessary activities to facilitate employees of the business being able to continue to work remotely from their residences.

H. For the purposes of this Order, “Essential Travel” includes travel for any of the following purposes. Individuals engaged in any Essential Travel must comply with all Social Distancing Requirements as defined in this Section.

i. Any travel related to the provision of or access to Essential Activities, Essential Governmental Functions, Essential Businesses, or Minimum Basic Operations.

ii. Travel to care for elderly, minors, dependents, persons with disabilities, or other vulnerable persons.

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 jurisdiction.

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.

I. For purposes of this Order, residences include hotels, motels, shared rental units, and similar facilities.

J. For purposes of this Order, “Social Distancing Requirements” includes maintaining at least six-foot social distancing from other individuals, washing hands with soap and water for at least twenty seconds as frequently as possible or

using hand sanitizer, covering coughs or sneezes (into the sleeve or elbow, not hands), regularly cleaning high-touch surfaces, and not shaking hands.

**Section 8. Visitors.** Visitors to Summit County are directed to return home immediately upon the issuance of this Order, no later than April 1, 2020, by the fastest and safest available means, and persons considering visiting Summit County should remain home. Although non-resident homeowners are expressly exempt from this Section, non-resident homeowners are strongly encouraged to leave or not travel to Summit County. Non-resident homeowners should know and be advised that the local infrastructure, especially the health care infrastructure, is not equipped for an influx of part-time residents in a time of global pandemic.

**Section 9. Conflicts.** Except as set forth in this Order, Public Health Order 2020-01 and Public Health Order 2020-02 shall remain in full force and effect, and unamended. In the event of any conflict between this Order and Public Health Order 2020-01 or Public Health Order 2020-02, this Order shall control.

**Section 10. Effective Date; Duration.** This Order shall become effective at 12:01 a.m. on March 27, 2020, and will continue to be in effect until 11:59 p.m. on May 1, 2020, or until it is extended, rescinded, superseded, or amended in writing. This Order shall re-evaluated in fourteen (14) calendar days.

**Section 11. Publication.** This Order shall be on file for public inspection with the Summit County Clerk and the Summit County Health Department.

**Section 12. Enforcement.** The County Sheriff and Chiefs of Police within the County are directed to ensure compliance with and enforce this Order. Notwithstanding such, the purpose of this Order is to protect individuals' health and not to hold them criminally liable. Discretion will be used in the citing and prosecution of violations of this Order.



ORDERED, APPROVED, ADOPTED, and PASSED, and published, this 25<sup>th</sup> day of March, 2020.

ATTEST:

**SUMMIT COUNTY COUNCIL**



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Kent Jones  
Summit County Clerk



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Doug Clyde, Chair

APPROVED AS TO FORM



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Margaret H. Olson  
Summit County Attorney

VOTING OF COUNTY COUNCIL:

Councilmember Carson	Yes
Councilmember Robinson	Yes
Councilmember Clyde	Yes
Councilmember Armstrong	Yes
Councilmember Wright	Yes

**BY ORDER OF THE SUMMIT COUNTY MANAGER**



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Thomas C. Fisher  
Summit County Manager

**BY ORDER OF THE SUMMIT COUNTY HEALTH OFFICER**



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Richard C. Bullough, PhD  
County Health Officer

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BOARD OF HEALTH  
IN AND FOR SUMMIT COUNTY, STATE OF UTAH

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In the matter of:	:	<b>AMENDED PUBLIC HEALTH ORDER</b>
COVID-19 Pandemic within Summit County	:	Order No.: 2020-04
	:	Date: March 31, 2020
	:	Legal Authority: Utah Code §26A-1-114
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	:	
	:	
	:	
	:	
	:	

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The Summit County Health Officer (“**SCHO**”) issued his Public Health Order 2020-01 on March 15, 2020, which has an expiration date of April 14, 2020.

The SCHO issued his Public Health Order 2020-02 on March 23, 2020, which has an expiration date of April 22, 2020.

The SCHO, Summit County Council, and the Summit County Manager issued their Joint Public Health Order 2020-03 (the “**Stay-at-Home Order**”), which has an expiration date of May 1, 2020.

The SCHO finds that there is a continuing and immediate threat to the public health of Summit County residents and visitors from the COVID-19 virus, which necessitates amending Public Health Order 2020-01 and Public Health Order 2020-02 to be co-terminus with the Stay-at-Home Order.

**THEREFORE, PURSUANT TO UTAH CODE §26A-1-114 AND SUMMIT COUNTY CODE OF HEALTH §1-1-10(b), BE IT HEREBY ORDERED BY RICHARD C. BULLOUGH, PHD, SUMMIT COUNTY HEALTH OFFICER, AS FOLLOWS:**

Section 1. **Amendments to Duration of Public Health Order 2020-01 and Public Health Order 2020-02.** Effective immediately, Public Health Order 2020-01, Section 10, and Public Health Order 2020-02, Section 8, are hereby amended to extend the duration of both orders to May 1, 2020 (together, the “**Amended Orders**”).

Section 2.     **Stay-at-Home Order not superseded.** The Amended Orders do not supersede the Joint Public Health Order 2020-03 (Stay-at-Home Order).

Section 3.     **No Other Amendments.** Except as set forth in this Amended Public Health Order 2020-04, Public Health Order 2020-01, Public Health Order 2020-02, and Joint Public Health Order 2020-03 (Stay-at-Home Order) shall remain in full force and effect, and unamended.

Section 4.     **Publication.** This Amended Public Health Order 2020-04 shall be on file for public inspection with the Summit County Health Department.

Section 5.     **Appeal.** This Amended Public Health Order 2020-04 may be appealed to the Summit County Board of Health within ten (10) calendar days in accordance with Summit County Code of Health §1-1-9.

Effective Date: March 31, 2020

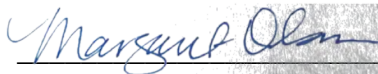
**BY ORDER OF THE SUMMIT COUNTY HEALTH OFFICER**



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Richard C. Bullough, PhD  
County Health Officer

Approved as to Form:



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Margaret H. Olson  
Summit County Attorney



## **EXTENSION OF LOCAL PUBLIC HEALTH EMERGENCY**

### **PUBLIC HEALTH ORDER**

#### **Summit County, Utah**

**WHEREAS**, the *Summit County Code of Health* §1-1-10(B) provides that the Summit County Health Officer (“SCHO”) may declare a public health emergency; and,

**WHEREAS**, on March 12, 2020, the Summit County Manager (the “Manager”) issued his Declaration of Local Emergency with regard to the COVID-19 (Coronavirus) Pandemic (the “Emergency Declaration”); and,

**WHEREAS**, concurrently with the Emergency Declaration, the SCHO issued his Declaration of Local Public Health Emergency with regard to the COVID-19 (Coronavirus) Pandemic (the “Public Health Emergency Declaration”) for a period of thirty (30) days, ending on April 11, 2020; and,

**WHEREAS**, on March 15, 2020, the SCHO issued his Public Health Order 2020-01, closing recreational resorts, as well as movie, cinematic, and live performance theaters and venues, and imposing limitations on restaurants, bars, taverns, and lodging; and,

**WHEREAS**, on March 16, 2020, the Summit County Council (the “Council”) adopted Resolution 2020-03, which ratified the Emergency Declaration for a period of thirty-five (35) days, ending April 20, 2020; and,

**WHEREAS**, on March 23, 2020, the SCHO issued his Public Health Order 2020-02, which placed further restrictions on businesses and public gatherings; and,

**WHEREAS**, on March 25, 2020, the SCHO, the Council, and the Manager issued their Joint Public Health Order 2020-03, which imposed a stay-at-home order on all county residents and businesses until May 1, 2020; and,

**WHEREAS**, the SCHO has extended the duration of both Public Health Order 2020-01 and Public Health Order 2020-02 to be co-terminus with the Joint Public Health Order 2020-03; and,

**WHEREAS**, the public health emergency conditions continue to persist within the county; and,

**WHEREAS**, it is in the best interests of the health, safety, and general welfare of the public that the Public Health Emergency Declaration be extended so as to be co-terminus with the Joint Public Health Order 2020-03.

**THEREFORE, PURSUANT TO UCA §26A-1-114 AND SUMMIT COUNTY CODE OF HEALTH §1-1-10(b), BE IT DELCARED BY RICHARD C. BULLOUGH, PHD, SUMMIT COUNTY HEALTH OFFICER, AS FOLLOWS:**

Section 1.     **Extension.** The Declaration of Local Public Health Emergency, dated March 12, 2020, is hereby extended in duration until May 1, 2020.

Section 2.     **Publication.** This extension of the Public Health Emergency Declaration shall be on file for public inspection with the Summit County Health Department.

Section 3.     **Notice to Governor.** A copy of this extension of the Public Health Emergency Declaration shall be sent to the Office of the Governor of the State of Utah.

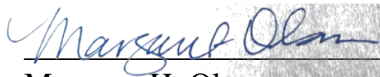
Effective Date: 4/7/2020

SUMMIT COUNTY HEALTH DEPARTMENT



Richard C. Bullough, PhD  
County Health Officer

Approved as to Form:



Margaret H. Olson  
County Attorney

**A RESOLUTION OF THE COUNTY COUNCIL EXTENDING THE  
DECLARATION OF LOCAL EMERGENCY  
SUMMIT COUNTY, UTAH**

**WHEREAS**, on March 12, 2020, the Summit County Manager (the “Manager”) issued his Declaration of Local Emergency with regard to the COVID-19 (Coronavirus) Pandemic (the “Emergency Declaration”); and,

**WHEREAS**, concurrently with the Emergency Declaration, the Summit County Health Officer (“SCHO”), issued his Declaration of Local Public Health Emergency with regard to the COVID-19 (Coronavirus) Pandemic (the “Public Health Emergency Declaration”); and,

**WHEREAS**, on March 15, 2020, the SCHO issued his Public Health Order 2020-01, closing recreational resorts, as well as movie, cinematic, and live performance theaters and venues, and imposing limitations on restaurants, bars, taverns, and lodging; and,

**WHEREAS**, on March 16, 2020, the Summit County Council (the “Council”) adopted Resolution 2020-03, which ratified the Emergency Declaration for a period of thirty-five (35) days, ending April 20, 2020; and,

**WHEREAS**, on March 23, 2020, the SCHO issued his Public Health Order 2020-02, which placed further restrictions on businesses and public gatherings; and,

**WHEREAS**, on March 25, 2020, the SCHO, the Council, and the Manager issued their Joint Public Health Order 2020-03, which imposed a stay-at-home order on all county residents and businesses until May 1, 2020; and,

**WHEREAS**, the SCHO has extended the duration of both Public Health Order 2020-01 and Public Health Order 2020-02 to be co-terminus with the Joint Public Health Order 2020-03; and,

**WHEREAS**, the Council extended the Emergency Declaration to May 1, 2020, by its Resolution 2020-04; and,

**WHEREAS**, *Summit County Code* §5-4-6(A)(1) authorizes the enactment of “rules and regulations, or the temporary suspension of ordinances, rules or regulations when necessary to save human life and protect property for a period not to exceed seven (7) calendar days unless approved by the Summit County Council;” and,

**WHEREAS**, the emergency conditions continue to persist within the County; and,

**WHEREAS**, it is in the best interests of the health, safety, and general welfare of the public that the Emergency Declaration be extended.

**NOW, THEREFORE, BE IT RESOLVED** by the County Council, Summit County, Utah, as follows:

Section 1. Extension. The Declaration of Local Emergency, dated March 12, 2020, is hereby extended in duration until September 1, 2020. This resolution shall be referred to herein as the "Local Emergency Extension Resolution."

Section 2. Special Event Permits. No Special Event Permits shall be issued by Summit County until September 1, 2020.

Section 3. Publication. This Local Emergency Extension Resolution shall be on file for public inspection with the Summit County Clerk.

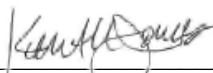
Section 4. Notice to Governor. A copy of this Local Emergency Extension Resolution shall be sent to the Office of the Governor of the State of Utah.


Effective Date: May 1, 2020.

PASSED, APPROVED AND ADOPTED this 29<sup>th</sup> of April, 2020.

SUMMIT COUNTY COUNCIL

ATTEST:

  
\_\_\_\_\_  
Kent Jones  
County Clerk

By:   
\_\_\_\_\_  
Doug Clyde  
Chair

APPROVED AS TO FORM:

*David L. Thomas*  
\_\_\_\_\_  
David L. Thomas  
Chief Civil Deputy





which establishes a color-coded health guidance system. This system consists of four levels: High Risk (red), Moderate Risk (orange), Low Risk (yellow), and New Normal (green).

The SCHO has determined that health data is sufficient to begin a transition in Summit County (the “**County**”) from the Urgent Phase into the Stabilization Phase and lifting the Stay-at-Home Order.

In issuing this Joint Public Health Order 2020-05 (this “**Order**”), the County has utilized the Utah Leads Together Plan as its baseline for Social Distancing Protocols (defined below), Mandatory Business Practices (defined below) and Business Specific Protocols (defined below).

The County formed a Stabilization Working Group to enlist businesses and industries within the County to assist it in developing appropriately tailored Business Specific Protocols for each individualized business sector within our community.

On April 28, 2020, the County applied to the Utah Department of Health for approval of this Order and any state required exceptions necessitated by such (the “**County’s Application**”).

On April 29, 2020, the Governor issued his executive order (i) adopting the Utah Leads Together Plan as a statewide order, and (ii) reducing the risk level statewide to “Orange” (the “**Governor’s Executive Order**”).

Pursuant to Utah Code §53-2C-103 (SB 3004), on April 29, 2020, after receiving a favorable recommendation from the Utah Department of Health on the County’s Application, the Governor granted the County an exception from the Governor’s Executive Order.

**THEREFORE, PURSUANT TO UTAH CODE §26A-1-114, UTAH CODE §17-50-302, SUMMIT COUNTY CODE §5-4-6, AND SUMMIT COUNTY CODE OF HEALTH §1-1-10(b), BE IT HEREBY ORDERED BY RICHARD C. BULLOUGH, PHD, SUMMIT COUNTY HEALTH OFFICER, THE SUMMIT COUNTY COUNCIL, AND THOMAS C. FISHER, SUMMIT COUNTY MANAGER, IN CONSULTATION WITH THE SUMMIT COUNTY BOARD OF HEALTH, AS FOLLOWS:**

**Section 1. Purpose.** The intent of this Order is to lift the Stay-at-Home Order in a manner so as to allow a lessening of regulations on individuals and the gradual normalization of business and commerce, while at the same time continuing to require Social Distancing Protocols (defined below) so as to prevent the spread of the COVID-19 coronavirus. All provisions of this Order shall be interpreted to effectuate this intent.

**Section 2. Stay-at-Home Order Lifted.** The Stay-at-Home Order is hereby rescinded and replaced in its entirety by this Order. Consistent with the Governor’s Executive Order, Summit County hereby transitions to the Stabilization Phase, Moderate Risk (Orange).

Section 3.     **Social Distancing Protocols.** All individuals currently living within Summit County, Utah, to the maximum extent practicable, are directed to engage in the following practices:

- Stay at home as much as possible.
- Work from home whenever possible.
- Vulnerable individuals (aged 60 and older, individuals who are immunocompromised or have underlying health conditions) should follow the guidance set forth by the Centers for Disease Control and Prevention (“**CDC**”) and take enhanced precautions.
- Encourage socializing by phone and video chats.
- Individuals who are exhibiting symptoms of COVID-19 (cough, fever, shortness of breath) must wear a non-surgical mask or face covering that completely covers the nose and mouth whenever possible.
- It is recommended that all residents wear a non-surgical mask or face covering that completely covers the nose and mouth whenever possible in public settings where other social distancing measures are difficult to maintain.
- Avoid visits to hospitals, nursing homes, and other residential care facilities.
- Self-quarantine for fourteen (14) days after being exposed to an individual confirmed to have COVID-19.
- Engage in appropriate social distancing, including:
  - maintaining a 6-foot distance at all times from other individuals when in public;
  - not shaking hands with other individuals;
  - not visiting friends or family without urgent need;
  - not attending any gathering in excess of twenty (20) people, except for members of the same household or residence.
- Follow strict hygiene standards, including:
  - washing hands frequently with soap and water for at least 20 seconds;
  - using hand sanitizer frequently;
  - avoiding touching your face;
  - covering coughs or sneezes (e.g., into the sleeve or elbow, not hands);
  - regularly cleaning high-touch surfaces (e.g., buttons, door handles, counters, light switches)

- following any other standards promulgated by the CDC, the Utah Department of Health, and the Summit County Health Department (“**Health Department**”).

**Section 4. Mandatory Businesses Practices.** All businesses and establishments shall, to the greatest extent possible, comply with the following requirements:

- Ensure the safety of your building water system and devices after a prolonged shutdown by following the CDC Guidance for Building Water Systems found at <https://www.cdc.gov/coronavirus/2019-ncov/php/building-water-system.html>
- Identify a workplace coordinator who will be responsible for COVID-19 issues and their impact in the workplace.
- Provide signage at each public entrance to inform all employees and customers that they should:
  - Avoid entering if they have a cough, fever, or feel generally unwell.
  - Maintain a minimum of six (6) feet distance.
  - Sneeze/cough into a cloth or tissue.
  - Not shake hands or engage in any unnecessary physical contact.
  - Wear face coverings.
- Ensure adequate air circulation and post tips on how to stop the spread of germs.
- Discourage workers from sharing resources or other work tools and equipment, when possible. If not possible, sanitize tools and equipment after use and before sharing with a new user.
- Establish an emergency communication plan with key contacts and backups, chain of communications, and processes for tracking and communicating; share the response plan with employees and communicate expectations.
- Ensure every employee’s contact numbers and emergency contact details are up to date; ensure a plan is in place to reach employees quickly.
- Encourage digital files rather than paper formats (e.g., documentation, invoices, inspections, forms, agendas).
- Educate workforce about the threat of the pandemic, what the business is doing, and what they should do to protect themselves and their families.

- Review the CDC's business checklist.
- Consider what reserve supplies might be necessary to stockpile (e.g., cleaning supplies, gloves or other protective equipment, "to-go" containers).
- Plan for the possibility of interruptions to water or power that might force business closure.
- Establish a list of truly essential tasks and employees critical to business continuity.
- Employee Screening: Management shall and must ensure, on a daily basis and at the beginning of each shift, that no employee who presents symptoms of illness consistent with COVID-19 will be permitted to work. Where temperature checks are required, a fever is defined as 100.4°. Employees who are sick or who appear to have symptoms will be separated from other employees and customers immediately and sent home. A log must be kept of these daily checks and made available for inspection by the Health Department. Immediately clean and disinfect areas the sick employee visited. If an employee is confirmed to have COVID-19, employers should inform fellow employees while maintaining confidentiality; fellow employees should self-monitor for symptoms for fourteen (14) days.
- Train managers/leadership to spot symptoms of COVID-19 and to be clear on relevant protocols.
- Employees and customers should not congregate in groups.
- Enable employees and volunteers to follow the directives for all individuals, as described in the Social Distancing Protocols (e.g., by providing hand soap, hand sanitizer, or sanitizing wipes).
- Implement protections for elderly employees and other vulnerable employees who may be at higher risk of suffering extreme illness from COVID-19 by minimizing face-to-face contact with high-risk employees and volunteers, or assigning work tasks to high-risk employees and volunteers that allow them to maintain a distance of six (6) feet from other workers, customers and visitors, or to telework if possible.
- Recommend the implementation of flexible work hours (e.g., staggered shifts).

- Use online conferencing, email, or the phone instead of in-person meetings, even when people are in the same building.
- Allow as many employees as possible to work from home by implementing policies for teleworking and video conferencing.
- Reinforce key messages to all employees, including staying home when sick, using appropriate cough and sneezing etiquette, and practicing appropriate handwashing.
- Perform frequent and enhanced environmental cleaning of commonly touched surfaces, such as workstations, countertops, railings, door handles, doorknobs, break rooms, bathrooms, and common areas. Keep a logbook of cleaning regimen. Those cleaning should:
  - Wear gloves.
  - Clean surfaces with soap and water if dirty before disinfecting.
  - Use EPA-registered household disinfectant, diluted bleach, or alcohol solutions.
- For businesses that serve the public, designating with signage, tape, or other means six-foot spacing to ensure employees and members of the public maintain appropriate social distancing, including but not limited to when customers are standing in line.
- Encourage contactless pay options. Businesses that must accept cash, checks, or credit cards will use cleansing measures between transactions, including any best practices issued by the Health Department. Cash transactions are strongly discouraged, but not prohibited.
- Hand sanitizer and/or sanitizing products will be readily available for employees and customers throughout the business, facility, venue or site.
- Management will provide Personal Protection Equipment (PPE) to employees. PPE should not be shared and should be disposed of properly. After using gloves, employees should wash their hands.
- Provide disposable wipes or a suitable alternative as recommended by the CDC or the Health Department, such as bleach spray and rag, so that commonly used surfaces can be wiped down by employees before each use; provide no-touch trash bins.

- Post online or by other means whether a facility is open for business and/or how to contact a facility or obtain services by remote means.
- Implement social distancing (six feet) measures in communal areas of the establishment.
- Members, guests, patrons, or customers who present symptoms of illness consistent with COVID-19 will be excluded from the establishment.

**Section 5. Businesses and Organizations; Specific Business Restrictions and Limitations.**

- A. Businesses and Organizations. Unless closed pursuant to Section 6, all open businesses and organizations will comply with the Mandatory Business Protocols in Section 4, and may be required to comply with an additional layer of protocols under the Business Specific Protocols in accordance with Section 5(B).
- B. Specific Business Restrictions and Limitations (“**Business Specific Protocols**”).
1. **Building and Construction**. The following restrictions and limitations will apply to all commercial and residential building and construction work sites within Summit County:
    - Management will instruct all employees to clean their hands often with an alcohol-based hand sanitizer that contains at least 60% ethyl alcohol, or wash their hands with soap and water for at least 20 seconds. Soap and water should be used preferentially if hands are visibly dirty. Use of pressurized air or water sprays, for the purpose of handwashing/ disinfecting, that may result in the generation of bioaerosols, will be avoided.
    - Management will provide soap and water and/or alcohol-based hand rubs on the job site, and will ensure that adequate supplies are maintained. Place hand rubs in multiple locations to encourage hand hygiene.
    - Employees should wear a non-surgical mask or face covering that completely covers the nose and mouth whenever possible.
    - Employees will utilize disposable gloves where appropriate. Management will instruct employees to wash hands after removing gloves.

- Management will disinfect reusable supplies and equipment twice daily, at the beginning of the morning shift and at lunchtime.
  - Management will identify specific locations and practices for daily trash disposal, such as paper, disposable hand towels, food containers, etc. All job site trash must be removed or deposited in a dumpster daily. No-touch trash bins will be utilized. Management will instruct workers responsible for trash removal in proper PPE/hand washing practices.
  - Management will provide routine environmental cleaning (doorknobs, keyboards, counters, and other surfaces).
  - Employees will not use a common water cooler. Management will provide individual water bottles or instruct employees to bring their own.
  - Management will instruct employees to change work clothes upon arriving home; and wash clothes in hot water with laundry sanitizer.
  - Where possible, management will not stack trades (authorizing multiple trades to work in same area at same time).
  - Common restroom facilities will be sanitized twice a week.
  - In-person construction site meetings involving more than ten (10) individuals can be conducted via Zoom or similar platforms. In-person construction site meetings involving ten (10) or fewer individuals will be conducted pursuant to Social Distancing Protocols.
  - The general public or other non-construction patrons will not be permitted on job sites unless expressly permitted by property owner, or site superintendent. Such permitted individuals will be escorted at all times by the site superintendent, or his/her designee, and abide by all protocols in this section.
2. **Salons.** All hair salons, nail salons, beauty shops, cosmetology salons, esthetician salons, advanced practice esthetician salons, eyelash salons, barber shops, and tanning salons will comply with the following restrictions and limitations:



- All personal hygiene businesses are required to get a certification from the Health Department specifically for COVID-19 protocols and to display that certification where the public and health inspectors can see it.
- All employees will wash their hands frequently throughout the business day.
- Sanitizer will be available at each workstation, including styling, shampoo, pedicure, eyelash, nail, drying stations, and throughout the establishment. All establishments will review CDC guidelines for sanitation and adhere to the use of suggested products/methods.
- All lobbies and waiting areas will be closed to clients, patrons, and customers. All check-in procedures will occur prior to the client entering the facility.
- Social distancing (minimum of six feet) will be implemented between workstations. “Workstation” is defined as the entire space used by clients, patrons, customers, and cosmetologist to provide services. The parameter of each individual workstation will be separated by at least six (6) feet.
- All materials, tools, chairs, supplies, and equipment will be sanitized consistent with standards issued by the Health Department and the CDC after serving each client, patron, or customer. Capes, gowns, towels, sheets, table and pillow coverings, and any other porous materials will not be reused between unique users without laundering. Magazines, newspapers, books and other porous materials are prohibited from being in the establishment.
- Lobbies and establishments will be cleaned frequently.
- Employees, clients, patrons and customers are required to wear a non-surgical mask or face covering that completely covers the nose and mouth whenever possible. Services that cannot be performed without masks or face coverings must not be rendered (e.g.; beard trimming, waxing, piercing services).
- All employees will wear protective gloves while performing business services and practices. When performing services where gloves would be restrictive and hinder the performance of a service (i.e.; haircutting and styling, facials, waxing), gloves can be omitted after thorough hand washing as outlined in CDC guidelines. Gloves will be changed between each client, patron, or customer.

- No walk-ins allowed; service by appointment only. Appointments must be scheduled with sufficient time allowed to disinfect all procedure surfaces between services. Only clients, patrons, and customers with appointments may enter the facility. No children/minors, visitors or additional accompanying parents or guests will be allowed. For minors under the age of eight (8) who require a parent or guardian, or any unique situation that requires a parent or guardian to accompany a minor or adult, an appoint must be scheduled at a time when no other unnecessary staff/service providers, clients, patrons, or customers are present. A minimum of six (6) feet distance must be maintained between staff and parent or guardian while services are being performed.
- Every person must wash/sanitize their hands upon entering the facility. Each establishment is responsible for posting this protocol in an obvious and visible location.
- Power Dip nail treatments are prohibited.
- High risk activities, such as facials or waxing, should be suspended.
- Use of locker rooms, steam rooms, pools, hot tubs, and other wet areas are prohibited.
- In lieu of Employee Screening, sole proprietors will be required to take and record their temperature twice daily and keep a log of the results.
- Management will maintain a log of appointments with client, patron, and customer contact information to assist with contact tracing efforts.
- Clients, patrons and customers will be screened by phone and/or in-person prior to entering the establishment. If they are exhibiting any of the following symptoms, the client, patron or customer will be rescheduled to the later of fourteen (14) days, or three (3) days following the elimination of symptoms:
  - Cough
  - Shortness of Breath
  - Chills
  - Fever

3. **Physical Therapy Clinics and Services.** All physical therapy clinics and services will comply with the following restrictions and limitations:
- Screening
    - Patients will be screened by phone and/or in-person prior to entering the clinic or facility. If they are exhibiting any of the following symptoms, the patient shall be rescheduled to the later of fourteen (14) days, or three (3) days following the elimination of symptoms:
      - Cough
      - Shortness of Breath
      - Chills
      - Fever
    - All patients will have their temperatures taken as part of the screening for fever.
    - Management will maintain a log of appointments with patient contact information to assist with contact tracing efforts.
  
  - Spacing and Distancing
    - Lobbies and waiting areas will be limited capacity, such that social distancing is maintained.
    - All non-remote care must be one-on-one. Group therapy sessions are prohibited.
    - Patient spacing must be actively monitored.
    - Vendors, observers, and other non-essential individuals are prohibited from entering the clinic or facility.
    - Social distancing (minimum of six feet) will be implemented between workstations. “**Workstation**” is defined as the entire space used by patient and therapist to provide therapy. The parameter of each individual workstation will be separated by at least six (6) feet.
    - When the patient is a child, only one adult is permitted to accompany the child. If aerosols are generated during treatment, strongly encourage the adult to wait outside the examination room.
    - A plexiglass barrier will be installed at the front desk to shield employees from patients.
  
  - Hygiene
    - Handwashing and hygiene protocols must be implemented with clinical and support staff.
    - Mandatory hand washing or sanitizing upon patient arrival and departure must be implemented.

- All tools, chairs, and supplies will be sanitized consistent with standards issued by the Health Department after serving each patient.
  - Lobbies, waiting areas, and clinics will be cleaned frequently.
  - All children’s play areas, toys, magazines, and similar items must be removed from waiting areas and lobbies.
- Employees and patients must wear a non-surgical mask or face covering that completely covers the nose and mouth whenever possible. Management will provide non-surgical masks or face coverings for each patient.
  - Lobbies, waiting rooms, bathrooms, and other common areas shall be cleaned throughout the day and at beginning and end of each business day.
  - Personal clothing should be changed when leaving the facility setting based upon risk posed by patient care.
  - Gowns or shoe coverings are not necessary, but would provide added protection.
  - Face shields or goggles that seal around the eyes must be worn when performing any treatment that creates an aerosol.
  - All universal precautions will be strictly maintained.
  - All employees will wear protective gloves, which will be changed between each patient.
4. **Child Day Care Centers and Facilities.** All child day care centers and facilities will comply with the following restrictions and limitations:

- General Standards for Operation
  - Management will conduct a health and wellness check of children and staff upon their arrival at the center or facility each day, which include temperature checks. Health and wellness checks are a great way for providers to take a few moments to notice how each child or staff member is looking, feeling, and acting when they first arrive. A child or staff member who presents signs of illness shall be sent home. Upon arrival, all children and staff shall wash their hands with either soap and water or hand sanitizer.
  - Pick up/drop off will occur at the front door. Parents or guardians will maintain six (6) foot social distancing at pick up/drop off. Only one family is allowed at center or facility entrance at any one time.
  - No parent/guardian or other person not associated with the center or facility will be allowed into the center or facility.

- Parents/guardians will be required to acknowledge in writing receipt and adherence to a "Voluntary Compliance Protocol" and daily "COVID Screening and Voluntary Acknowledgement" (the "Acknowledgement"). Acknowledgements shall be available for inspection by the Health Department upon request.
- All personal items of a child (including clothing, blankets, toys, lunch or snack containers) and staff will be cleaned before a child or staff member enters the center or facility.
- If a child has been attending another center or facility within the last fourteen (14) days, it is within the discretion of the administrator of the center or facility to allow the child to attend, ensuring no exposure at the "other" center or facility occurred or was reported.
- Cleaning logs will be maintained by the center or facility, documenting cleaning of a child's personal items (clothing, lunch items, blankets, toys, books, etc.). Staff will keep a log of on-site cleaning and washing. This log will be made available to the Health Department upon request.
- Meals and snacks will be served using disposable plates, utensils, and cups/water bottles. All food and drink items will be provided by the parent or guardian, using disposable packaging. Gloves and non-surgical masks or face coverings will be worn by staff when serving a child food. No food preparation will occur.
- Parent or guardian will be responsible for placing sunscreen on children and providing pre-cleaned personal items for the child, unless cleaning is available at the center or facility.
- Centers and facilities with laundries will create and maintain a log of daily laundered items. This log will be made available to the Health Department upon request.
- All common areas will be cleaned after each use or every two (2) hours as necessary; cleaning logs will be created and maintained. This log will be made available to the Health Department upon request.
- Restrooms will be cleaned and sanitized after each use or every two (2) hours - logs will be created and maintained by the center or facility, and will be made available to the Health Department upon request.
- Toys/books/other learning activities will be limited to a manageable size and cleaned after each use. Outdoor play areas will be cleaned and disinfected after each group use.
- Outdoor play areas will be limited to twenty (20) children/adults (1 adult, 9 children or ratios consistent with Child Care Licensing).

- Eating, learning and other activities will impose six (6) foot social distancing as best as possible and limit each room to twenty (20) children/adults (adhering to proper ratios).
- Cots/mats and other resting equipment will be separated by six (6) feet and children placed head to toe.
- A child's personal items will be stored separately and washed after each day.
- Children will wash their hands every two (2) hours. Hand sanitizer will be made available to children.
- Management will restrict groups of individuals within the center or facility to twenty (20) or less. These groups include children and staff. A provider can allow more than twenty (20) individuals in the center or facility if each group of twenty (20) individuals or less is in a room separated by full walls from the other group(s).
- Management will conduct daily health and wellness checks on all children and staff throughout the day. Having conducted a health and wellness check upon arrival will make it easier to notice if the child's or staff member's behavior or symptom's change throughout the day.
- Management will ensure that any visitors to any center or facility, including families seeking care, wash their hands with soap and water or an alcohol-based hand sanitizer before touching any center or facility surface.
- Limit mixing the groups of children (keep in separate rooms, allow on the playground at different times, etc.).
- If there is a confirmed case of COVID-19 among staff, facility must close immediately and alert the Health Department.
- Staff must clean and disinfect frequently touched objects and surfaces. More specifically, staff must ensure that surfaces and areas that are used and touched often are cleaned and sanitized after each use (i.e.; shared toys, keyboards, desks, and remote controls), or at least twice a day (i.e.; doorknobs, light switches, toilet handles, sink handles, and counter tops).

5. **Food Services.** All restaurants, food trucks, coffee shops, bars, taverns, nightclubs, C-stores which serve food, and caterers will comply with the following restrictions and limitations:

- General Standards for Operation for all Food Services
  - All food services are required to get a certification from the Health Department specifically for COVID-19 protocols and to display that certification where the public and health inspectors can see it.

- Cleaning supplies must be single use (paper towels, disposable mop heads, etc.) or laundered between every use (dishtowels, mop heads, etc.).
- Hand sanitizer will be available immediately outside of bathrooms.
- Restaurants, Food Service, Food Trucks, Coffee Shops, Bars, C-stores, and Taverns, including lobbies and waiting areas, must close for cleaning in the morning, between shifts (or every four (4) hours), and evening. Cleaning and disinfecting includes all high-traffic areas, tables, chairs, door handles, phones, floors, restrooms, and any high-touch surfaces.
- Staff who handle cash payments will not be involved in the preparation, handling, or delivery of food.
- Staff must clean and disinfect frequently touched objects and surfaces. More specifically, staff must ensure that surfaces, table tops, and areas that are used and touched often are cleaned and sanitized between use by members, guest, patrons and customers.
- Employee Screening will include taking the temperatures of all employees.
- Restaurants
  - Dine-in restaurant and food service is permitted.
    - Limit tables to groups of six (6) (unless members of the same household). Adjacent booths can be occupied if there is a minimum 5-foot (measured from the seat) effective barrier between booths. If a 5-foot barrier is absent, booths may be occupied if every other booth is skipped.
    - Small private events of twenty (20) people or less with reservations can only be accommodated by establishing a minimum 10-foot distance (or physical barrier) between the group and general public.
    - Maintain at least six (6) feet between seated customer groups, whether indoors or outdoors. Either move tables or mark off tables not to be used.
    - In waiting areas, a 6-foot distance must be maintained between parties or household groups, whether indoor or outdoor. Waiting areas will have floor markers to indicate proper spacing. Where 6-foot distance cannot be maintained, indoor group waiting areas are prohibited. Weather permitting, food establishments may use outdoor waiting areas with signs and other reminders for groups to maintain 6-foot social distancing. Consider using call-ahead or reservation systems to minimize wait times and stagger arrivals.
  - Upon entry, hosts point customers to signage that includes the following information:
    - Remind individuals from separate parties to stand at least six (6) feet apart.

- Outlines symptoms and encourages that if the customer, or someone they live with, has experienced COVID-19 symptoms, to please order takeout instead; and
  - Recommendation for high-risk individuals to order takeout/delivery instead of dining in for the protection of that individual.
- When possible, hosts should open doors for customers to help prevent congregating of customers at the entrance, show required signage, and explain operating practices.
- Employees who interact with customers or ready-to-eat foods must wear nonsurgical masks or face coverings at all times and perform hand hygiene between interactions with each table.
- Do not place utensils on table until customer is seated.
- Staff will avoid touching items that have been placed on the table (menus, plates, utensils, pens, cups, etc.).
- All customer tables and chairs must be disinfected between each customer or group. A dedicated staff member (not a server or other food handler) must clear and disinfect tables. Do not place tableware until customers are seated. Disposable single-use menus are strongly encouraged. If used, permanent menus must be disinfected after each use.
- Close restaurant for cleaning and disinfecting in the morning, afternoon, and evening. Cleaning and disinfecting includes all tables, chairs, door handles, floors, bathrooms, and any high-touch surfaces.
- Staff must use gloves when handling ready-to-eat foods (including ice). Gloves are not required when handling foods that have yet to be cooked.
- Playgrounds inside or outside of restaurants will remain closed.
- Buffet and self-serve restaurants will provide utensils, cups, plates and other service items only from the counter where food is ordered. None of these items will be accessible to the public. Buffet style restaurants will provide servers who will serve the meals from buffet to limit exposure. Customers will not be allowed within six (6) feet of the food serving area. Floor must be marked or barriers provided.
- All shared outside dining areas will remain closed.
- Customers at a restaurant bar must not be seated within six (6) feet of other customers, nor any taps, food, clean glasses, or the bartender work area (“the well”). Seats and stools in this area must be removed or unoccupied at all times if this 6-foot requirement cannot be met.
- Condiments must not be kept on tables, but rather given to guests upon request. Condiment containers must be disinfected after each use. Self-serve condiment stations must be monitored and disinfected at least every thirty (30) minutes.



- Self-serve drink stations must be monitored and sanitized at least every thirty (30) minutes, especially surfaces where customers touch. Cups, lids, and straws must be given to customers by food employees. Individuals may not bring their own reusable items (mugs, cups). Single-use items (including to-go boxes, pizza boxes, paper cups, and any other paper product that touches food) should be treated like ready-to-eat food and therefore should not be handled with bare hands by employees.
- Disinfectants/sanitizers effective against SARS-CoV-2 virus must be available. Chlorine bleach at 100-200ppm is recommended. Use disposable cleaning supplies if possible (towels, mop heads, etc.). Other supplies must be laundered for use each day.
- Employees in kitchen areas should practice social distancing whenever possible. Workstations should be arranged so that employees do not face one another. Non-surgical masks or face coverings are encouraged and training provided on the how to appropriately wear them. Whenever possible, staff should be separated into cohorts to minimize interaction between groups. All existing food regulations still apply.
- Hand sanitizer must be available at all customer entrances and outside of public restrooms. Hand sanitizer must not replace hand washing by food handlers.
- Restaurants will not operate if PPE, EPA- approved disinfectants and sanitizer, soaps, and other necessary cleaning supplies are not available.
- Take-out, carry-out, or drive-thru food service is permitted.
  - Take-out orders are encouraged. Take-out customers may order inside the establishment as long as the lobby or waiting area has floor markers to keep customers at least six (6) feet apart. Management must actively manage lobbies and waiting areas so as to ensure that Social Distancing Protocols are maintained at all times.
  - Carry out services will comply with the Third-Party Food and Grocery Delivery Service protocols.
  - To-go boxes, pizza boxes, paper cups, and any other paper product that touches food must be treated as food. Gloves will be worn by staff when handling.
- Bars, Taverns, and Nightclubs
  - Comply with all Restaurants protocols.
  - Food and beverage service at tables only.
  - Customers hold ID's for scanning or place them on a flat surface and step away. The ID is to be retrieved by the customer.

- The following services are prohibited during this the Orange stabilization phase:
  - Over the bar service.
  - At-the-bar seating.
  - Live vocal performances.
  - Multi-member entertainment groups.
  - Use of games/billiards/darts/etc.
- Waiting areas cued six (6) feet from each group.
- Expand outdoor seating capacity, if possible, while observing gatherings of no more than twenty (20) allowed and following all Social Distancing Protocols.
- Staff is responsible for ensuring customers are not congregating for any reason in or around the nightclub or bar. Customers shall not mingle with other customers not in their group.
- Restrict table to table contact.
- Reservations encouraged for prompt entrance and seating.

6. **Third-Party Food and Grocery Delivery Service.** All third-party food and grocery delivery service will comply with the following restrictions and limitations:

- “No contact delivery,” which means no person-to-person contact.
- Each employee who performs deliveries will have a current *ServSafe* Delivery COVID-19 Precautions online training with a copy of the Record of Training on file with the business and available upon request by the Health Department.
- Management will register their business and receive approval by the Health Department before conducting third-party food and grocery delivery services. Registration is free.
- Management will and must ensure, on a daily basis and at the beginning of each shift/rotation, through a symptom check, that no employee who presents symptoms of illness will be permitted to work. A written log shall be kept of ill employees. Said log will be made available to the Health Department upon request.
- All payments will be on-line or through telephonic credit card transaction. Employees will not handle cash or credit cards. **Tips should be added via phone or online. Cash tips should not be accepted.**

- All food will be packaged in a sealed package or container to ensure (1) that food has not been opened, and (2) that there has been no tampering with the food.
  - Food Delivery:
    - Food should be transported in a cooler, insulated bag or other container that can be sanitized between deliveries.
    - Delivery containers should be maintained at appropriate temperatures (FDA Food Code 3-501.16)
    - Employees who prepare the food are separate from the employee delivery food items.
    - Social Distancing Protocols will be followed. Package should be left on doorstep followed by a text or phone call alerting delivery has been completed.
  - Employees who perform deliveries must be gloved and wear a non-surgical mask or face covering that completely covers the nose and mouth during the “no contact delivery” transaction.
  - Prior to/Following Each Delivery:
    - All delivery containers will be sanitized.
    - Delivery vehicle touch points including but not limited to keys, steering wheel, doorknobs, gear shifts, radio knobs, cell phones/GPS will be sanitized prior to and following each delivery.
    - Management will inspect delivery vehicle at the beginning of each shift to ensure sanitary conditions.
7. **Long Term Care Facilities.** Access to long-term care facilities will be limited to close family relatives and facility staff. Long-term care facilities will generally conform to the guidance issued by the Centers for Medicare and Medicaid Services, Center for Clinical Standards and Quality.
8. **Hospitals, Health Care Services, and Social Assistance Services.** All hospitals, health care services, and social assistance services will comply with the following restrictions and limitations:
- Hospitals
    - Comply with the standards and protocols approved by the Utah Hospital Association in consultation with the Utah Department of Health.

- Health Care Services (Medical and Dental)
  - Service providers should use telehealth whenever possible.
  - Dentist should follow the guidelines established by the American Dental Association and the Utah Dental Association.
  - Screening
    - Patients will be screened by phone and/or in-person prior to entering the clinic or facility for symptoms of COVID-19, which include the following:
      - Cough
      - Shortness of Breath
      - Chills
      - Fever
    - All patients will have their temperatures taken as part of the screening for fever.
    - All patients who are symptomatic for COVID-19 must be segregated from those patients who are non-symptomatic.
    - Management will maintain a log of appointments with patient contact information to assist with contact tracing efforts.
    - Only patients with an appointment may enter the facility.
  - Spacing and Distancing
    - Lobbies and waiting areas will be limited capacity, such that social distancing is maintained.
    - Patient spacing must be actively monitored.
    - When the patient is a child, only one adult is permitted to accompany the child. If aerosols are generated during treatment, strongly encourage the adult to wait outside the examination room.
    - A plexiglass barrier will be installed at the front desk to shield employees from patients.
  - Hygiene
    - Handwashing and hygiene protocols must be implemented with clinical and support staff.
    - Mandatory wash in and wash out of all treatment rooms.
    - All tools, chairs, and supplies will be sanitized consistent with standards issued by the Health Department after serving each patient. A cleaning log will be maintained and updated.
    - Alcohol-based sanitizer and/or soap and water must be available in all clinics and facilities for patient and employee use.

- All children's play areas, toys, magazines, and similar items must be removed from waiting areas and lobbies.
- Employees and patients must wear a non-surgical mask or face covering that completely covers the nose and mouth whenever possible. Management will provide a mask or face covering to each patient.
- All employees will wear protective gloves, which will be changed between each patient.
- Lobbies, waiting rooms, bathrooms, and other common areas will be cleaned throughout the day and at beginning and end of each business day.
- Personal clothing should be changed when leaving the facility setting based upon risk posed by patient care.
- Gowns or shoe coverings are not necessary, but would provide added protection.
- Face shields or goggles that seal around the eyes must be worn when performing any treatment that creates an aerosol.
- All universal precautions will be strictly maintained.
- Social Assistance Services
  - General Standards for Operation
    - Workspaces for staff and volunteers, as best as possible, should allow for social distancing at a minimum of six (6) feet.
    - Waiting room will be limited capacity such that social distancing, at a minimum of six (6) feet, is maintained.
    - All staff and volunteers must wash hands regularly.
    - Individuals will wash hands after bathroom breaks, sneezing or coughing and before and after any kitchen activities.
    - Individuals will wear non-surgical masks or face coverings, including staff, volunteers, and visitors/clients/participants.
    - Mandatory wash in and wash out of all treatment rooms.
    - Lobbies and waiting rooms, bathrooms, and other common areas will be cleaned throughout the day and at beginning and end of business day.
    - Hand sanitizer will be available in the waiting room and at the clinic reception desk.
    - Hand sanitizer and masks or face coverings will be placed, with signage, at the building entrance.
  - Staff
    - Staff and volunteers will wear non-surgical masks or face coverings, and gloves when appropriate.

- Staff will screen individuals entering the facility.
- Staff will screen every person dropping off or picking up individuals to/from a facility.
- All surfaces, bathrooms and equipment will be cleaned or wiped down every sixty (60) minutes and a cleaning log will be updated and maintained.
- Staff will continue to offer virtual means for client appointments via phone or computer.
- Participants
  - Individuals will not be allowed to drop off or pick up participants with other individuals (6-foot social distancing at entrance).
  - Individuals will wear a non-surgical mask or face covering when dropping off participants.
  - Individuals testing positive for COVID-19 or having symptoms consistent with COVID-19 will not be allowed into the facility or within six (6) feet of the facility.
  - All personal items will be disinfected prior to individuals bringing them to the facility.

9. **Outdoor Recreational Facilities.** All outdoor recreational facilities, including resorts, golf, trails, trailheads, athletic and sports fields, park facilities and complexes, equestrian facilities, basketball, tennis, and multi-sport game courts, rentals, outfitters, and guides, swimming pools, hot tubs, and youth summer camps, activities, and programs will comply with the following restrictions and limitations:

- Park Facilities and Complexes, Trails, Trailheads, Athletic and Sports Fields, Equestrian Facilities, Swimming Pools, and Basketball, Tennis, and Multi-Sport Game Courts
  - Assign a staff member as an COVID-19 Safety Officer who will ensure that sanitizing product, proper signage, proper behavior and activities going on are in compliance with all public health orders.
  - No congregating on recreational trails, trailheads, parking areas, and other outdoor spaces in numbers greater than twenty (20) people.
  - Individuals will not engage in close contact or team sports. Sports fields and courts may remain open, but should only be used individually or by members of the same household.
  - Add additional activity times to spread guests out/work with other vendors. Inform public of high use times/help them spread out. Staff will provide direction during high traffic times.

- Field staff will start and end their day at different locations if possible. Allow office tasks to be done remotely.
- Do not share staff vehicles or tools, and disinfect before/after use.
- Issue refunds to patrons having symptoms, without penalty.
- Public water fountains will be turned off. Encourage public to bring their own water.
- Leave all gates in open position when courts/areas are open to the public.
- Provide signage and education at trailheads/ park facilities/ public boat launches. A facility will be closed if the following posted rules are not followed:
  - Playgrounds will remain closed until we have moved out of stabilization phase.
  - Play for pickleball and tennis at limited capacity (i.e.; singles-only).
  - Anyone waiting to play must wait outside the area and practice appropriate social distancing.
  - Server to use his/her own ball.
  - Fields to be open at limited capacity to groups of twenty (20) or less that are maintaining proper social distancing/sanitization practices.
  - Skate park to be open at limited capacity to groups of twenty (20) or less that are maintaining proper social distancing/sanitization practices.
  - Basketball courts open at limited capacity to solo basket shooting only at this time.
  - Dog parks will remain closed until staff is able to accommodate.
- Equipment rentals are suspended until staff can provide proper sanitization practices and approval is given by the Health Department. Require any equipment (i.e.; rackets, balls, cones, etc.), as well as hand sanitizer, to be provided by the patron.
- All equipment will be disinfected on a regular basis.
- Public restrooms will be cleaned 3x per day with sign warning patrons to use at own risk. A cleaning log indicating restroom was last cleaned shall be made available to the Health Department upon request.
- Equestrian -- only horse owner/trainer may saddle up, groom, handle or ride the horse. Barn groom-bays will be sanitized between uses. Use of another person's tack is prohibited.
- Swimming pools will be limited to 50% pool capacity, one swimmer per lane with no congregating on the pool deck at anytime.
- Leisure swimming pools will remain closed until otherwise allowed by the Health Department.
- Hot tubs will remain closed.

- Private clubs
  - Private clubs will not entertain gatherings over twenty (20) people. Where gatherings are permitted, clubs will ensure compliance with the Social Distancing Protocol.
  - All sign-ins shall be handled by a staff member (no sharing of pen and paper), and pre-communicate consequences to membership status for not following the rules.
  - Private clubs will encourage use of own equipment or purchase at low cost. Rentals will not be offered during the Orange stabilization phase.
  
- Golf
  - General Standards for Golf Course Operation
    - On-line time booking and prepayment is highly recommended.
    - Management will ensure tape line/physical indicators (6-foot minimum) and directional arrows guiding customers through the shop.
    - Credit cards/member account billing will be the recommended form of payment.
    - Appropriate communication will be sent out to members or customers on file explaining policies, procedures and expectations.
    - Management will provide staff with appropriate PPE (mask, gloves, and hand sanitizer).
    - Members will load their own bags on carts until further notice. Exceptions can be made, but only where staff has on appropriate PPE.
  
  - Golf Shops
    - Golf shops will remain open with a limit of one group (four customers) in the shop at any one time with social distancing cues/indicators present to encourage six (6) foot personal radius.
    - Doors will be left open or otherwise modified to reduce touching handles as much as possible (e.g.; slightly propped open during inclement weather). Handles will be disinfected regularly throughout the day.
    - Touch surfaces will be disinfected throughout the day and limited to the use of as few people as possible (counters, phones, etc.).
    - Merchandise for sale will only be handled by the staff. Shopping will be guided and customers will not be able to physically browse items for sale.
    - If requested, staff will give out scorecards and/or pencils during check-in process.
    - Rental clubs will be disinfected in front of the guest before use.



- There shall be either adequate social distancing or a physical plexiglass barrier between staff and customer.
- Practice Facility
  - Staff will not clean members' clubs.
  - Golf instruction will be conducted with at least six (6) between the instructor and student(s).
- Snack Shacks/F&B
  - Staff will wear appropriate PPE attire.
  - During operating hours an attendant will occupy the shack.
  - Staff will adhere to local F&B regulations.
- Golf Course
  - Touch points: flagsticks are fixed, rakes are removed, ball washers are removed, door handles are made redundant with foot holds or doors propped open.
  - Golf cars are available conditionally.
    - One ride and bag per cart (unless live in the same household).
    - Disinfect carts after each use (i.e.; backpack sprayer with disinfectant).
    - No scorecards on carts or pencils on carts (removed if left after completion of play).
    - Carts are staged at a minimum of six (6) feet apart.
    - Push/pull carts are disinfected before and after each use.
  - Restrooms
    - Disinfected regularly throughout the day.
    - Signage posted on restrooms disclosing that while they are cleaned throughout the day, they may still present a health risk,
- Practice Range
  - Range balls will be disinfected before staged on the range and after picked for the day.
  - Range set up promoting social distancing between members/customers minimum of six (6) feet between hitting stations.
  - Putting green targets are modified to be touchless and spaced for social distancing.
- Summer Youth Camps, Activities, and Programs
  - Groups will be restricted to twenty (20) individuals, unless a full wall can physically separate each group.

- Where a summer camp takes place at a larger facility (ski resorts, schools, recreational complex with both indoor and outdoor space) groups of twenty (20) individuals can be separated, utilizing both indoor and outdoor locations. Some of the schools and resorts have very large footprints to work within.
  - Limit mixing the groups of children (e.g. keep groups in separate rooms, allow on the playground at different times).
  - Take temperatures of all children upon arrival at the facility.
  - Children will be instructed on how to properly wash hands and be required to wash or sanitize hands routinely or every time an activity changes.
  - Alternating activities may be considered to maintain group spacing (one group doing one activity and the other group doing a different activity, then they switch and all surfaces are cleaned in between groups).
  - While eating lunch or during snack times, social distancing will be encouraged (eating lunch outside on the grass might be more conducive).
  - If lunch or snacks are provided by the camp, all recommended food service standards set forth in the Food Service Protocols will be followed.
  - Parent designated pick-up and drop-off areas will be implemented. If needed, alternating drop-off or pick-up times should be organized.
- Rentals, Outfitters and Guides
    - Guides and clients will ride in separate vehicles. Clients shall drive their own vehicles and meet guides at river parking lots or trailheads.
    - Guides who do not live together will ride in separate vehicles.
    - Social distancing will be maintained, when possible. The number of clients in the shop at any given time must be limited to maintain social distancing. If it is impossible to maintain social distancing, point of sale plexiglass barriers are required. Marking shall be placed to indicate six (6) foot spacing on the ground around the shop.
    - The use of non-surgical masks or face coverings by guides are required at point of sale, and should be worn in the field. Clients are encouraged to wear non-surgical masks or face coverings.
    - All types of tools and rental gear must be disinfected after each use, following CDC guidelines.
    - High traffic areas will be disinfected throughout the day, following CDC guidelines. Changing rooms will be cleaned and disinfected between use and multiple times throughout the day. Door handles and other frequently touched surfaces will be disinfected throughout the day.
    - All repair items will be disinfected prior to repair, and let dry before repair begins.

- Doors should be kept open when possible.
  - Soap, hand sanitizer and/or disinfecting wipes will be available in shops and on field trips.
  - Group numbers, including the guide, should adhere to public health orders for the current risk level. Single household groups are recommended.
  - Clients should be encouraged to provide their own beverages and foods for trips so there is no handing of prepared food by guides.
  - Any guided services or processes that cannot adhere to social distancing should at least have PPE in place.
  - Tours and lessons where social distancing cannot be achieved are discouraged.
- Resorts
    - Abide by and comply with the following:
      - Accommodations and Lodging Protocols
      - Arts and Entertainment Protocols
      - Building and Construction Protocols
      - Food Service Protocols
      - Indoor Recreational Facilities Protocols
      - Outdoor Recreational Facilities Protocols
      - Golf Protocols
      - Rentals, Outfitters, and Guides Protocols
      - Retail and Wholesale Trades Protocols
      - Summer Youth Camps, Activities, and Programs Protocols
      - Child Care Centers and Facilities Protocols
    - Resorts remain closed until May 15, 2020. Opening is subject to the approval of the Health Department.
    - Passive activities will adhere to a minimum of six (6) feet distances between patrons.
    - Athletic or moderate to high motion activities will adhere to a minimum of ten (10) feet between patrons.

**10. Indoor Recreational Facilities.** All indoor recreational facilities, including gyms, fitness centers, SPAs, exercise studios, health clubs, swimming pools, and hot tubs will comply with the following restrictions and limitations:

- Large Gyms and Fitness Centers (including Exercise Studios, Health Clubs, Swimming Pools and Hot Tubs)
  - Employee Screening will include temperature checks of all employees.

- Facilities will limit the number of patrons in the facility at one time to 1 person per 100 square feet. A maximum of twenty (20) people, including staff, per floor is allowed. Facilities may implement a reservation type system to ensure compliance with gathering requirements.
  - No sign-in sheets, touchpads, or touch surfaces required for entry.
  - Patrons will be required to maintain a social distance of ten (10) feet while exercising. Certain areas can be marked to delineate ten (10) feet boundaries.
  - High-risk individuals will be discouraged from using the facilities. If demand exists, facilities can create special times for such individuals.
  - Front entry and desk areas with markers to indicate proper social distance. Sneeze guards will be installed and touchless and online reservations and payments will be encouraged. Work areas will be wiped down at the end of every shift.
  - Employees must wear non-surgical masks or face coverings; patrons encouraged to wear non-surgical masks or face coverings whenever possible.
  - Hand sanitizer for patrons will be stationed throughout the facilities and sanitation supplies will be readily available near exercise machines and benches. Patrons will be required to wipe down equipment after each use. There will be increased staff monitoring of facilities to ensure compliance with all regulations and to help sanitize surfaces.
  - Weight and Cardio areas will be roped off to maximize separation and will be cleaned after each use.
  - Swimming pools will be limited to 50% pool capacity, one swimmer per lane with no congregating on the pool deck at anytime.
  - Leisure swimming pools will remain closed until otherwise allowed by the Health Department.
  - No team or group activities, except individuals within the same household.
  - Locker rooms and showers are closed.
  - Steam rooms, hot tubs, and dry saunas are closed.
  - Drinking fountains are limited to water bottle fill stations that require no touching.
  - Facilities will follow guidelines of sport specific governing bodies, related to COVID-19 if applicable.
  - Equipment given to patrons will be sanitized upon return and inventory will be rotated to limit turn over.
- Small Gyms and Fitness Centers (including Exercise Studios, Health Clubs, Swimming Pools and Hot Tubs)
    - Employee Screening will include temperature checks of all employees.

- Facilities will limit the number of patrons in the facility at one time to 1 person per 100 square feet. A maximum of twenty (20) people, including staff, per floor is allowed. Facilities may implement a reservation type system to ensure compliance with gathering requirements.
- Patrons are encouraged to bring own equipment needed for use. When public equipment is used, adequate disinfecting supplies will be available for patron use before and after, and staff will clean equipment after scheduled class.
- No sign-in sheets, touchpads, or touch surfaces required for entry.
- Strategic placement of equipment and markings of facilities spaced at least ten (10) feet apart.
- Limit use of only  $\frac{1}{3}$  of available equipment, floor taped for patron space placement.
- Signage will be posted explaining Social Distancing Protocols and prohibition on gatherings.
- Eliminate all retail sales or if allowed, follow retail trade protocols.
- Schedules classes in order to allow for cleaning and disinfection in between classes.
- Clearly marked entry and exit areas, use separate locations where feasible.
- Zero hands-on contact between staff/patron, and patron/patron.
- Management will provide updated participant waivers which include COVID-19 specific details including nonparticipation if symptomatic. Details to include acknowledgment of public restroom and shared equipment use.
- Consider establishing designated facility use times for “at risk” population.
- Establish rotation of shared equipment to allow for long periods of non-use.
- Water fountains are not available for use unless no touch options for refilling waterbottles is available.
- Weight and Cardio areas will be roped off to maximize separation and will be cleaned after each use.
- Swimming pools will be limited to 50% pool capacity, one swimmer per lane with no congregating on the pool deck at anytime.
- Leisure swimming pools will remain closed until otherwise allowed by the Health Department.
- No team or group activities, except individuals within the same household.
- Locker rooms and showers are closed.
- Steam rooms, hot tubs, and dry saunas are closed.
- Classes held outside are limited to a maximum of twenty (20) people, including staff, while observing all Social Distancing Protocols.

## 11. Funerals.

- Funeral homes are authorized to meet with families to make arrangements for final disposition, but should do so by telephone or remotely when possible. If funeral homes must meet with families, they should do so provided they practice social distancing consistent with the Summit County Health Department and CDC guidance.
- Individuals may attend funerals, viewings and/or graveside services, whether at a place of worship, funeral home, burial site, or other similar location, provided that the gathering consists of no more than twenty (20) attendees at one time (i.e.; shifts). The space utilized must allow for social distancing (six feet spacing between people). Venues should make accommodations for remote attendance, if possible, for others. Individuals who are at high risk from COVID-19 are strongly encouraged to attend remotely.
- Screen potential attendees for illness, symptoms and exposure to COVID-19 and ask that such persons not attend the service in person.
- Provide hand sanitizer and Kleenex. Ensure that restrooms are stocked with plenty of soap and disposable towels for handwashing and hand drying.
- Encourage families not to serve food and beverages before, during or after the service.
- Encourage families to scale back (or, ideally, eliminate) direct contact like handshakes, hugging, and kissing at the service or funeral.
- Ensure facilities are cleaned and sanitized regularly. Clean high traffic areas and parts of the facilities used most often (door handles, knobs, faucets, toilets, water fountains, as well as any surface that comes into human contact) following CDC cleaning and disinfection guidance.
- Plan a larger celebration of life at a later date.

## 12. Churches, Religious and Faith-based Organizations. All churches, religious and faith-based organizations will comply with the following restrictions and limitations:

- Encourage video conferencing of church and religious events.

- All clergy, staff, and members will wear non-surgical masks or face coverings when interacting or gathering in groups of less than twenty (20) individuals.
- Appointment only visitation and facility access, with screening of visitors for symptoms. Any regular sanctuary activities that are essential be completed by one person.
- All meetings will limit attendance to twenty (20) person threshold while observing Social Distancing Protocols. Minimize all group activities or facility rentals to those essential activities, while still observing Social Distancing Protocols.
- For services of twenty (20) or less, where social distancing can be observed, doors will be propped or rigged to operate with feet instead of hands. Attendees should be encouraged to wear non-surgical masks or face coverings.
- Utilizing technology and parking areas for gatherings, either virtual or in person, using cars (drive-in or drive-up style) are acceptable under the following conditions:
  - no access to bathroom facilities;
  - participants to stay in cars;
  - the number of people outside of cars does not exceed twenty (20);
  - social distancing is applied to parked cars (6' between cars); and
  - Volunteers, staff, and clergy following appropriate Social Distancing Protocols, wear a non-surgical mask or face covering, and observe sanitizing protocols.
- Meetings previously held in offices should be held in larger spaces to allow proper social distancing. Staff and clergy hold personal member meetings in homes or church or other facilities by appointment only, sanitizing between visitors. Limit home visits to the most essential and with proper PPE. Social Distancing Protocols shall be complied with under all circumstances.
- Distribution of sacrament should follow the highest sanitation procedures, including the use of proper PPE. Preference is to limit any public passing or distribution of the sacrament.
- Donations and tithing will be accomplished by mail, phone or electronic means. There shall be no pass-around collection methods utilized.

- Shared equipment and material must be sanitized thoroughly between uses. Prayer books, hymnals, kippahs and tallit will be withdrawn at this time. Items may be reintroduced as risk lowers.
- Youth camps, education, and any other types of classes may be held (i) virtually or (ii) in accordance with Section 7 (gathering protocols), Summer Youth Camp, Activities, and Programs Protocols, and Child Care Center and Facilities Protocols.
- Any formal child care must comply with the Child Care Center and Facilities Protocols.
- Religious leaders and workers, including officials, workers, and leaders in Churches are exempt from the gathering restrictions. This includes workers necessary to plan, record, and distribute online or broadcast content to community members.

13. **Accommodation and Lodging.** All hotels, accommodation, and lodging will comply with the following restrictions and limitations:

- All hot tubs, locker rooms, saunas, steam rooms, and spas will be closed to members, guests, patrons, and the general public.
- Management will implement social distancing measures in lobbies and other communal areas of the establishment, including lines for front desk and concierge, and cleansing measures between each transaction for staff who have to handle cash and credit cards at check-in.
- Visitors will be greeted/screened and asked to use hand sanitizer and to wear a mask (which will they may be provided by the Hotel/Resort, subject to availability). Reception areas, registration, concierge, and valet areas should be screened by a plexiglass barrier.
- Appropriate PPE (wearing non-surgical mask or face covering and gloves) will be worn by all employees based on their role and responsibilities and in adherence to state or local regulations and guidance. Training on how to properly use and dispose of all PPE will be mandatory. Every employee entering the Hotel/Resort should be provided a non-surgical mask or face covering and be required to wear such while on hotel property. Gloves will be provided to employees whose responsibilities require them as determined by medical experts including



housekeeping and public area attendants and security officers in direct contact with guests.

- Shuttle services will adhere to guidance provided by the Health Department.
- Where a guest, member, or patron tests positive for COVID-19, management will house such guest, member or patron during the quarantine period.
- Management will post signage approved by the Health Department which advises members, guests and patrons of COVID-19 protocols. Guests, members, patrons should receive a COVID-19 awareness/information card.
- Room service food delivery is permitted.
- Digital check-in and check-out are encouraged.
- Consider designating one staff member to attend to sick guests.
- Guests who are symptomatic shall stay in their rooms. Where it is necessary for them to leave their room, they must wear a non-surgical mask or face covering at all times.
- Daily housekeeping services should be discontinued to prevent transmission between rooms during guest stays and protect employee exposure occurrence. An outright prohibition for any mid-stay services is not recommended. If a mid-stay or daily service is provided, employees will minimize contact with guests while cleaning hotel rooms; guest room attendants will offer to return at an alternate time for occupied rooms. Industry leading cleaning and sanitizing protocols must be used to clean guest rooms, with particular attention paid to high-touch items including television remote controls, toilet seats and handles, door and furniture handles, water faucet handles, nightstands, telephones, in-room control panels, light switches, temperature control panels, alarm clocks, luggage racks and flooring.
- Daily guest room cleaning should include a complete change of towels, bed linens, pillows, and guest consumable items. Launder all exposed linens and cleaning supplies separately, washed at high temperatures and in accordance with CDC guidelines. Dirty linen will be bagged in the guest room to eliminate excess contact while being transported to the laundry facility.
- All hard surfaces and high touch areas must be completely disinfected with an EPA registered chemical disinfectant.

- Provide guest with their own in-room sanitation solutions, sprays, or wipes to instill guest confidence (e.g.; alcohol wipes). Such sanitation supplies will be placed out of the reach of children.
- When possible, rooms should remain vacant for forty-eight (48) hours after check-out and prior to cleaning.
- Public area furnishings, conference layouts, and other physical layouts will be arranged to ensure appropriate social distancing.
- Management will comply with, and not exceed, local or state mandated occupancy limits.
- Hand sanitizer dispensers, touchless whenever possible, will be placed at key guest and employee entrances and contact areas such as entrances, reception areas, hotel lobbies, restaurant entrances meeting and convention spaces, elevator landings, pools, salons and exercise areas. Hand sanitizer throughout the back of house (in touchless dispensers) for employees.
- Employees will be trained on how to respond swiftly and report all presumed cases of COVID-19 as required by the Health Department. Management will be ready to provide support to members, guests, and patrons.
- Case Notification. If there is a report of a presumptive case of COVID-19 at the facility, the workplace coordinator, who will be responsible for COVID-19 issues, will notify and work with the Health Department on appropriate actions.
- Members, guests, and patrons will enter the hotel/resort through doors that are either propped open, are automated or manually operated by an employee.
- Employees will not open the doors of cars or taxis.
- Guests requesting bell service will be assisted and the bell cart will be sanitized after each guest is assisted.
- Valet services will be suspended until further notice.
- Hotel vehicles will be thoroughly cleaned before and after each use.
  - No more than four guests will be permitted per SUV and no more than two guests will be permitted per sedan.
  - Guests will not be permitted in the front passenger seat.
  - An employee will be present to sanitize the button panels at regular intervals, at least once per hour.

- Elevators shall be limited to single rides or member of the same household or roommates.
- The frequency of air filter replacement and HVAC system cleaning will be increased and fresh air exchange will be maximized.
- Shared tools and equipment will be sanitized before, during and after each shift or anytime the equipment is transferred to a new employee. This includes phones, radios, computers and other communication devices, payment terminals, kitchen implements, engineering tools, safety buttons, folios, cleaning equipment, keys, time clocks and all other direct contact items used throughout the hotel/resort. The use of shared food and beverage equipment in back of the house office kitchens (including shared coffee brewers) will be discontinued.
- Management will comply with Food Service Protocols for restaurants, bars, taverns, and nightclubs.
- Meeting and banquet set-up arrangements will allow for physical distancing between guests in all meetings and events based on Social Distancing Protocols. Gatherings of more than twenty (20) guests in any conference or meeting room is prohibited. Buffets will be subject to the Food Service Protocols.
- Any owned or managed retail outlets, retail partners and tenants operating with the hotel/resort shall comply with the Retail and Wholesale Trades Protocols.
- Swimming pools will be limited to 50% pool capacity, one swimmer per lane with no congregating on the pool deck at anytime.
- Leisure swimming pools will remain closed until otherwise allowed by the Health Department.

14. **Property Management.** All property management services will comply with the following restrictions and limitations:

- Employees working in guest areas will wear a non-surgical mask or face covering, and gloves, or will work behind a plexiglass barrier when possible.
- High touch surfaces (door handles, counter-tops, work space surfaces, elevators, public restrooms) will be sanitized hourly with EPA approved cleaners.
- Snack/sundries and all loose product removed and service is suspended.

- Housekeeping services are discontinued during guest stay. Post-departure cleaning, using a methodical approach, thoroughly clean every guestroom in the hotel to include all hard and soft surfaces. Every hard surface in the guestroom must be disinfected.
- Non-emergency maintenance services while the property/unit is occupied is discontinued. Emergency maintenance providers will wear non-surgical masks or face coverings, and gloves. Where possible, guest should leave the room/unit during service.
- Lobby areas for check-in/check-out will comply with Social Distancing Protocols.
- SPA, locker rooms, saunas, hot tubs, and steam rooms will remain closed.
- Swimming pools will be limited to 50% pool capacity, one swimmer per lane with no congregating on the pool deck at anytime.
- Leisure swimming pools will remain closed until otherwise allowed by the Health Department.
- Launder all exposed linens separately.
- Provide guests with their own sanitation solutions or wipes.
- All reusable collateral to be removed from rooms.
- Extra pillows and blankets stored in the guest room closets will be removed and available upon guest request.
- When possible a 48-hour blackout period will be followed between arrival/departure period of any reservation. Housekeeping staff will be trained to use disinfectants safely and correctly. Staff should wear non-surgical masks or face coverings, and gloves when cleaning.
- Management will maintain records that will assist in tracing who has been in contact with any infected individuals who have stayed at the unit/guestroom.

15. **Grocery Stores and Food Service.** All grocery stores and food services will comply with the following restrictions and limitations:

- Signage. Signage at each public entrance of the facility to inform all employees and customers of the following:
  - DO NOT ENTER the facility if you have a cough or fever.
  - 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.
  - Do not shake hands or engage in any unnecessary physical contact.
  
- Measures to Prevent Crowds from Gathering.
  - Limit the number of customers in the store at any one time to one person per 100 square feet of interior floor space.
  - Post an employee at each public entrance to ensure that the maximum number of customers in the facility set forth above is not exceeded.
  - Set an established daily window of time for high-risk groups to shop without pressure from crowds.
  - Waive prescription delivery fees for high-risk individuals.
  
- Measures to Keep People At Least Six Feet Apart.
  - Signage outside the store reminding people about social distancing and to keep a distance of at least six (6) feet apart, including when in line.
  - Placing tape or other markings at least six (6) 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 social distance.
  - Separate order areas from delivery areas to prevent customers from gathering.
  - All employees have been instructed to maintain at least six (6) 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.
  - Install Plexiglas "sneeze-guard" barriers at each checkout station to protect employees and the public.
  
- Measures to Prevent Unnecessary Contact.
  - Restrict self-serve items that are food-related.
  - Lids for cups and food-bar type items are provided by staff; not for customers to grab and go.
  - Bulk-item food bins are not available for customer self-service use.
  - Employees will wear non-surgical masks or face coverings that completely cover the nose and mouth whenever possible.
  - Impose one-way aisle restrictions to support social distancing.

- Measures to Increase Sanitization.
  - Disinfecting wipes that are effective against COVID-19 are available near shopping carts and shopping baskets. Provide trash receptacles for these items immediately after use.
  - Employee(s) assigned to disinfect carts and baskets after each use or before each use.
  - For customers, provide tissues, no-touch waste bins, and alcohol-based hand antiseptic rubs (with at least sixty percent (60%) ethyl alcohol as the active ingredient) at or near the entrance of the facility, at checkout counters, and anywhere else inside the store or immediately outside.
  - Disinfect between each customer at checkout stations, including payment portals, pens, styluses, self-checkout touch screens, cashier hands, shopping cart handles.
  - Disinfect workstations, cash registers, and other shared work areas between shifts or before use by another employee.
  - At a minimum, disinfect all high-contact surfaces hourly. This includes conveyor belts, cashier stations, door handles, food service counters.

16. **Retail and Wholesale Trades.** All retail and wholesale trades will comply with the following restrictions and limitations:

- Maintain signage to remind and help individuals stand at least six (6) feet apart, including outside in line, and in the store check-out lines. Make regular announcements to remind customers to follow Social Distancing Protocols.
- Management will establish outside waiting areas, with indicated 6-foot separation points, for customers once facility capacity is met. Such will be overseen by a designated member of staff.
- Staff will wear non-surgical masks or face coverings and gloves (“PPE”).
- Staff will wear PPE when handling merchandise.
- Carts and baskets will be disinfected after each use.
- Maximum number of customers must be such that a 6-foot distance between patrons and employees can be easily maintained (1 person per 100 square feet).

- Provide hand sanitizer at checkout counters and at other locations throughout the store and immediately outside the store.
- Limit purchase quantities on certain goods selling out quickly; this will help maintain ability to meet needs of patrons and will also help limit crowds and lines.
- Clothing, which has been tried or handled, will be set aside in a designated “decontamination area” away from the public and steamed at 200-300 degrees Fahrenheit and placed on an established holding rack for twenty-four (24) hours before returning to the floor.
- Management will rearrange or remove fixtures and displays to accommodate current Social Distancing Protocols.
- Management will allow product testing and/or sampling only when administered by staff utilizing PPE and disposable utensils/implements.
- Management will place signs in visible locations directing customers not to open products. Suggested wording: *“Due to COVID-19, please do not use testers without the guidance of a sales associate.”*
- Set an established daily window of time for high-risk groups to come in without pressure from crowds.
- Discourage bringing kids or strollers in stores when possible to allow as much space as possible in aisles.
- Install a clear plexiglass/physical screen or barrier between cashier and customers checking out items.
- Impose one-way aisle restrictions to support social distancing.
- All common areas will be cleaned after each use or every two (2) hours as necessary; cleaning logs will be created and maintained.
- Front doors to establishment will be kept open as much as possible to limit touchpoints for customers.

- Public restrooms will be cleaned and sanitized every two (2) hours; cleaning logs will be created and maintained.
- Management will close off side by side urinals, toilets, and sinks within public restrooms so as to establish appropriate social distancing.
- Management will restrict staff restrooms within the establishment to staff and will be sanitized after every use or at least every two (2) hours; cleaning logs will be created and maintained.
- Management will encourage online ordering and pickup curbside where possible.
- Businesses that serve soft drinks and/or coffee will secure all receptacles, lids, straws, etc. behind the counter in a secure location and only provided to customers by staff in PPE.
- Businesses with children’s playgrounds, mechanical rides, or other such “play” areas on-premise, will keep such areas and items closed till instructed otherwise by the Health Department.

**17. Home Residential Services.** All home residential services will comply with the following restrictions and limitations:

- Inquire if homes have symptomatic individuals residing therein and use extra caution. Request that home owners and guests vacate the premises when/where possible if they are not needed on site to allow businesses to perform duties.
- Limit of 1-2 staff per home/job on-site. Minimize on-site time and interaction to only when necessary for performing a job.
- Staff will travel to each job in separate vehicles with one person per vehicle, unless individuals live in the same household, in which case, they can share a vehicle.
- Products that can be delivered safely and securely outside of a residence should be done so to minimize contact with individuals and promote social distancing.
- Wash and sanitize hands before and after leaving a home.
- Wear a non-surgical mask or face covering that completely covers the nose and mouth whenever possible.



- Wear protective gloves, changing between each home.
- Sanitize tools after completing work at each home.

18. **Realtors.** All realtors will comply with the following restrictions and limitations:

- Realtors, clients, or other related real estate services are to travel in separate vehicles to any real estate related service or transaction.
- Real estate offices will be managed so that it can only be open to the agents/employees or clientele of an agent that are a part of that office. Office occupancy will be limited and managed so that no more than (ten) 10 individuals will be in the office at any one time. Any client meetings in offices and Sales Gallery's meetings, shall be by appointment only.
- The Park City Board of Realtors will place this Summit County Public Health Order visibly on its website for the review and acknowledgment by its membership.
- Public Open Houses will continue to remain suspended during the Stabilization/Orange phase.
- Real estate transactions will be conducted electronically whenever possible. Private, in-person transactions will be limited to property showings or activities that cannot otherwise be accomplished electronically. When in-person meetings are necessary, such as showing a home, social distancing and CDC guidelines will be observed.
- Prior to meeting in-person with any potential client, agents/employees will ask clients prior to meeting if they have: (i) tested positive for COVID-19; (ii) had any in-person contact with a person who has tested positive for COVID-19; or (iii) had any symptoms of COVID-19. If any of these questions are answered in the affirmative, the agent/employee will not meet with the client. Washing hands can be frequently with soap and water for at least 20 seconds. If soap and water aren't available, an alcohol-based hand sanitizer can be used.

- When doing a walk-through of a property, agents/employees will avoid, to the degree practicable, touching items in the property such as doorknobs, light switches, bathrooms, kitchen appliances, etc. Said items which must be touched can be cleaned/sanitized following the meeting/walk-through.
- In working with clients agents/employees will take every precaution for safety by providing hand sanitizer, or soap and water for clients when meeting with them.
- The number of people in a residence being shown to a buyer will always be limited to potential buyer/buyer's family and buyer's agent.

19. **Waste Management, Remediation, and Recycling Services.** All waste management, remediation, and recycling services will comply with the following restrictions and limitations:

- Hourly staff clock-in by mobile device or shared device, disinfected before/after each shift.
- Staff will use non-surgical mask or face coverings and gloves when working in confined environments with others when social distancing or physical contact with materials is not possible.
- Common areas/break rooms/office will observe effective social distancing, dispersed use and frequent cleaning.
- Maintain social distancing (6 feet) from public. Limit staff and public in common areas to maintain social distancing. Customer access to enclosed and restricted areas is prohibited.
- Eliminate public access to office facilities where possible. Vendors and general public should be restricted from entering office facilities; only allowing public access to designated areas. Maintain good ventilation of facilities in public areas.
- Team lunches will be staggered where possible to maximize social distancing. Where applicable, staff should operate in separated teams to limit exposure to others.

- All equipment and facility contact surfaces will be sanitized daily, between shifts, and between operators when possible. Minimizing equipment use by multiple operators and disinfecting contact surface when equipment must be shared.
- Staff will avoid multiple occupancy of vehicles whenever possible. If multiple occupancy cannot be avoided, non-surgical masks or face coverings will be required.
- The public sale of goods or items set aside for reuse/re-purpose or resell will be surface cleaned with disinfectant or quarantined for a minimum of seventy-two (72) hours.
- Post signs limiting the number of public or vehicles in specific areas to maintain applicable Social Distancing Protocols.
- Proper PPE (non-surgical mask or face covering and gloves) should be used for physical cleanup of wastes and recycling placed outside the designated containers.

20. **Administrative and Support Services.** All administrative and support services will comply with the following restrictions and limitations:

- General Standards for Operation
  - Employees are encouraged to clean and disinfect their own workspace throughout the work day.
  - The shipping and receiving function will be organized to maintain six (6) feet distancing and minimize contact between staff and vendors. Whenever possible, digital or no-touch logs will be used to confirm receipt. Digital screens will be disinfected after each use.
  - Unmanned entrances and exits with keypads will be disinfected on a regular basis.
  - Whenever possible, employee workspaces will be organized to allow for six (6) feet of distancing, such as staggering workstations, avoiding face-to-face positioning, and/or staggering shift start/end times. When it is not possible to allow for six (6) feet of distancing, employees will be required to wear non-surgical masks or face coverings.
  - Breakrooms should be arranged to allow maximum social distancing, including arranging of tables and chairs and staggered break schedules.
  - Employees will not congregate during breaks.

- Avoid communal areas (kitchen, bathrooms, mail room, copiers, water cooler, etc.) when other staff are present.
- Ensure proper sanitation supplies are available to employees.
- Wipe down any doorknob or surface touched at the office outside of employee workstations.
- Management is highly encouraged to allow employees who are in a highly vulnerable population (age 60+), who are immune-compromised, or who have immune-compromised family members, spouses, partners, or roommates to work from home.
- Housekeeping
  - *Vacant Vacation Homes*: It is highly recommended (subject to rental schedule) that employees delay entering the home for forty-eight (48) hours after the occupant departs.
  - *Occupied Privately Owned or Rented Premises*: It is highly recommended that the owner/ renter/ lessee stay in a different room while the employees are working or requesting that the owner/ renter/ lessee vacate the premises (i.e. take a walk, run an errand or other activity) while the employees are working. If the occupant is unable to leave the room, Social Distancing Protocols will be followed and the employees will wear PPE.
  - Employees will complete the *International Sanitary Supply Association's* on-line certification for Coronavirus cleaning. See <https://www.issa.com/education/cleaning-for-infection-prevention/coronavirus-prevention-and-control-for-the-cleaning-industry>

21. **Arts and Entertainment.** All arts and entertainment businesses, including special events, mass gatherings, sporting events, parades, concerts, theatres, museums, zoos, aquariums, aviaries, and botanical gardens, will comply with the following restrictions and limitations:

- Facilities and venues will operate with no more than twenty (20) people gathered. Social Distancing will be followed and practiced at all times including six (6) feet within groups, and ten (10) feet between groups.

- Management will identify a workplace coordinator who is responsible for COVID 19 related issues and impacts to the business or organization. This includes communication, operations and cleaning supplies/schedule, required and recommended PPE per Health Department as part of uniform, and a protocol for reporting illness to management for staff, volunteers, patrons and performers or other contractors.
- Prioritize touch-less payment, ticketing, playbills, and waste (ie, no lid to touch on garbage/recycle receptacles). Disinfect between transactions at facility stores/gift shops. Trash and Waste receptacles or other high touch items will not have lids and be emptied prior to overflow.
- Staff and volunteers are strongly encouraged to wear non-surgical masks or face coverings. Employee should wear gloves, if possible.
- Management should focus on local residents. Some attendees may participate from outside of Summit County, but focus should be on local attendees.
- Facility will be cleaned and sanitized throughout the day and at the beginning of each day.
- Additional attention will be concentrated in areas where staff/patrons are using shared space (ex. theatre seats, galleries, museums, interactive displays).
- Staff will ensure patrons do not congregate in lobby/general areas, around or near restrooms, or when leaving.
- Floor plan layouts will be created to allow social distancing requirements. These will be made available to the Health Department upon request. When possible, work in teams to reduce exposure across all staff.
- Management will have seating charts (reserved seating) for performances to ensure social distancing practices are maintained and staff/volunteers understand such arrangements. Management will maintain a log of attendees/participants/ticket holders by program/show digitally. This should include full name, county of residence, and contact information. This information will be made available to the Health Department upon request.
- During performances it is recommended that a staff or volunteer assist in restrooms to ensure restrooms are not clustered, handwashing is performed, and supplies and facility is adequately clean and stocked.
- Outside of performances, restrooms should be regularly checked to ensure the facility is clean and adequately stocked.

- Staff or volunteers will escort or usher patrons into and out of performances or screenings and monitor patrons for compliance in gallery/museum settings. When possible, have various entry and exit points. This will prevent clustering in doorways. Staff or a volunteer should escort or usher patrons into and out of shows or galleries to ensure proper distancing. There may be some scenarios when an usher isn't needed (such as a gallery or museum setting), in which case staff or a volunteer will observe patrons to ensure their compliance with social distancing practices.
- Staff will have the authority to ask patrons to leave facility if they believe they are ill or have symptoms of illness.
- Youth/Children should be supervised by a designated adult or guardian if participating in programs. If children cannot be accompanied by an adult, previous arrangements must be made with management.
- All takeaway marketing, ticketing and playbills will be paperless (digital). A master copy of these types of materials may be displayed behind a protective surface for patrons who do not have the ability to access digital platforms. Playbills, tickets or other brochures will be digital. Pre-purchase of tickets or participation is strongly encouraged. Continue digital participation options for patrons who are not comfortable in participation. This includes those who are immune compromised or otherwise highrisk.
- Use of communal materials or equipment must follow strict cleaning procedures after each use (i.e.; art supplies, instruments, equipment, exhibits, costumes, etc.). At all possible costs, management should work with patrons to use their own personal supplies and equipment (not share).
- Allow staff to continue telecommuting when they do not need to be present in the workplace. Staff should not linger in the workplace if they are not working. Continue to promote customers calling-in for business that does not require contact (i.e.; purchase tickets).
- Management will follow Food Service Protocols.
- Management will follow Retail and Wholesale Trades Protocols for gift shops and sale of goods.
- Set an established window time for high-risk groups to come in without pressure from crowds and/or separate entrances and queues.

- Participants (e.g., players, performers, actors) in events should have their symptoms checked prior to performance.
- Booths or vendors must be ten (10) feet apart. Handwashing stations are required for every five (5) booths.
- Expanding outdoor venue areas is recommended. Extending times or days over which the activity occurs are also encouraged to reduce gathering numbers and spread out participation when possible.

22. **Manufacturing.** All manufacturing businesses will comply with the following restrictions and limitations:

- Management will instruct all employees to clean their hands often with an alcohol-based hand sanitizer that contains at least 60% ethyl alcohol, or wash their hands with soap and water for at least 20 seconds. Soap and water should be used preferentially if hands are visibly dirty.
- Management will provide soap and water and/or alcohol-based hand rubs on the job site, and shall ensure that adequate supplies are maintained. Place hand rubs in multiple locations to encourage hand hygiene.
- Employees are not to share tools.
- Employees should wear a non-surgical mask or face covering that completely covers the nose and mouth whenever possible.
- Employees will utilize disposable gloves where appropriate. Management will instruct employees to wash hands after removing gloves.
- Management will disinfect reusable supplies and equipment.
- Management will provide routine environmental cleaning (doorknobs, keyboards, counters, and other surfaces).
- Breakrooms should be arranged to allow maximum social distancing, including arranging of tables and chairs and staggered break schedules.

- The shipping/receiving function will be organized to maintain six (6) foot distancing and minimize contact between staff and vendors. Whenever possible, digital or no-touch logs will be used to confirm receipt. Digital screens will be disinfected after each use.
- Arriving shipments will be treated as infected and sanitized, followed by rigorous hand-washing and changing of gloves, if applicable.
- Unmanned entrances and exits with keypads will be disinfected on a regular basis.
- Communal areas will be stocked with hand-wash/sanitation supplies in addition to wipes and other materials to comply with Health Department standards.
- Employees are encouraged to clean and disinfect their own workspace throughout the day.
- Whenever possible, employee workspaces will be organized to allow for six (6) feet of distancing, such as staggering workstations, avoiding face-to-face positioning, and/or staggering shift start/end times.

23. **Warehousing.** All warehousing will comply with the following restrictions and limitations:

- Signs will direct traffic to specific entrances/exits designated for different functions such as shipping and receiving.
- The shipping and receiving function will be organized to maintain six (6) feet distancing and minimize contact between staff and vendors. Whenever possible, digital or no-touch logs will be used to confirm receipt. Digital screens will be disinfected after each use.
- Employees should wear a non-surgical mask or face covering that completely covers the nose and mouth whenever possible.
- Unmanned entrances and exits with keypads will be disinfected on a regular basis.
- Breakrooms should be arranged to allow maximum social distancing including arranging of tables and chairs and staggered break schedules.



- Whenever possible, employee workspaces will be organized to allow for six (6) feet of distancing, such as staggering workstations, avoiding face-to-face positioning, and/or staggering shift start/end times.

24. **Transportation.** All transportation and transit services, including taxis, shuttle services, and cargo, will comply with the following restrictions and limitations:

- Public Transit
  - Staff will have a transparent protective barrier (sneeze guard) between themselves and the public.
  - Drivers and operators will wear a non-surgical mask or face covering.
  - Staff will be provided guidelines for shift changes to properly social distance.
  - Staff will disinfect the driver cab area prior to beginning each shift, during shift changes, and at end of lines.
  - Passengers are directed to board through the rear doors (if available). Passengers with disabilities can still use the front doors.
  - Items left behind by passengers will be collected by operators using disposable gloves and put in plastic bags.
  - Passengers will have a transparent protective barrier (sneeze guard) between themselves and the transit operator.
  - Information will be posted on buses, stops, and transit centers to caution passengers to social distance.
  - High touch surface areas on transit vehicles, such as seats, floors, handrails, strap hangers, and steering wheels, will be disinfected and sanitized daily and at end of lines by drivers and/or staff. Signage will be posted describing the frequency of cleaning so the general public can be made aware of this practice.
  - Transit Centers, including high touch areas that may contain virus such as door handles, floors, seats, bathroom, faucets, tables, chairs, and benches, will be disinfected and sanitized daily by staff. Signage will be posted describing the frequency of cleaning so the general public can be made aware of this practice.
  - Passengers exhibiting COVID-19 symptoms are encouraged to call on demand service for transportation.
  - Transit vehicles will have limited seating to ensure proper social distancing of six (6) feet or greater.
  - Disinfectant wipes will be supplied on transit vehicles for passengers to sanitize their seating area.

- Passengers are recommended to wear non-surgical masks or face coverings while riding transit vehicles.
- Private Transportation (including RideShare)
  - Vehicles limited to single person or single-family use. Passengers in larger vehicles, such as vans and buses, will observe social distancing by sitting six (6) feet from the driver and other passengers during transportation.
  - No passengers allowed in the front seat.
  - Avoid using the recirculated air option for the car's ventilation during passenger transport; use the car's vents to bring in fresh outside air and/or lower the vehicle windows.
  - All drivers are required to wear non-surgical masks or face coverings and disposable gloves (to be safely removed and disposed of between rides). This includes wearing the non-surgical mask or face covering and gloves while empty.
  - Passengers displaying symptoms should not enter the vehicle - Ask passengers if they have symptoms - do not carry those exhibiting symptoms (does not apply to NEMT providers).
  - Any cash tips received by the driver will be placed in a plastic bag and will be sanitized before being distributed to the driver. After placing money in the bag, driver must use hand sanitizer or replace their gloves with clean ones before driving again.
  - Drivers can request that all passengers wear non-surgical masks or face coverings. When possible, drivers could have masks available for purchase. Each company may adopt their own policy prohibiting non-masked passengers.
  - Passengers should be asked to handle their own luggage, personal belongings, personal items, and bags during pick-up and drop-off. When contact with items occurs, drivers will use disposable gloves for each instance of baggage handling and sanitize their hands afterwards. Drivers will keep a distance of at least six (6) feet from passengers when outside the vehicle.
  - All shared amenity items will be removed. Single use items must be kept in the center console to prevent multiple handling between passengers.

- Clean and disinfect frequently touched surfaces in the vehicle at the beginning and end of each shift. All door handles, armrest, cup holders seat belt clasps, and surfaces will be wiped with sanitizer by the driver between each ride. The driver must then sanitize their gloves or put on new gloves before continuing to drive. Drivers will have within the vehicle cleaning and disinfectant spray or disposable wipes, and disposal trash bags when transportation services are being provided.
- Private transportation will adhere to CDC industry guidelines.
- Cargo (UPS, FedEx, and other parcel delivery)
  - When entering a common hallway or building space, employees will wear a non-surgical mask or face covering, and avoid unnecessary contact with people or items. Observe Social Distancing Protocols.
  - Use a disposable cloth or towel to open mailboxes and immediately dispose after each use.
  - Employees will comply with the following additional protocols:
    - No contact with pets or household animals.
    - Contactless deliveries.
    - Maintain a distance of six (6) feet from individuals while making deliveries.
    - Limit contact with surfaces such as doorbells, handles, and door knockers. Drivers should not use hands to open doors or use a disposable cloth or towel to touch surfaces and immediately dispose after each use.
  - Do not share tools or pens.
  - Use local facilities, not open to the public, for breaks.
  - Utilize same-route assignments to limit exposure for drivers to new areas.
  - Management will adhere to CDC Guidelines for Mail and Parcel Delivery Drivers.

Section 6.     **Closures.** All hot tubs, spas, saunas, steam rooms, locker rooms, bike share, dog parks, and leisure swimming pools will be closed to members, guests, patrons, and the general public.

Section 7.     **Public and Private Gatherings Prohibited.** All public and private gatherings of more than twenty (20) people are prohibited.

- A. This prohibition of gatherings will not apply to critical government services, such as fire, police, emergency response, and court services, or to other necessary services, such as hospitals, domestic violence shelters, homeless shelters, licensed or contracted residence care providers, grocery stores, stores that sell other commodities, restaurants, gas stations,

convenience stores, building and construction worksites, and the shipping, transportation, and airline industry.

- B. This prohibition of gatherings will not apply to members of the same household or living unit.

Section 8.     **Conflicts.** In the event of a conflict between the Mandatory Business Practices and the Business Specific Protocols, the more restrictive protocol or practice shall control.

Section 9.     **Effective Date; Duration.** This Order shall become effective at 12:01 a.m. on May 1, 2020, and will continue to be in effect until 11:59 p.m. on July 1, 2020, or until it is extended, rescinded, superseded, or amended in writing. This Order shall be re-evaluated in fourteen (14) calendar days. Should scientific data indicate that the spread of COVID-19 in Summit County has substantially increased, the County may reinstitute the Stay-at-Home Order.

Section 10.    **Publication.** This Order shall be on file for public inspection with the Summit County Clerk and the Summit County Health Department.

Section 11.    **Enforcement.** The County Sheriff and Chiefs of Police within the County are directed to ensure compliance with and enforce this Order. Notwithstanding such, the purpose of this Order is to protect individuals' health and not to hold them criminally liable. Discretion will be used in the citing and prosecution of violations of this Order.

Section 12.    **Appeal.** This Order may be appealed to the Summit County Board of Health within ten (10) calendar days in accordance with Summit County Code of Health §1-1-9.

ORDERED, APPROVED, ADOPTED, and PASSED, and published, this 30<sup>th</sup> of April, 2020.

ATTEST:

**SUMMIT COUNTY COUNCIL**



\_\_\_\_\_  
Kent Jones  
Summit County Clerk



\_\_\_\_\_  
Doug Clyde, Chair

APPROVED AS TO FORM



\_\_\_\_\_  
Margaret H. Olson  
Summit County Attorney

VOTING OF COUNTY COUNCIL:

Councilmember Carson	<u>Aye</u>
Councilmember Robinson	<u>Aye</u>
Councilmember Clyde	<u>Aye</u>
Councilmember Armstrong	<u>Aye</u>
Councilmember Wright	<u>Aye</u>

**BY ORDER OF THE SUMMIT COUNTY MANAGER**



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Thomas C. Fisher  
Summit County Manager

**BY ORDER OF THE SUMMIT COUNTY HEALTH OFFICER**



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Richard C. Bullough, PhD  
County Health Officer

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COUNTY COUNCIL, COUNTY MANAGER, AND BOARD OF HEALTH  
IN AND FOR SUMMIT COUNTY, STATE OF UTAH

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In the matter of:

COVID-19 Pandemic within Summit County

**JOINT PUBLIC HEALTH ORDER  
(Stabilization Phase)**

Order No.: 2020-06

Date: May 14, 2020

Legal Authority: Utah Code §26A-1-114  
Utah Code §17-50-  
302(1)(a)(ii)  
Summit County Code  
§4-5-6(A)

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The Summit County Health Officer (“**SCHO**”) issued his Public Health Order 2020-01 on March 15, 2020.

The SCHO issued his Public Health Order 2020-02 on March 23, 2020.

The SCHO, Summit County Council (“**Council**”), and the Summit County Manager (“**Manager**”) issued their Joint Public Health Order 2020-03 (the “**Stay-at-Home Order**”) on March 25, 2020.

The SCHO issued his Amended Public Health Order 2020-04 on March 31, 2020, which extended Public Health Order 2020-01 and 2020-02 to be co-terminus with the Stay-at-Home Order.

The Governor of the State of Utah issued his “Utah Leads Together (Version 2)” and “Phased Guidelines for the General Public and Businesses to Maximize Community Health and Economic Re-activation” on April 17, 2020 (together, the “**Utah Leads Together Plan**”).

The Utah Leads Together Plan lays out three-phases to the COVID-19 (coronavirus) pandemic response: “**Urgent Phase**,” “**Stabilization Phase**,” and “**Recovery Phase**.” The Urgent Phase directs resources and regulations aimed at stopping the spread of the virus and ensures that our health care system does not become overwhelmed. The Stabilization Phase transitions into an effort to mitigate the spread of the virus, while simultaneously re-activating the economy step-by-step. To assist in this effort, an operational dashboard has been provided,

which establishes a color-coded health guidance system. This system consists of four levels: High Risk (red), Moderate Risk (orange), Low Risk (yellow), and New Normal (green).

The County formed a Stabilization Working Group to enlist businesses and industries within Summit County (the “**County**”) to assist it in developing appropriately tailored business specific protocols for each individualized business sector within our community.

On April 29, 2020, the Governor issued his executive order (i) adopting the Utah Leads Together Plan as a statewide order, and (ii) reducing the risk level statewide to Moderate Risk (orange).

Pursuant to Utah Code §53-2C-103 (SB 3004), on May 1, 2020, the Utah Department of Health in consultation with the Governor’s Office granted the County an exemption from the Governor’s executive order for Joint Public Health Order 2020-05.

The County issued its Joint Public Health Order 2020-05 with an effective date of May 1, 2020, which transitioned the risk level in the County to Moderate Risk (orange) with community specific protocols for businesses and industries.

On May 14, 2020, the Governor issued a new executive order which reduced the majority of the state to Low Risk (yellow), but specifically did not change the Moderate Risk (orange) risk level in Summit County.

The County is in a unique position in that it experienced a significant impact from the COVID-19 pandemic to its resort economy. The County continues to be in a unique position in its efforts to phase-in its reopening of its resort economy in order to ensure that the 2020-2021 ski season is successful.

Dr. Erin S. Bromage, Associate Professor of Biology, University of Massachusetts Dartmouth, who is an expert in immunology and infectious disease, provides important additional insights into the epidemiological construct of COVID-19 and its transmission. Dr. Bromage provides recommendations for reopening restaurants and other indoor facilities. Bromage, Erin S. PhD, “The Risks – Know Them – Avoid Them” (May 6, 2020) located at <https://www.erinbromage.com/post/the-risks-know-them-avoid-them>. The County desires to incorporate some of these ideas into its future Order (defined below).

Pursuant to Utah Code §53-2C-103 (SB 3004), on May 14, 2020, the Utah Department of Health in consultation with the Governor’s Office granted the County an exemption from the Governor’s further executive order for Joint Public Health Order 2020-06.

In issuing this Joint Public Health Order 2020-06 (this “**Order**”), the County adopts the Utah Leads Together Plan, inclusive of its updated Phased Guidelines for the General Public and Businesses to Maximize Community Health and Economic Re-activation (Orange), as a baseline



with additional Business Specific Protocols (defined below) layered on top of the baseline to account for the unique circumstances of the County and its resort economy.

**THEREFORE, PURSUANT TO UTAH CODE §26A-1-114, UTAH CODE §17-50-302, SUMMIT COUNTY CODE §5-4-6, AND SUMMIT COUNTY CODE OF HEALTH §1-1-10(b), BE IT HEREBY ORDERED BY RICHARD C. BULLOUGH, PHD, SUMMIT COUNTY HEALTH OFFICER, THE SUMMIT COUNTY COUNCIL, AND THOMAS C. FISHER, SUMMIT COUNTY MANAGER, IN CONSULTATION WITH THE SUMMIT COUNTY BOARD OF HEALTH, AS FOLLOWS:**

Section 1.     **Purpose.** The intent of this Order is to remain at risk level Orange, but ease some of the Business Specific Protocols in a manner so as to allow a phased normalization of business and commerce, while at the same time continuing to require social distancing, as defined in the Phased Guidelines for the General Public and Businesses to Maximize Public Health and Economic Reactivation, as amended (the “**Phased Health Guidelines**”) so as to prevent the spread of the COVID-19 coronavirus. All provisions of this Order shall be interpreted to effectuate this intent.

Section 2.     **Moderate Risk - Orange.** Joint Public Health Order 2020-05 is hereby rescinded and replaced in its entirety by this Order. The County remains in the Stabilization Phase, Moderate Risk (orange).

Section 3.     **Adoption of Phased Health Guidelines.** The County hereby adopts in its entirety the Phased Health Guidelines for Moderate Risk (orange). All individuals currently living within or visiting Summit County, Utah, and all businesses operating within Summit County, Utah, are ordered to comply with the protocols set forth in the Phased Health Guidelines for Moderate Risk (orange) in the following categories:

- General Public (Overview of Guidelines, Social Guidelines, Use of Face Coverings, Family Gatherings, Church Services, Children, Outdoor Recreation, Pools, Water Parks, and Spas).
- High-Risk Individuals.
- General Employer (Overview of Guidelines, General Employer Guidelines, including Best Practices for Employers, Cleaning & Hygiene Guidelines for Employers, and Employers Monitoring Systems).
- Business Specific Guidelines.
  - Restaurants, Food Service Establishments, Bars, Food Trucks, and C-Stores (including the Appendix, “Guidelines for Dine-in Restaurant Open in Orange & Yellow”).

- Retail (including Grocery Stores, Pharmacies, and C-Stores).
- Hospitality, Tourism and Accommodations.
- Events, Cultural Arts and Entertainment (including sporting events, concerts, rodeos, convention centers, theatres, museums, zoos, aquariums, aviaries, botanical gardens, libraries, and indoor arenas).
- Personal Services (including barbers, cosmetologists, body artists, nail technicians, tanning, etc.).
- Home Repair.
- Gyms and Fitness Centers (including indoor recreation centers, yoga studios, dance, tumbling, indoor soccer, etc.).
- Construction, General Contractors and Manufacturing.
- Child Day Care.
- Hospital Settings and Ambulatory Surgical Facilities.
- Non-hospital Settings, including Dentistry.

To the extent that the Phased Health Guidelines make compliance a recommendation or directive, the County hereby makes such recommendation or directive mandatory and enforceable under law.

**Section 4. Business Specific Protocols.** In addition to the Phased Health Guidelines, the following businesses will comply with an additional layer of specific protocols as more fully set forth below:

1. **Food Services.** All restaurants, coffee shops, bars, taverns, nightclubs, and C-stores which serve food, will comply with the following additional restrictions and limitations on dine-in seating:
  - Restaurants, coffee shops, bars, taverns, nightclubs, and C-stores, including lobbies and waiting areas, must clean in the morning, between shifts, and in the evening. Cleaning and disinfecting includes all high-traffic areas, tables, chairs, door handles, phones, floors, restrooms, and any high-touch surfaces.
  - Limit tables to groups of six (6) (unless members of the same household). Adjacent booths can be occupied if there is a minimum 5-foot (measured from the

seat) effective barrier between booths. If a 5-foot barrier is absent, booths may be occupied if every other booth is skipped.

- Customers at a bar must not be seated within six (6) feet of other customers, nor any taps, food preparation areas, sushi preparation areas, clean glasses, or the bartender work area (“the well”). Seats and stools in this area must be removed or unoccupied at all times if this 6-foot requirement cannot be met.
- Patrons may sit at the bar where food is being prepped if a solid, cleanable plexiglass or equivalent barrier, which extends three (3) feet above the countertop of the bar, is installed to separate the customer from the food preparation area.
- Small private events of twenty (20) people or less with reservations can only be accommodated by establishing a minimum 10-foot distance (or physical barrier) between the group and general public.
- In waiting areas, a 6-foot distance must be maintained between parties or household groups, whether indoor or outdoor. Waiting areas will have floor markers to indicate proper spacing. Where 6-foot distance cannot be maintained, indoor group waiting areas are prohibited. Weather permitting, food establishments may use outdoor waiting areas with signs and other reminders for groups to maintain 6-foot social distancing. Consider using call-ahead or reservation systems to minimize wait times and stagger arrivals.
- When possible, hosts should open doors for customers to help prevent congregating of customers at the entrance, show required signage, and explain operating practices.
- Condiments must not be kept on tables, but rather given to guests upon request. Condiment containers must be disinfected after each use. Self-serve condiment stations must be monitored and disinfected at least every thirty (30) minutes.
- Self-serve drink stations must be monitored and sanitized at least every thirty (30) minutes, especially surfaces where customers touch.
- Employees in kitchen areas should practice social distancing whenever possible. Workstations should be arranged so that employees do not face one another. Non-surgical masks or face coverings are encouraged and training provided on the how to appropriately wear them. Whenever possible, staff should be separated into

cohorts to minimize interaction between groups. All existing food regulations still apply.

- Take-out customers may order inside the establishment as long as the lobby or waiting area has floor markers to keep customers at least six (6) feet apart. Management must actively manage lobbies and waiting areas so as to ensure that social distancing is maintained at all times.
- Carry out services will comply with the Third-Party Food and Grocery Delivery Service protocols.
- Outdoor dining is strongly encouraged where and when available.
- Bars, taverns, and nightclubs will comply with all Food Service protocols.
- Where a customer's government issued identification card is required to be served an alcoholic beverage, the customer will hold his or her government issued identification card for scanning or place such on a flat surface and step away. The identification card will be retrieved by the customer after the employee has completed any verification.

2. **Third-Party Food and Grocery Delivery Service.** All third-party food and grocery delivery service will comply with the following additional restrictions and limitations:

- “No contact delivery,” which means no person-to-person contact.
- Each employee who performs deliveries will have a current *ServSafe* Delivery COVID-19 Precautions online training with a copy of the Record of Training on file with the business and available upon request by the Health Department.
- Management will register their business and receive approval by the Health Department before conducting third-party food and grocery delivery services. Registration is free.
- Management will and must ensure, on a daily basis and at the beginning of each shift/rotation, through a symptom check, that no employee who presents symptoms of illness will be permitted to work. A written log shall be kept of ill employees. Said log will be made available to the Health Department upon request.

- All payments will be on-line or through telephonic credit card transaction. Employees will not handle cash or credit cards. **Tips should be added via phone or online. Cash tips should not be accepted.**
- All food will be packaged in a sealed package or container to ensure (1) that food has not been opened, and (2) that there has been no tampering with the food.
- Food Delivery:
  - Food should be transported in a cooler, insulated bag or other container that can be sanitized between deliveries.
  - Delivery containers should be maintained at appropriate temperatures (FDA Food Code 3-501.16)
  - Employees who prepare the food are separate from the employee delivery food items.
  - Social Distancing Protocols will be followed. Package should be left on doorstep followed by a text or phone call alerting delivery has been completed.
- Prior to/Following Each Delivery:
  - All delivery containers will be sanitized.
  - Delivery vehicle touch points including but not limited to keys, steering wheel, doorknobs, gear shifts, radio knobs, cell phones/GPS will be sanitized prior to and following each delivery.
  - Management will inspect delivery vehicle at the beginning of each shift to ensure sanitary conditions.
- Employees who perform deliveries must be gloved and wear a non-surgical mask or face covering that completely covers the nose and mouth during the “no contact delivery” transaction.

**3. Indoor Recreational Facilities.** All indoor recreational facilities, including gyms, fitness centers, spas, exercise studios, health clubs, swimming pools, and hot tubs will comply with the following additional restrictions and limitations:

- Facilities will limit the number of patrons in the facility at one time to 1 person per 100 square feet. A maximum of twenty (20) people, including staff, per floor is allowed.
- Front entry and desk areas will be marked to indicate proper social distancing. Sneeze guards will be installed and touchless and online reservations and

payments will be encouraged. Work areas will be wiped down at the end of every shift.

- Hand sanitizer for patrons will be stationed throughout the facility and sanitation supplies will be readily available near exercise machines and benches. Patrons will be required to wipe down equipment after each use. There will be increased staff monitoring of facilities to ensure compliance with all regulations and to help sanitize surfaces.
- Employees must wear non-surgical masks or face coverings; patrons encouraged to wear non-surgical masks or face coverings whenever possible. In fitness classes led by an instructor where communication is made difficult by a mask, the mask can be removed for the duration of the class. However, ten (10) feet between the instructor and the patrons must be maintained at all times.
- Weight and Cardio areas will be roped off to maximize separation and will be cleaned after each use.
- Leisure swimming pools will remain closed until otherwise allowed by the Health Department.
- Patrons are encouraged to bring own equipment needed for use. When public equipment is used, adequate disinfecting supplies will be available for patron use before and after, and staff will clean equipment after scheduled class.
- Equipment given to patrons will be sanitized upon return and inventory will be rotated to limit turn over.
- Patrons will be required to maintain a social distance of ten (10) feet while exercising. Certain areas can be marked to delineate ten (10) feet boundaries.
- Schedules classes in order to allow for cleaning and disinfection in between classes.
- Clearly mark entry and exit areas, use separate locations where feasible.
- Zero hands-on contact between staff/patron, and patron/patron.

- Management will provide updated participant waivers which include COVID-19 specific details including nonparticipation if symptomatic. Details to include acknowledgment of public restroom and shared equipment use.
  - Water fountains are not available for use unless no touch options for refilling waterbottles is available.
  - Skills development and conditioning activities are allowed so long as social distancing is practiced. Scrimmages or competitions, whether or not formally organized, are prohibited.
  - Classes held outside are limited to a maximum of twenty (20) people, including staff, while observing social distancing.
  - Public locker rooms and showers are closed. Fitness centers within private clubs and hotels with reserved locker space are exempt.
  - Steam rooms, hot tubs, and dry saunas are closed.
  - Facilities will follow guidelines of sport specific governing bodies, related to COVID-19 if applicable.
  - Summer Youth Camps, Activities and Programs which utilizes indoor recreational facilities will abide by the above capacity limitations.
4. **Accommodation and Lodging.** All hotels, accommodation, and lodging will comply with the following additional restrictions and limitations:
- Reception areas, registration, concierge, and valet areas should be screened by a plexiglass or similar barrier.
  - Appropriate PPE (wearing non-surgical mask or face covering and gloves) will be worn by all employees based on their role and responsibilities and in adherence to state or local regulations and guidance. Training on how to properly use and dispose of all PPE will be mandatory. Every employee entering the Hotel/Resort should be provided a non-surgical mask or face covering and be required to wear such while on hotel property. Gloves will be provided to employees whose responsibilities require them as determined by medical experts including

housekeeping and public area attendants and security officers in direct contact with guests.

- Shuttle services will adhere to guidance provided by the Health Department.
- Where a guest, member, or patron tests positive for COVID-19, management will house such guest, member or patron during the quarantine period.
- Management will post signage approved by the Health Department which advises members, guests and patrons of COVID-19 protocols. Guests, members, patrons should receive a COVID-19 awareness/information.
- Room service food delivery is permitted.
- Daily housekeeping services should be discontinued to prevent transmission between rooms during guest stays and protect employee exposure occurrence. An outright prohibition for any mid-stay services is not recommended. If a mid-stay or daily service is provided, employees will minimize contact with guests while cleaning hotel rooms; guest room attendants will offer to return at an alternate time for occupied rooms. Industry leading cleaning and sanitizing protocols must be used to clean guest rooms, with particular attention paid to high-touch items including television remote controls, toilet seats and handles, door and furniture handles, water faucet handles, nightstands, telephones, in-room control panels, light switches, temperature control panels, alarm clocks, luggage racks and flooring.
- Daily guest room cleaning should include a complete change of towels, bed linens, pillows, pillowcases, and guest consumable items. Launder all exposed linens and cleaning supplies separately, washed at high temperatures and in accordance with CDC guidelines. Dirty linen will be bagged in the guest room to eliminate excess contact while being transported to the laundry facility.
- Provide guest with their own in-room sanitation solutions, sprays, or wipes to instill guest confidence (e.g.; alcohol wipes).
- Hand sanitizer dispensers, touchless whenever possible, will be placed at key guest and employee entrances and contact areas such as entrances, reception areas, hotel lobbies, restaurant entrances meeting and convention spaces, elevator landings, pools, salons and exercise areas. Hand sanitizer throughout the back of house (in touchless dispensers) for employees.



- Employees will be trained on how to respond swiftly and report all presumed cases of COVID-19 as required by the Health Department. Management will be ready to provide support to members, guests, and patrons.
- Case Notification. If there is a report of a presumptive case of COVID-19 at the facility, the workplace coordinator, who will be responsible for COVID-19 issues, will notify and work with the Health Department on appropriate actions.
- Members, guests, and patrons will enter the hotel/resort through doors that are either propped open, are automated or manually operated by an employee.
- Guests requesting bell service will be assisted and the bell cart will be sanitized after each guest is assisted.
- Valet services will be suspended until further notice.
- Hotel vehicles will be thoroughly cleaned before and after each use.
  - No more than four guests will be permitted per SUV and no more than two guests will be permitted per sedan.
  - Guests will not be permitted in the front passenger seat.
  - Employees will not open the doors of cars or taxis.
- Elevators shall be limited to single rides or member of the same household or roommates.
- The frequency of air filter replacement and HVAC system cleaning will be increased and fresh air exchange will be maximized.
- Shared tools and equipment will be sanitized before, during and after each shift or anytime the equipment is transferred to a new employee. This includes phones, radios, computers and other communication devices, payment terminals, kitchen implements, engineering tools, safety buttons, folios, cleaning equipment, keys, time clocks and all other direct contact items used throughout the hotel/resort. The use of shared food and beverage equipment in back of the house office kitchens (including shared coffee brewers) will be discontinued.
- Management will comply with Food Service protocols for restaurants, bars, taverns, and nightclubs.
- Management will comply with Indoor Recreation protocols.
- Public area furnishings, conference layouts, and other physical layouts will be arranged to ensure appropriate social distancing.

- Meeting and banquet set-up arrangements will allow for physical distancing between guests in all meetings and events. Gatherings of more than twenty (20) guests in any conference or meeting room is prohibited. Buffets will be subject to the Food Service protocols.
  - Leisure swimming pools will remain closed until otherwise allowed by the Health Department.
  - All public and communal hot tubs, dry saunas, and steam rooms will be closed to members, guests, patrons, and the general public. Hot tubs located within rooms, for use by the guest, will be permitted if cleaned and disinfected between guests.
5. **Arts, Special Events and Entertainment.** All arts and entertainment businesses, including special events, mass gatherings, sporting events, parades, concerts, theatres, museums, zoos, aquariums, aviaries, farmer's markets, weddings, funerals, and botanical gardens, will comply with the following additional restrictions and limitations:
- Facilities and venues will operate with no more than twenty (20) people gathered. Social distancing will be followed and practiced at all times including six (6) feet within groups, and ten (10) feet between groups.
  - Management will identify a workplace coordinator who is responsible for COVID 19 related issues and impacts to the business or organization. This includes communication, operations and cleaning supplies/schedule, required and recommended PPE per Health Department as part of uniform, and a protocol for reporting illness to management for staff, volunteers, patrons and performers or other contractors.
  - Prioritize touch-less payment, ticketing, playbills, and waste (ie, no lid to touch on garbage/recycle receptacles). Disinfect between transactions at facility stores/gift shops. Trash and Waste receptacles or other high touch items will not have lids and be emptied prior to overflow.
  - Staff and volunteers are strongly encouraged to wear non-surgical masks or face coverings. Employee should wear gloves, if possible.
  - Facility will be cleaned and sanitized throughout the day and at the beginning of each day.
  - Additional attention will be concentrated in areas where staff/patrons are using shared space (ex. theatre seats, galleries, museums, interactive displays).

- Floor plan layouts will be created to allow social distancing requirements. These will be made available to the Health Department upon request. When possible, work in teams to reduce exposure across all staff.
- Management will have seating charts (reserved seating) for performances to ensure social distancing practices are maintained and staff/volunteers understand such arrangements. Reserved-seating facilities will have a maximum capacity of twenty (20) people. Management will maintain a log of attendees/participants/ticket holders by program/show digitally. This should include full name, county of residence, and contact information. This information will be made available to the Health Department upon request.
- During performances it is recommended that a staff or volunteer assist in restrooms to ensure restrooms are not clustered, handwashing is preformed, and supplies and facility is adequately clean and stocked.
- Outside of performances, restrooms should be regularly checked to ensure the facility is clean and adequately stocked.
- Staff or volunteers will escort or usher patrons into and out of performances or screenings and monitor patrons for compliance in gallery/museum settings. When possible, have various entry and exit points. This will prevent clustering in doorways. Staff or a volunteer should escort or usher patrons into and out of shows or galleries to ensure proper distancing. There may be some scenarios when an usher isn't needed (such as a gallery or museum setting), in which case staff or a volunteer will observe patrons to ensure their compliance with social distancing practices.
- Staff will have the authority to ask patrons to leave facility if they believe they are ill or have symptoms of illness.
- Youth/Children should be supervised by a designated adult or guardian if participating in programs. If children cannot be accompanied by an adult, previous arrangements must be made with management.
- All takeaway marketing, ticketing and playbills will be paperless (digital). A master copy of these types of materials may be displayed behind a protective surface for patrons who do not have the ability to access digital platforms. Playbills, tickets or other brochures will be digital. Pre-purchase of tickets or participation is strongly encouraged. Continue digital participation options for patrons who are not comfortable in participation. This includes those who are immune compromised or otherwise highrisk.
- Use of communal materials or equipment must follow strict cleaning procedures after each use (i.e.; art supplies, instruments, equipment, exhibits, costumes, etc.).

At all possible costs, management should work with patrons to use their own personal supplies and equipment (not share).

- Allow staff to continue telecommuting when they do not need to be present in the workplace. Staff should not linger in the workplace if they are not working. Continue to promote customers calling-in for business that does not require contact (i.e.; purchase tickets).
- Booths or vendors must be ten (10) feet apart. Handwashing stations are required for every five (5) booths.
- Expanding outdoor venue areas is highly recommended. Extending times or days over which the activity occurs are also encouraged to reduce gathering numbers and spread out participation when possible.

**Section 5. Closures.** All hot tubs, dry saunas, steam rooms, public locker rooms, bike share, and leisure pools will be closed to members, guests, patrons, and the general public.

**Section 6. Public and Private Gatherings Prohibited.** All public and private gatherings of more than twenty (20) people are prohibited.

- A. This prohibition of gatherings will not apply to critical government services (such as fire, police, emergency response, and court services) or to hospitals, domestic violence shelters, homeless shelters, licensed or contracted residence care providers, retail and grocery stores, restaurants, gas stations, churches, building and construction worksites, and the shipping, transportation, and airline industries.
- B. This prohibition of gatherings will not apply to members of the same household or living unit.
- C. Exceptions from this prohibition of gatherings may be granted on a case-by-case basis to a formal organization, who exercises oversight with respect to the activity, based upon having adequate protocols which mitigate the public health risks. Applications for exceptions can be made to the Health Department.

**Section 7. Conflicts.** In the event of a conflict between the Phased Health Guidelines and the Business Specific Protocols, the more restrictive protocol or practice shall control.

**Section 8. Effective Date; Duration.** This Order shall become effective at 12:01 a.m. on May 16, 2020, and will continue to be in effect until 11:59 p.m. on May 22, 2020, or until it is extended, rescinded, superseded, or amended in writing. This Order shall be re-evaluated in seven (7) calendar days. Should scientific data indicate that the spread of COVID-19 in Summit County has substantially increased, the County may reinstitute the Stay-at-Home Order.

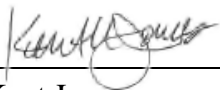
Section 9.     **Publication.** This Order shall be on file for public inspection with the Summit County Clerk and the Summit County Health Department.

Section 10.    **Enforcement.** The County Sheriff and Chiefs of Police within the County are directed to ensure compliance with and enforce this Order. Notwithstanding such, the purpose of this Order is to protect individuals' health and not to hold them criminally liable. Discretion will be used in the citing and prosecution of violations of this Order.


Section 11.    **Appeal.** This Order may be appealed to the Summit County Board of Health within ten (10) calendar days in accordance with Summit County Code of Health §1-1-9.

ORDERED, APPROVED, ADOPTED, and PASSED, and published, this 14<sup>th</sup> day of May, 2020.

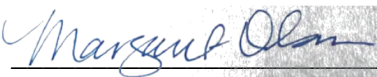
ATTEST:

  
\_\_\_\_\_  
Kent Jones  
Summit County Clerk

**SUMMIT COUNTY COUNCIL**

  
\_\_\_\_\_  
Doug Clyde, Chair

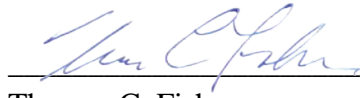
APPROVED AS TO FORM

  
\_\_\_\_\_  
Margaret H. Olson  
Summit County Attorney

VOTING OF COUNTY COUNCIL:

Councilmember Carson	<u>Aye</u>
Councilmember Robinson	<u>Aye</u>
Councilmember Clyde	<u>Aye</u>
Councilmember Armstrong	<u>Aye</u>
Councilmember Wright	<u>Aye</u>

**BY ORDER OF THE SUMMIT COUNTY MANAGER**



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Thomas C. Fisher  
Summit County Manager

**BY ORDER OF THE SUMMIT COUNTY HEALTH OFFICER**



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Richard C. Bullough, PhD  
County Health Officer

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COUNTY COUNCIL, COUNTY MANAGER, AND BOARD OF HEALTH  
IN AND FOR SUMMIT COUNTY, STATE OF UTAH

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In the matter of:

COVID-19 Pandemic within Summit County

**JOINT PUBLIC HEALTH ORDER  
(Stabilization Phase)**

Order No.: 2020-07

Date: May 21, 2020

Legal Authority: Utah Code §26A-1-114  
Utah Code §17-50-  
302(1)(a)(ii)  
Summit County Code  
§4-5-6(A)

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The Utah Leads Together Plan lays out three-phases to the COVID-19 (coronavirus) pandemic response: “**Urgent Phase**,” “**Stabilization Phase**,” and “**Recovery Phase**.” The Urgent Phase directs resources and regulations aimed at stopping the spread of the virus and ensures that our health care system does not become overwhelmed. The Stabilization Phase transitions into an effort to mitigate the spread of the virus, while simultaneously re-activating the economy step-by-step. To assist in this effort, an operational dashboard has been provided,

which establishes a color-coded health guidance system. This system consists of four levels: High Risk (red), Moderate Risk (orange), Low Risk (yellow), and New Normal (green).

Summit County (“**County**”) issued its Joint Public Health Order 2020-05 with an effective date of May 1, 2020, which transitioned the risk level in the County from High Risk (red) to Moderate Risk (orange) with community specific protocols for businesses and industries.

On May 14, 2020, the Governor issued a new executive order which reduced the majority of the state to Low Risk (yellow), but specifically did not change the Moderate Risk (orange) in Summit County.

The County issued its Joint Public Health Order 2020-06 with an effective date of May 16, 2020, which set forth that the County remain at Moderate Risk (orange) with community specific protocols for food service, lodging and accommodations, indoor recreational facilities, and arts, special events, and entertainment.

In issuing this Joint Public Health Order 2020-07 (this “**Order**”), the County transitions from Moderate Risk (orange) to Low Risk (yellow), and adopts the Utah Leads Together Plan, inclusive of its updated and amended Phased Guidelines for the General Public and Businesses to Maximize Community Health and Economic Re-activation (the “**Phased Health Guidelines**”).

**THEREFORE, PURSUANT TO UTAH CODE §26A-1-114, UTAH CODE §17-50-302, SUMMIT COUNTY CODE §5-4-6, AND SUMMIT COUNTY CODE OF HEALTH §1-1-10(b), BE IT HEREBY ORDERED BY RICHARD C. BULLOUGH, PHD, SUMMIT COUNTY HEALTH OFFICER, THE SUMMIT COUNTY COUNCIL, AND THOMAS C. FISHER, SUMMIT COUNTY MANAGER, IN CONSULTATION WITH THE SUMMIT COUNTY BOARD OF HEALTH, AS FOLLOWS:**

**Section 1. Purpose.** The intent of this Order is to transition from risk level Orange to Yellow in a manner so as to allow a phased normalization of business and commerce, while at the same time continuing to require social distancing, as defined in the Phased Health Guidelines, so as to prevent the spread of the COVID-19 coronavirus. All provisions of this Order shall be interpreted to effectuate this intent.

**Section 2. Low Risk - Yellow.** Joint Public Health Order 2020-06 is hereby rescinded and replaced in its entirety by this Order. The County transitions to the Stabilization Phase, from Moderate Risk (orange) to Low Risk (yellow).

**Section 3. Adoption of Phased Health Guidelines.** The County hereby adopts in its entirety the Phased Health Guidelines for Low Risk (yellow). All individuals currently living within or visiting Summit County, Utah, and all businesses operating within Summit County,



Utah, are ordered to comply with the protocols set forth in the Phased Health Guidelines for Low Risk (yellow) in the following categories:

- General Public (Overview of Guidelines, Social Guidelines, Use of Face Coverings, Family Gatherings, Church Services, Children, Outdoor Recreation, Pools, Water Parks, and Spas).
- Public and Private Gatherings.<sup>1</sup>
- High-Risk Individuals.
- General Employer (Overview of Guidelines, General Employer Guidelines, including Best Practices for Employers, Cleaning & Hygiene Guidelines for Employers, and Employers Monitoring Systems).
- Business Specific Guidelines.
  - Restaurants, Food Service Establishments, Bars, Food Trucks, and C-Stores (including the Appendix, “Guidelines for Dine-in Restaurant Open in Orange & Yellow”).
  - Retail (including Grocery Stores, Pharmacies, and C-Stores).
  - Hospitality, Tourism and Accommodations.
  - Events, Cultural Arts and Entertainment (including sporting events, concerts, rodeos, convention centers, theatres, museums, zoos, aquariums, aviaries, botanical gardens, libraries, and indoor arenas).
  - Personal Services (including barbers, cosmetologists, body artists, nail technicians, tanning, etc.).
  - Home Repair.
  - Gyms and Fitness Centers (including indoor recreation centers, yoga studios, dance, tumbling, indoor soccer, etc.).
  - Construction, General Contractors and Manufacturing.
  - Child Day Care.

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<sup>1</sup> A “formal organization” is defined as an occupation, profession, organization, association, charity, corporation, partnership, church, utility, or business which is registered with, holds an exemption from, or is licensed by the Utah Department of Commerce, the Utah State Bar, or the United States Internal Revenue Service.

- Hospital Settings and Ambulatory Surgical Facilities.
- Non-hospital Settings, including Dentistry.

To the extent that the Phased Health Guidelines make compliance a recommendation or directive, the County hereby makes such recommendation or directive mandatory and enforceable under law.

Section 4.     **Phased Guidelines Attestation Checklist.** With respect to private and public gatherings associated with Events, Cultural Arts and Entertainment (including sporting events, concerts, rodeos, convention centers, theatres, museums, zoos, aquariums, aviaries, botanical gardens, libraries, and indoor arenas), a formal organization may submit on a form provided by the Summit County Health Department an attestation of compliance with the Phased Health Guidelines for Low Risk (yellow) (the “**Phased Guidelines Attestation Checklist**”). The Phased Guidelines Attestation Checklist may be posted at the site of the private or public gathering.

Section 5.     **Effective Date; Duration.** This Order shall become effective at 12:01 a.m. on May 22, 2020, and will continue to be in effect until 11:59 p.m. on September 1, 2020, or until it is extended, rescinded, superseded, or amended in writing. This Order shall be re-evaluated in fourteen (14) calendar days. Should scientific data indicate that the spread of COVID-19 in Summit County has substantially increased, the County may reinstitute the Moderate Risk (orange) or High Risk (red).

Section 6.     **Publication.** This Order shall be on file for public inspection with the Summit County Clerk and the Summit County Health Department.


Section 7.     **Enforcement.** The County Sheriff and Chiefs of Police within the County are directed to ensure compliance with and enforce this Order. Notwithstanding such, the purpose of this Order is to protect individuals’ health and not to hold them criminally liable. Discretion will be used in the citing and prosecution of violations of this Order.

Section 8.     **Appeal.** This Order may be appealed to the Summit County Board of Health within ten (10) calendar days in accordance with Summit County Code of Health §1-1-9.

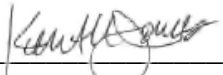
Signatures to follow on next page

ORDERED, APPROVED, ADOPTED, and PASSED, and published, this 21<sup>st</sup> day of May, 2020.

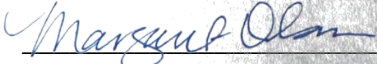
**SUMMIT COUNTY COUNCIL**

  
\_\_\_\_\_  
Doug Clyde, Chair

Attest:


  
\_\_\_\_\_  
Kent Jones  
Summit County Clerk

Approved as to form:


  
\_\_\_\_\_  
Margaret H. Olson  
Summit County Attorney

<u>VOTING OF COUNTY COUNCIL:</u>	
Councilmember Carson	<u>Aye</u>
Councilmember Robinson	<u>Aye</u>
Councilmember Clyde	<u>Aye</u>
Councilmember Armstrong	<u>Aye</u>
Councilmember Wright	<u>Aye</u>

**BY ORDER OF THE SUMMIT COUNTY MANAGER**

  
\_\_\_\_\_  
Thomas C. Fisher  
Summit County Manager

**BY ORDER OF THE SUMMIT COUNTY HEALTH OFFICER**

  
\_\_\_\_\_  
Richard C. Bullough, PhD  
County Health Officer

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COUNTY COUNCIL, COUNTY MANAGER, AND BOARD OF HEALTH  
IN AND FOR SUMMIT COUNTY, STATE OF UTAH

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In the matter of:	:	<b>JOINT PUBLIC HEALTH ORDER</b>
	:	<b>(Stabilization Phase)</b>
COVID-19 Pandemic within Summit County	:	
	:	Order No.: 2020-08
	:	Date: June 26, 2020
	:	Legal Authority: Utah Code §26A-1-114
	:	Utah Code §17-50-
	:	302(1)(a)(ii)
	:	Summit County Code
	:	§4-5-6(A)
	:	

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The Summit County Health Officer (“**SCHO**”) issued his Public Health Order 2020-01 on March 15, 2020.

The SCHO issued his Public Health Order 2020-02 on March 23, 2020.

The SCHO, Summit County Council (“**Council**”), and the Summit County Manager (“**Manager**”) (together, the “**County**”) issued their Joint Public Health Order 2020-03 (the “**Stay-at-Home Order**”) on March 25, 2020.

The SCHO issued his Amended Public Health Order 2020-04 on March 31, 2020, which extended Public Health Order 2020-01 and 2020-02 to be co-terminus with the Stay-at-Home Order.

The Governor of the State of Utah has issued his “Utah Leads Together (Version 3)” and “Phased Guidelines for the General Public and Businesses to Maximize Community Health and Economic Re-activation” (together, the “**Utah Leads Together Plan**”).

The Utah Leads Together Plan lays out three-phases to the COVID-19 (coronavirus) pandemic response: “**Urgent Phase**,” “**Stabilization Phase**,” and “**Recovery Phase**.” The Urgent Phase directs resources and regulations aimed at stopping the spread of the virus and ensures that our health care system does not become overwhelmed. The Stabilization Phase transitions into an effort to mitigate the spread of the virus, while simultaneously re-activating the economy step-by-step. To assist in this effort, an operational dashboard has been provided,

which establishes a color-coded health guidance system. This system consists of four levels: High Risk (red), Moderate Risk (orange), Low Risk (yellow), and New Normal (green).

The County issued its Joint Public Health Order 2020-05 with an effective date of May 1, 2020, which transitioned the risk level in the County from High Risk (red) to Moderate Risk (orange) with community specific protocols for businesses and industries.

The County issued its Joint Public Health Order 2020-06 with an effective date of May 16, 2020, which set forth that the County remain at Moderate Risk (orange) with community specific protocols for food service, lodging and accommodations, indoor recreational facilities, and arts, special events, and entertainment.

The County issued its Joint Public Health Order 2020-07 on May 21, 2020, which transitioned the County from Moderate Risk (orange) to Low Risk (yellow), and adopted the Utah Leads Together Plan, inclusive of its updated and amended Phased Guidelines for the General Public and Businesses to Maximize Community Health and Economic Re-activation (the “**Phased Health Guidelines**”).

Version 4.6 of the Phased Health Guidelines requires that in public settings “face coverings are to be worn when physical distancing is not feasible.” Further, the Phased Health Guidelines stress that “[w]hile wearing face coverings has proven to be somewhat effective in slowing the spread of COVID-19, they will not completely eliminate the risk of COVID-19 spread. Therefore, sound judgment, physical distancing and hygiene practices are important principles that must accompany appropriate use of face coverings.” The Governor’s Executive Order 2020-32, dated June 19, 2020, which adopted Version 4.6 of the Phased Health Guidelines, provides that the wearing of a face covering is a “strong recommendation.”

The number of positive tests of COVID-19 in the State of Utah has been spiking since May 27, 2020, with a rate exceeding that in our neighboring State of Colorado by 350%, COVID-19 patients in Utah hospitals have increased from an average of 90 to 150 during the month of June, and Intermountain Health Care, which runs the Park City Hospital (the County’s sole hospital provider), reports that if current trends continue it will run out of conventional ICU capacity in July. Further, the percent of positive cases from testing has increased from 4.96% to 9.23% over this same period. The 7-day rolling average of new cases in Utah continues to be greater than 400.

Dr. Angela Dunn, the state’s epidemiologist, indicated in a June 19, 2020 memorandum, that if the rolling 7-day average of new cases is not reduced to 200 by July 1, we as a state, may need to start transitioning back to Moderate Risk (orange). Dr. Dunn recommended that mandatory mask wearing be implemented as a way to stem this current trajectory of new COVID-19 cases.

Summit County continues to have a case rate of 1,104.1 per 100,000 population, the third highest in the state. The County's Proximity Transmission Rate is at 2.5, and has been above the state goal of 1.5 continuously since June 10. The proportion of positive cases related to travel has steadily increased from 0% on Memorial Day to 13% today. The County has had nine (9) consecutive days of increased new (incidence) cases, based on the CDC 3-day average methodology. Additionally, the County has experienced an increase in Positivity Test Rates from 2.5% on June 12 to 4% on June 21, exceeding the state target of 3%.

While these data may not be as dire at this moment as some surrounding jurisdictions, all the trends are unfavorable. Summit County is a location to which people travel, often from areas experiencing rapid disease spread. Based on the current adverse County data trends, and the surging cases in surrounding counties, the best strategy to averting a future business shutdown is through a mandatory mask measure.

The business community and resort economy in Summit County simply cannot endure a return to Moderate Risk (orange) without suffering catastrophic economic damage. The County needs an expedient solution. Dr. Dunn's recommendation of mandatory mask regulations provides the County with one that could be implemented immediately. Such a regulation also reflects the general opinion of members of the Park City Chamber of Commerce, according to a recent, informal poll.

According to the most recent guidance from the CDC, they "advise the use of simple cloth face coverings to slow the spread of the virus and help people who may have the virus and do not know it from transmitting it to others."<sup>1</sup> An article appearing in the Wall Street Journal noted that health agencies have identified "respiratory-droplet contact as the major mode of Covid-19 transmission;<sup>2</sup>" thus adding support for the use of face masks. Further, "[e]vidence from 10 studies (across all three viruses, including 2,647 participants) found benefits for face masks in general (risk of infection or transmission when wearing a mask was 3% vs 17% when not wearing a mask)."<sup>3</sup> In fact, a recent study found decreased mortality rates associated with face coverings.<sup>4</sup>

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<sup>1</sup> <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover.html>

<sup>2</sup> Daniela Hernandez, Sarah Toy, and Betsey McKay, "How Exactly Do You Catch Covid-19? There Is a Growing Consensus," *The Wall Street Journal* (June 16, 2020).

<sup>3</sup> "Physical distancing, face masks, and eye protection to prevent person-to-person transmission of SARS-CoV-2 and Covid 19: a systematic review and meta-analysis," DK Chu, MD; EA Aki, MD; S Duda, MSc; K Solo, MSc, et. al. *The Lancet* (Open Access Published June 01, 2020).

<sup>4</sup> Leffler, Christopher & Ing, Edsel & Lykins, Joseph & Hogan, Matthew & McKeown, Craig & Grzybowski, Andrzej. (2020). Association of country-wide coronavirus mortality with demographics, testing, lockdowns, and public wearing of masks (Update June 15, 2020). <https://www.researchgate.net/community/COVID-19>

In order to stem the acceleration of the spread of COVID-19 and prevent a possible return to Moderate Risk (orange), it is necessary for the citizen populace to wear face coverings in certain public settings regardless of social distancing.

The County requested and has received an exemption from the Governor's Executive Order 2020-32, which allows the County to impose a mandatory face covering order.

**THEREFORE, PURSUANT TO UTAH CODE §26A-1-114, UTAH CODE §17-50-302, SUMMIT COUNTY CODE §5-4-6, AND SUMMIT COUNTY CODE OF HEALTH §1-1-10(b), BE IT HEREBY ORDERED BY RICHARD C. BULLOUGH, PHD, SUMMIT COUNTY HEALTH OFFICER, THE SUMMIT COUNTY COUNCIL, AND THOMAS C. FISHER, SUMMIT COUNTY MANAGER, IN CONSULTATION WITH THE SUMMIT COUNTY BOARD OF HEALTH, AS FOLLOWS:**

Section 1. **Purpose.** The intent of this Order is to require all individuals living within or visiting Summit County, Utah, to wear face coverings while inside publicly accessed indoor establishments. All provisions of this Order shall be interpreted to effectuate this intent.

Section 2. **Face Coverings Mandatory.** The County hereby orders all individuals currently living within or visiting Summit County, Utah, to wear a face covering that completely covers the nose and mouth in the following circumstances:

- 2.1 Inside of, or in line to enter, any indoor space, which is open to members of the public;
- 2.2 Obtaining services from the healthcare industry in settings, including without limitation, a hospital, pharmacy, medical clinic, laboratory, physician or dental office, veterinary clinic, or blood bank, unless directed otherwise by a healthcare provider;
- 2.3 Employees, staff, or volunteers engaging in work, whether inside or outside at the workplace or performing work off-site, when:
  - 2.3.1 Interacting in-person with any member of the public;
  - 2.3.2 Working in any space visited by members of the public, regardless of whether anyone from the public is present at the time.
  - 2.3.3 Working in any space where food is prepared or packaged for sale or distribution.
- 2.4 At all community gatherings, indoor or outdoor, which is defined as a gathering of over fifty (50) people in any one location.

Section 3.     **Exemptions.** The following individuals are exempt from wearing a face covering:

- 3.1     Individuals age two years or under.
- 3.2     Individuals with a medical condition, mental health condition, or disability that prevents wearing a face covering.
- 3.3     Individuals who are hearing impaired, or communicating with an individual who is hearing impaired, where the ability to see the mouth is essential for communication.
- 3.4     Individuals for whom wearing a face covering would create a risk to the individual related to their work, as determined by local, state or federal regulators or workplace safety guidelines.
- 3.5     Individuals who are obtaining a service involving the nose or face for which temporary removal of the face covering is necessary to perform the service.
- 3.6     Individuals who are seated at a restaurant or other establishment that offers food or beverage service, while they are eating or drinking.
- 3.7     Individuals who are purchasing a product or receiving a service that requires identification may briefly remove a face covering, as necessary, so that the retailer or service provider can verify identity.

Section 4.     **Posting.** All businesses open to the public where face coverings are required hereunder, shall post a notice in form and substance promulgated by the Summit County Health Department, in a clearly visible location at or near the entrance to such place of business, that declares that face coverings are to be worn by order of the Summit County Health Department.

Section 5.     **Effective Date; Duration.** This Order shall become effective at 12:01 a.m. on June 27, 2020, and will continue to be in effect until 11:59 p.m. on September 1, 2020, or until it is extended, rescinded, superseded, or amended in writing. This Order shall be re-evaluated in fourteen (14) calendar days.

Section 6.     **Publication.** This Order shall be on file for public inspection with the Summit County Clerk and the Summit County Health Department.

Section 7.     **Enforcement.** The County Sheriff and Chiefs of Police within the County are directed to ensure compliance with and enforce this Order. Violations of this Order shall be punished as an infraction. Notwithstanding such, the purpose of this Order is to protect individuals' health and not to hold them criminally liable. Discretion will be used in the citing and prosecution of violations of this Order.



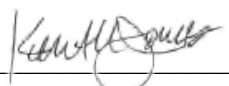
Section 8. **Appeal.** This Order may be appealed to the Summit County Board of Health within ten (10) calendar days in accordance with Summit County Code of Health §1-1-9.

ORDERED, APPROVED, ADOPTED, and PASSED, and published, this 26<sup>th</sup> day of June, 2020.

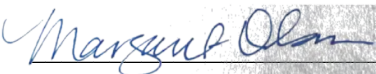
**SUMMIT COUNTY COUNCIL**

  
\_\_\_\_\_  
Doug Clyde, Chair

Attest:

  
\_\_\_\_\_  
Kent Jones  
Summit County Clerk


Approved as to form:

  
\_\_\_\_\_  
Margaret H. Olson  
Summit County Attorney

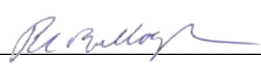
VOTING OF COUNTY COUNCIL:

Councilmember Carson	<u>Absent</u>
Councilmember Robinson	<u>Absent</u>
Councilmember Clyde	<u>Aye</u>
Councilmember Armstrong	<u>Aye</u>
Councilmember Wright	<u>Aye</u>

**BY ORDER OF THE SUMMIT COUNTY MANAGER**

  
\_\_\_\_\_  
Thomas C. Fisher  
Summit County Manager

**BY ORDER OF THE SUMMIT COUNTY HEALTH OFFICER**

  
\_\_\_\_\_  
Richard C. Bullough, PhD  
County Health Officer

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COUNTY COUNCIL, COUNTY MANAGER, AND BOARD OF HEALTH  
IN AND FOR SUMMIT COUNTY, STATE OF UTAH

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In the matter of:

COVID-19 Pandemic within Summit County

**JOINT PUBLIC HEALTH ORDER  
(Stabilization Phase)**

Order No.: 2020-08 (Amended)

Date: July 1, 2020

Legal Authority: Utah Code §26A-1-114  
Utah Code §17-50-  
302(1)(a)(ii)  
Summit County Code  
§4-5-6(A)

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The SCHO issued his Public Health Order 2020-02 on March 23, 2020.

The SCHO, Summit County Council (“**Council**”), and the Summit County Manager (“**Manager**”) (together, the “**County**”) issued their Joint Public Health Order 2020-03 (the “**Stay-at-Home Order**”) on March 25, 2020.

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The Utah Leads Together Plan lays out three-phases to the COVID-19 (coronavirus) pandemic response: “**Urgent Phase**,” “**Stabilization Phase**,” and “**Recovery Phase**.” The Urgent Phase directs resources and regulations aimed at stopping the spread of the virus and ensures that our health care system does not become overwhelmed. The Stabilization Phase transitions into an effort to mitigate the spread of the virus, while simultaneously re-activating the economy step-by-step. To assist in this effort, an operational dashboard has been provided,

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The number of positive tests of COVID-19 in the State of Utah has been spiking since May 27, 2020, with a rate exceeding that in our neighboring State of Colorado by 350%, COVID-19 patients in Utah hospitals have increased from an average of 90 to 150 during the month of June, and Intermountain Health Care, which runs the Park City Hospital (the County’s sole hospital provider), reports that if current trends continue it will run out of conventional ICU capacity in July. Further, the percent of positive cases from testing has increased from 4.96% to 9.23% over this same period. The 7-day rolling average of new cases in Utah continues to be greater than 400.

Dr. Angela Dunn, the state’s epidemiologist, indicated in a June 19, 2020 memorandum, that if the rolling 7-day average of new cases is not reduced to 200 by July 1, we as a state, may need to start transitioning back to Moderate Risk (orange). Dr. Dunn recommended that mandatory mask wearing be implemented as a way to stem this current trajectory of new COVID-19 cases.

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While these data may not be as dire at this moment as some surrounding jurisdictions, all the trends are unfavorable. Summit County is a location to which people travel, often from areas experiencing rapid disease spread. Based on the current adverse County data trends, and the surging cases in surrounding counties, the best strategy to averting a future business shutdown is through a mandatory mask measure.

The business community and resort economy in Summit County simply cannot endure a return to Moderate Risk (orange) without suffering catastrophic economic damage. The County needs an expedient solution. Dr. Dunn's recommendation of mandatory mask regulations provides the County with one that could be implemented immediately. Such a regulation also reflects the general opinion of members of the Park City Chamber of Commerce, according to a recent, informal poll.

According to the most recent guidance from the CDC, they "advise the use of simple cloth face coverings to slow the spread of the virus and help people who may have the virus and do not know it from transmitting it to others."<sup>1</sup> An article appearing in the Wall Street Journal noted that health agencies have identified "respiratory-droplet contact as the major mode of Covid-19 transmission;<sup>2</sup>" thus adding support for the use of face masks. Further, "[e]vidence from 10 studies (across all three viruses, including 2,647 participants) found benefits for face masks in general (risk of infection or transmission when wearing a mask was 3% vs 17% when not wearing a mask)."<sup>3</sup> In fact, a recent study found decreased mortality rates associated with face coverings.<sup>4</sup>

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In order to stem the acceleration of the spread of COVID-19 and prevent a possible return to Moderate Risk (orange), it is necessary for the citizen populace to wear face coverings in certain public settings regardless of social distancing.

The County requested and has received an exemption from the Governor's Executive Order 2020-32, which allows the County to impose a mandatory face covering order.

The County issued its Joint Public Health Order 2020-08 on June 26, 2020. Since issuing such, the County has discovered that face shields provide adequate protection from the transmission of COVID-19.

**THEREFORE, PURSUANT TO UTAH CODE §26A-1-114, UTAH CODE §17-50-302, SUMMIT COUNTY CODE §5-4-6, AND SUMMIT COUNTY CODE OF HEALTH §1-1-10(b), BE IT HEREBY ORDERED BY RICHARD C. BULLOUGH, PHD, SUMMIT COUNTY HEALTH OFFICER, THE SUMMIT COUNTY COUNCIL, AND THOMAS C. FISHER, SUMMIT COUNTY MANAGER, IN CONSULTATION WITH THE SUMMIT COUNTY BOARD OF HEALTH, AS FOLLOWS:**

Section 1.     **Purpose.** The intent of this Amended Order is to require all individuals living within or visiting Summit County, Utah, to wear Face Coverings or Face Shields while inside publicly accessed indoor establishments. All provisions of this Amended Order shall be interpreted to effectuate this intent.

Section 2.     **Definitions.**

- 2.1     "Face Covering" means a cloth, paper, or disposable face covering that completely covers the nose and the mouth.
- 2.2     "Face Shield" means a clear plastic shield that covers the forehead, extends below the chin, and wraps around the sides of the face.

Section 3.     **Face Coverings and Face Shields Mandatory.** The County hereby orders all individuals currently living within or visiting Summit County, Utah, to wear a Face Covering or Face Shield in the following circumstances:

- 3.1     Inside of, or in line to enter, any indoor space, which is open to members of the public;
- 3.2     Obtaining services from the healthcare industry in settings, including without limitation, a hospital, pharmacy, medical clinic, laboratory, physician or dental office, veterinary clinic, or blood bank, unless directed otherwise by a healthcare provider;

- 3.3 Employees, staff, or volunteers engaging in work, whether inside or outside at the workplace or performing work off-site, when:
  - 3.3.1 Interacting in-person with any member of the public;
  - 3.3.2 Working in any space visited by members of the public, regardless of whether anyone from the public is present at the time.
  - 3.3.3 Working in any space where food is prepared or packaged for sale or distribution.
- 3.4 At all community gatherings, indoor or outdoor, which is defined as a gathering of over fifty (50) people in any one location.

**Section 4. Exemptions.** The following individuals are exempt from wearing a Face Covering or Face Shield:

- 4.1 Individuals age two years or under.
- 4.2 Individuals with a medical condition, mental health condition, or disability that prevents wearing a Face Covering or Face Shield.
- 4.3 Individuals who are hearing impaired, or communicating with an individual who is hearing impaired, where the ability to see the mouth is essential for communication.
- 4.4 Individuals for whom wearing a Face Covering or Face Shield would create a risk to the individual related to their work, as determined by local, state or federal regulators or workplace safety guidelines.
- 4.5 Individuals who are obtaining a service involving the nose or face for which temporary removal of the Face Covering or Face Shield is necessary to perform the service.
- 4.6 Individuals who are seated at a restaurant or other establishment that offers food or beverage service, while they are eating or drinking.
- 4.7 Individuals who are purchasing a product or receiving a service that requires identification may briefly remove a Face Covering or Face Shield, as necessary, so that the retailer or service provider can verify identity.
- 4.8 Because children between the ages of two (2) and twelve (12) years of age can have challenges wearing a Face Covering or Face Shield properly (e.g., excessively touching the Face Covering, not changing the Face Covering if

visibly soiled, risk of strangulation or suffocation, etc.), they are to be worn with the assistance and close supervision of an adult. Face Coverings or Face Shields are never to be worn by children when sleeping.

- 4.9 Individuals engaging in work where they are alone in an indoor establishment or facility.
- 4.10 As approved by the Summit County Health Department, where either:
  - 4.10.1 other effective mitigation can be implemented in lieu of a Face Covering or Face Shield; or
  - 4.10.2 it can be shown that on balance the overall health risks associated with wearing a Face Covering or Face Shield during an activity is greater than the overall health risks associated with not wearing a Face Covering or Face Shield during said activity.

**Section 5. Posting.** All businesses open to the public where Face Coverings or Face Shields are required hereunder, shall post a notice in form and substance promulgated by the Summit County Health Department, in a clearly visible location at or near the entrance to such place of business, that declares that Face Coverings or Face Shields are to be worn by order of the Summit County Health Department.

**Section 6. Effective Date; Duration.** This Amended Order shall become effective at 12:01 a.m. on July 2, 2020, and will continue to be in effect until 11:59 p.m. on September 1, 2020, or until it is extended, rescinded, superseded, or amended in writing. This Amended Order shall be re-evaluated in fourteen (14) calendar days.

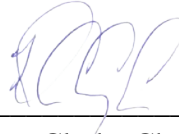
**Section 7. Publication.** This Amended Order shall be on file for public inspection with the Summit County Clerk and the Summit County Health Department.

**Section 8. Enforcement.** The County Sheriff and Chiefs of Police within the County are directed to ensure compliance with and enforce this Amended Order. Violations of this Amended Order shall be punished as an infraction. Notwithstanding such, the purpose of this Amended Order is to protect individuals' health and not to hold them criminally liable. Discretion will be used in the citing and prosecution of violations of this Amended Order.

**Section 9. Appeal.** This Amended Order may be appealed to the Summit County Board of Health within ten (10) calendar days in accordance with Summit County Code of Health §1-1-9.

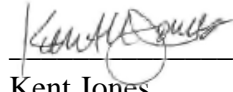
ORDERED, APPROVED, ADOPTED, and PASSED, and published, this 1<sup>st</sup> day of July, 2020.

**SUMMIT COUNTY COUNCIL**



\_\_\_\_\_  
Doug Clyde, Chair

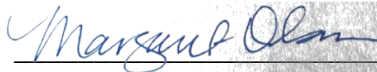
Attest:

  
\_\_\_\_\_  
Kent Jones  
Summit County Clerk


VOTING OF COUNTY COUNCIL:

Councilmember Carson	Aye
Councilmember Robinson	Aye
Councilmember Clyde	Aye
Councilmember Armstrong	Aye
Councilmember Wright	Aye

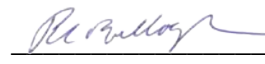
Approved as to form:

  
\_\_\_\_\_  
Margaret H. Olson  
Summit County Attorney

**BY ORDER OF THE SUMMIT COUNTY MANAGER**

  
\_\_\_\_\_  
Thomas C. Fisher  
Summit County Manager

**BY ORDER OF THE SUMMIT COUNTY HEALTH OFFICER**

  
\_\_\_\_\_  
Richard C. Bullough, PhD  
County Health Officer



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COUNTY COUNCIL, COUNTY MANAGER, AND BOARD OF HEALTH  
IN AND FOR SUMMIT COUNTY, STATE OF UTAH

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In the matter of:

COVID-19 Pandemic within Summit County

**JOINT PUBLIC HEALTH ORDER  
(Stabilization Phase)**

Order No.: 2020-09

Date: August 26, 2020

Legal Authority: Utah Code §26A-1-114  
Utah Code §17-50-  
302(1)(a)(ii)  
Summit County Code  
§4-5-6(A)

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The Summit County Health Officer (“**SCHO**”) issued his Public Health Order 2020-01 on March 15, 2020.

The SCHO issued his Public Health Order 2020-02 on March 23, 2020.

The SCHO, Summit County Council (“**Council**”), and the Summit County Manager (“**Manager**”) (together, the “**County**”) issued their Joint Public Health Order 2020-03 (the “**Stay-at-Home Order**”) on March 25, 2020.

The SCHO issued his Amended Public Health Order 2020-04 on March 31, 2020, which extended Public Health Order 2020-01 and 2020-02 to be co-terminus with the Stay-at-Home Order.

The Governor of the State of Utah has issued his “Utah Leads Together (Version 4)” and “Phased Guidelines for the General Public and Businesses to Maximize Community Health and Economic Re-activation” (together, the “**Utah Leads Together Plan**”).

The Utah Leads Together Plan 4.0 establishes a plan for economic recovery and revitalization under five guiding principles: Speed, Targeted Enduring, Flexible, and Innovative. The guiding principles are used to guide the pandemic response for the 100-day, 250-day, and 500-day horizons of recovery. To assist in this effort, an operational dashboard has been provided, which establishes a color-coded health guidance system. This system consists of four levels: High Level of Restriction (red), Moderate Level of Restriction (orange), Low Level of

Restriction (yellow), and Minimal Level of Restriction (green). Prior to the change in terminology on August 14, 2020, the four levels were referred to as High Risk, Moderate Risk, Low Risk, and the New Normal.

The County issued its Joint Public Health Order 2020-05 with an effective date of May 1, 2020, which transitioned the risk level in the County from High Risk (red) to Moderate Risk (orange) with community specific protocols for businesses and industries.

The County issued its Joint Public Health Order 2020-06 with an effective date of May 16, 2020, which set forth that the County remain at Moderate Risk (orange) with community specific protocols for food service, lodging and accommodations, indoor recreational facilities, and arts, special events, and entertainment.

The County issued its Joint Public Health Order 2020-07 on May 21, 2020, which transitioned the County from Moderate Risk (orange) to Low Risk (yellow), and adopted the Utah Leads Together Plan, inclusive of its updated and amended Phased Guidelines for the General Public and Businesses to Maximize Community Health and Economic Re-activation (the "**Phased Health Guidelines**").

Version 4.10 of the Phased Health Guidelines requires that in public settings "face coverings are to be worn when physical distancing is not feasible." Further, the Phased Health Guidelines stress that "[w]hile wearing face coverings has proven to be somewhat effective in slowing the spread of COVID-19, they will not completely eliminate the risk of COVID-19 spread. Therefore, sound judgment, physical distancing and hygiene practices are important principles that must accompany appropriate use of face coverings." The Governor's Executive Order 2020-50, dated August 14, 2020, which adopted Version 4.10 of the Phased Health Guidelines, provides that the wearing of a face covering is a "strong recommendation." The number of positive tests of COVID-19 in the State of Utah has continued to increase since May 27, 2020. During this time, rates in Utah were exceeding that in our neighboring State of Colorado by 350%, COVID-19 patients in Utah hospitals have increased from an average of 90 to 150 during the month of June, and Intermountain Health Care, which runs the Park City Hospital (the County's sole hospital provider), reported that if those trends continued, it would run out of conventional ICU capacity in July. Further, the percent of positive cases from testing had increased from 4.96% to 9.23% over this same period. The 7-day rolling average of new cases in Utah continues to be greater than 300

Dr. Angela Dunn, the state's epidemiologist, indicated in a June 19, 2020 memorandum, that if the rolling 7-day average of new cases is not reduced to 200 by July 1, we as a state, may need to start transitioning back to Moderate Risk (orange). Dr. Dunn recommended that mandatory mask wearing be implemented as a way to stem this current trajectory of new COVID-19 cases.

Summit County continues to have a total case rate of 1,814.8 per 100,000 population, the third highest in the state. Two of the counties that neighbor Summit County have the second and fourth highest case rates in the State. The proportion of positive cases related to travel has remained steady since reporting 13% of the cases in Summit County were travel related on Memorial Day to 15% on August 7. The County has had nine (9) consecutive days of increased new (incidence) cases, based on the CDC 3-day average methodology. Additionally, the County has experienced an increase in Positivity Test Rates from 5.24% on July 1 to 7.8% on August 18, exceeding the state target of 3%.

Importantly, statistical analyses comparing the rate of incidence decline in Summit County to that of the state of Utah, found that the Summit County mask order effectively increased the magnitude of incidence decline. Although numbers are currently surging in Summit County, these new cases appear to be connected to specific gatherings where face coverings were not worn. We do not believe the new increase in cases diminishes the evidence that face coverings mitigate COVID-19 risk or spread.

While Summit County data may not be as dire at this moment as some surrounding jurisdictions, all the trends are unfavorable. Summit County is a location to which people travel, often from areas experiencing rapid disease spread. Additionally, with uncertainty created by schools reopening, there is potential for increased exposure within the community. Based on the current adverse County data trends, the surging cases in surrounding counties, and the start of the new school year, the best strategy to averting a future business shutdown is through continuing a mandatory mask measure.

The business community and resort economy in Summit County simply cannot endure a return to Moderate Restriction (orange) without suffering catastrophic economic damage. The County needs to maintain the current path. Dr. Dunn's recommendation of mandatory mask regulations provides the County with one that could be implemented immediately. Such a regulation also reflects the general opinion of members of the Park City Chamber of Commerce, according to a recent, informal poll.

According to the most recent guidance from the CDC, they "advise the use of simple cloth face coverings to slow the spread of the virus and help people who may have the virus and do not know it from transmitting it to others."<sup>1</sup> An article appearing in the Wall Street Journal noted that health agencies have identified "respiratory-droplet contact as the major mode of Covid-19 transmission;"<sup>2</sup> thus adding support for the use of facemasks. Further, "[e]vidence

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<sup>1</sup> <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover.html>

<sup>2</sup> Daniela Hernandez, Sarah Toy, and Betsey McKay, "How Exactly Do You Catch Covid-19? There Is a Growing Consensus," *The Wall Street Journal* (June 16, 2020).

from 10 studies (across all three viruses, including 2,647 participants) found benefits for face masks in general (risk of infection or transmission when wearing a mask was 3% vs 17% when not wearing a mask).”<sup>3</sup> In fact, a recent study found decreased mortality rates associated with face coverings.<sup>4</sup>

In order to stem the acceleration of the spread of COVID-19 and prevent a possible return to Moderate Restriction (orange), it is necessary for the citizen populace to wear face coverings in certain public settings regardless of social distancing.

The County requested and has received an exemption from the Governor’s Executive Order 2020-32, which allows the County to impose a mandatory face covering order.

The County issued its Joint Public Health Order 2020-08 on June 26, 2020, and amended it on July 1, 2020. Since issuing such, the County has discovered that face shields provide adequate protection from the transmission of COVID-19. A recent evaluation of the data by the Summit County Health Department indicate the decline in positive COVID cases since the implementation of the mask order is statistically significant when comparing trend lines. This is a positive outcome that can be attributed to increased mask use in Summit County.

On August 14, 2020, interim Executive Director of the Utah Department of Health, Richard G. Saunders, issued STATE PUBLIC HEALTH ORDER 2020-11 requiring “[e]ach individual on school property or on a school bus shall wear a facemask.” Summit County supports this order and will work to ensure compliance within the school districts.

**THEREFORE, PURSUANT TO UTAH CODE §26A-1-114, UTAH CODE §17-50-302, SUMMIT COUNTY CODE §5-4-6, AND SUMMIT COUNTY CODE OF HEALTH §1-1-10(b), BE IT HEREBY ORDERED BY RICHARD C. BULLOUGH, PHD, SUMMIT COUNTY HEALTH OFFICER, THE SUMMIT COUNTY COUNCIL, AND THOMAS C. FISHER, SUMMIT COUNTY MANAGER, IN CONSULTATION WITH THE SUMMIT COUNTY BOARD OF HEALTH, AS FOLLOWS:**

**Section 1. Purpose.** The intent of this Amended Order is to require all individuals living within or visiting Summit County, Utah, to wear Face Coverings or Face Shields while inside

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<sup>3</sup> “Physical distancing, face masks, and eye protection to prevent person-to-person transmission of SARS-CoV-2 and Covid 19: a systematic review and meta-analysis.” DK Chu, MD, EA Aki, MD; S Duda, MSc; K Solo, MSc, et. al. *The Lancet* (Open Access Published June 01, 2020).

<sup>4</sup> Leffler, Christopher & Ing, Edsel & Lykins, Joseph & Hogan, Matthew & McKeown, Craig & Grzybowski, Andrzej. (2020). Association of country-wide coronavirus mortality with demographics, testing, lockdowns, and public wearing of masks (Update June 15, 2020). <https://www.researchgate.net/community/COVID-19>

publicly accessed indoor establishments, including schools. All provisions of this Amended Order shall be interpreted to effectuate this intent.

Section 2.     **Definitions.**

- 2.1     “Face-covering” is a physical barrier that:
- i. covers the nose and mouth without openings that can be seen through;
  - ii. is made of synthetic or natural fabrics;
  - iii. secures under the chin;
  - iv. fits snugly against the nose and sides of the face; and
  - v. does not have an exhalation valve or vent.

- 2.2     “Face shield” means a face covering that:
- i. covers the entire face;
  - ii. protects the eyes of the wearer;
  - iii. is made of clear plastic or similar nonpermeable transparent material;
  - iv. secures around the top of the head;
  - v. does not secure under the chin;
  - vi. does not fit snugly against the nose or sides of the face; and
  - vii. can be used in conjunction with a mask for enhanced protection.

Section 3.     **Face Coverings and Face Shields Mandatory.** The County hereby orders all individuals currently living within or visiting Summit County, Utah, to wear a Face Covering or Face Shield in the following circumstances:

- 3.1     Inside of, or in line to enter, any indoor space, which is open to members of the public;
- 3.2     Obtaining services from the healthcare industry in settings, including without limitation, a hospital, pharmacy, medical clinic, laboratory, physician or dental office, veterinary clinic, or blood bank, unless directed otherwise by a healthcare provider;
- 3.3     Employees, staff, or volunteers engaging in work, whether inside or outside at the workplace or performing work off-site, when:

- 3.3.1 Interacting in-person with any member of the public;
- 3.3.2 Working in any space visited by members of the public, regardless of whether anyone from the public is present at the time.
- 3.3.3 Working in any space where food is prepared or packaged for sale or distribution.
- 3.4 At all community gatherings, indoor or outdoor, which is defined as a gathering of over fifty (50) people in any one location.
- 3.5 For gyms, fitness facilities, recreations centers, etc., face coverings/face shields shall be worn in all common areas, locker rooms, stretching areas, and all areas associated with the track (including the corners).
  - 3.5.1 Face coverings/face shields do not need to be worn when individuals are engaged in strenuous physical exercise. For cardio exercise (including fitness classes) and weight lifting areas, equipment shall be placed six-ten feet apart.
- 3.6 Each individual on school property or on a school bus shall wear a face mask, except as provided in Section 4

Section 4. **Exemptions.** The following individuals are exempt from wearing a Face Covering or Face Shield:

- 4.1 Individuals age two years or under.
- 4.2 Individuals with a medical condition, mental health condition, or disability that prevents wearing a Face Covering or Face Shield.
- 4.3 Individuals who are hearing impaired, or communicating with an individual who is hearing impaired, where the ability to see the mouth is essential for communication.
- 4.4 Individuals for whom wearing a Face Covering or Face Shield would create a risk to the individual related to their work, as determined by local, state or federal regulators or workplace safety guidelines.
- 4.5 Individuals who are obtaining a service involving the nose or face for which temporary removal of the Face Covering or Face Shield is necessary to perform the service.

- 4.6 Individuals who are seated at a restaurant or other establishment that offers food or beverage service, while they are eating or drinking.
- 4.7 Individuals who are purchasing a product or receiving a service that requires identification may briefly remove a Face Covering or Face Shield, as necessary, so that the retailer or service provider can verify identity.
- 4.8 Because children between the ages of two (2) and twelve (12) years of age can have challenges wearing a Face Covering or Face Shield properly (e.g., excessively touching the Face Covering, not changing the Face Covering if visibly soiled, risk of strangulation or suffocation, etc.), they are to be worn with the assistance and close supervision of an adult. Face Coverings or Face Shields are never to be worn by children when sleeping.
- 4.9 Individuals engaging in work where they are alone in an indoor establishment or facility.
- 4.10 As approved by the Summit County Health Department, where either:
  - 4.10.1 other effective mitigation can be implemented in lieu of a Face Covering or Face Shield; or
  - 4.10.2 it can be shown that on balance the overall health risks associated with wearing a Face Covering or Face Shield during an activity is greater than the overall health risks associated with not wearing a Face Covering or Face Shield during said activity.
- 4.11 For indoor sports (scrimmages, games, practices) and activities:
  - 4.11.1 Active participants (i.e. players and referees) are not required to wear face coverings/face shields while within the confines of the playing surface. Playing surface is defined as the court, ice sheet, or field where active participation occurs, but does not include the sidelines and benches.
  - 4.11.2 Coaches, instructors, spectators and participants not within the confines of the playing surface shall be required to wear a face covering/face shield.
  - 4.11.3 Playing surface capacity is limited when face coverings/face shields are not worn (4 on a tennis court, 10 on a basketball court, 12 on a volleyball court, and 20 on an ice sheet). Facilities may operate at regular capacity if all individuals are wearing face coverings/face shields.
- 4.12 For outdoor sports (scrimmages, games, practices):

- 4.12.1 Active participants (i.e. players and referees) are not required to wear face coverings/face shields while within the confines of the playing surface.
- 4.12.2 Coaches, instructors, spectators and participants not within the confines of the playing surface shall be required to wear a face covering/ face shield.
- 4.13 In a child day care center or facility setting, the mask order does not apply to:
  - 4.13.1 A child while maintaining a physical distance of at least six feet from any other child or adult when outdoors;
  - 4.13.2 A child who is eating or drinking while indoors and maintains a physical distance of at least six feet from any other child or adult;
  - 4.13.3 A child who:
    - (a) is younger than three years of age; or
    - (b) is three years old or older if the parent, guardian, or individual responsible for caring for the child cannot place the face covering safely on the child's face;
  - 4.13.4 A child with a medical condition, mental health condition, or disability that prevents wearing a face covering, including a child with a medical condition for whom wearing a face covering could cause harm or dangerously obstruct breathing, or who is unconscious, incapacitated, or otherwise unable to remove a face covering without assistance;
  - 4.13.5 A child who is deaf or hard of hearing while communicating with others, or a child who is communicating with an individual who is deaf or hard of hearing, where the ability to see the mouth is essential for communication, in which case a face shield or alternative protection, such as plexiglass barrier, should be used; and
  - 4.13.6 A child who is receiving or providing a service involving the nose or face which temporary removal of the face covering is necessary to perform the service.
- 4.14 Exemptions afforded by STATE PUBLIC HEALTH ORDER 2020-11, section 3, are incorporated by reference as they relate to face covering requirements in school settings.

Section 5. **Posting.** All businesses open to the public where Face Coverings or Face Shields are required hereunder, shall post a notice in form and substance promulgated by the Summit



County Health Department, in a clearly visible location at or near the entrance to such place of business, that declares that Face Coverings or Face Shields are to be worn by order of the Summit County Health Department.

**Section 6. Effective Date; Duration.** This Amended Order shall become effective at 12:01 a.m. on August 27, 2020, and will continue to be in effect until 11:59 p.m. on January 8, 2021, or until it is extended, rescinded, superseded, or amended in writing. This Amended Order shall be re-evaluated in fourteen (14) calendar days.

**Section 7. Publication.** This Amended Order shall be on file for public inspection with the Summit County Clerk and the Summit County Health Department.

**Section 8. Enforcement.** The County Sheriff and Chiefs of Police within the County are directed to ensure compliance with and enforce this Amended Order. Violations of this Amended Order shall be punished as an infraction. Notwithstanding such, the purpose of this Amended Order is to protect individuals' health and not to hold them criminally liable. Discretion will be used in the citing and prosecution of violations of this Amended Order.

**Section 9. Appeal.** This Amended Order may be appealed to the Summit County Board of Health within ten (10) calendar days in accordance with Summit County Code of Health §1-1-9.

ORDERED, APPROVED, ADOPTED, and PASSED, and published, this 26<sup>th</sup> day of August, 2020.



SUMMIT COUNTY COUNCIL

Doug Clyde, Chair

Attest:

Kent Jones  
Summit County Clerk

VOTING OF COUNTY COUNCIL:

Councilmember Carson

Aye

Councilmember Robinson

Aye

Councilmember Clyde

Aye

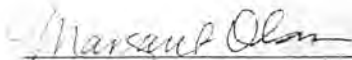
Councilmember Armstrong

Aye

Councilmember Wright

Aye

Approved as to form:



Margaret H. Olson  
Summit County Attorney

**BY ORDER OF THE SUMMIT COUNTY MANAGER**



Thomas C. Fisher  
Summit County Manager

**BY ORDER OF THE SUMMIT COUNTY HEALTH OFFICER**



Richard C. Bullough, PhD  
County Health Officer

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COUNTY COUNCIL, COUNTY MANAGER, AND BOARD OF HEALTH  
IN AND FOR SUMMIT COUNTY, STATE OF UTAH

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In the matter of:

COVID-19 Pandemic within Summit County

**JOINT PUBLIC HEALTH ORDER  
(Stabilization Phase)**

Order No.: 2020-10

Date: October 21, 2020

Legal Authority: Utah Code §26A-1-114  
Utah Code §17-50-  
302(1)(a)(ii)  
Summit County Code  
§4-5-6(A)

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The Summit County Health Officer (“**SCHO**”) issued his Public Health Order 2020-01 on March 15, 2020.

The SCHO issued his Public Health Order 2020-02 on March 23, 2020.

The SCHO, Summit County Council (“**Council**”), and the Summit County Manager (“**Manager**”) (together, the “**County**”) issued their Joint Public Health Order 2020-03 (the “**Stay-at-Home Order**”) on March 25, 2020.

The SCHO issued his Amended Public Health Order 2020-04 on March 31, 2020, which extended Public Health Order 2020-01 and 2020-02 to be co-terminus with the Stay-at-Home Order.

The County issued its Joint Public Health Order 2020-05 with an effective date of May 1, 2020, which transitioned the risk level in the County from High Risk (red) to Moderate Risk (orange) with community specific protocols for businesses and industries.

The County issued its Joint Public Health Order 2020-06 with an effective date of May 16, 2020, which set forth that the County remain at Moderate Risk (orange) with community specific protocols for food service, lodging and accommodations, indoor recreational facilities, and arts, special events, and entertainment.

The County issued its Joint Public Health Order 2020-07 on May 21, 2020, which transitioned the County from Moderate Risk (orange) to Low Risk (yellow), and adopted Governor Herbert's Phased Guidelines for the COVID-19 pandemic response.

The County issued its Joint Public Health Order 2020-08 requiring face coverings on June 26, 2020, and amended it on July 1, 2020.

The County issued its Joint Public Health Order 2020-09 on August 26, 2020, which amended Joint Public Health Order 2020-08 to include additional language defining exemptions for face coverings and face shields granted by the Summit County Board of Health. Additionally, the term of expiration for the Public Health Order was extended until January 8<sup>th</sup>, 2021 or until it is further extended, rescinded, superseded, or amended in writing.

On October 13, 2020 Interim Executive Director of the Utah Department of Health, Rich Saunders, declared the State of Utah will retire the phased guidelines, version 5.0 and transition to the newly established COVID-19 Transmission Index. The COVID-19 Transmission Index uses three metrics, 7-day average percent positivity, 14-day case rate per 100k population, and Statewide ICU utilization to determine levels of transmission risk within a County. Those levels are, High, Moderate, and Low. According to Director Saunders in the press conference, the new COVID-19 Transmission Index became effective on October 15, 2020.

**THEREFORE, PURSUANT TO UTAH CODE §26A-1-114, UTAH CODE §17-50-302, SUMMIT COUNTY CODE §5-4-6, AND SUMMIT COUNTY CODE OF HEALTH §1-1-10(b), BE IT HEREBY ORDERED BY RICHARD C. BULLOUGH, PHD, SUMMIT COUNTY HEALTH OFFICER, THE SUMMIT COUNTY COUNCIL, AND THOMAS C. FISHER, SUMMIT COUNTY MANAGER, IN CONSULTATION WITH THE SUMMIT COUNTY BOARD OF HEALTH, AS FOLLOWS:**

Section 1.     **Purpose.** The purpose of this Order is implement the statewide COVID-19 Transmission Index, the different levels of transmission (High, Moderate, and Low), and the Transmission Index Metrics to identify guidelines intended to slow the spread of COVID-19 in Summit County, Utah. This order also serves to repeal and rescind Joint Public Health Orders 01 – 08.

Section 2.     Joint Public Health Order 09, which requires face-coverings in Summit County, Utah, will remain in effect until January 8<sup>th</sup>, 2021 or until it is further extended, rescinded, superseded, or amended in writing. All provisions of this Amended Order shall be interpreted to effectuate this intent.

Section 3.     **Effective Date; Duration.** This Amended Order shall become effective at 12:01 a.m. on October 22, 2020, and will continue to be in effect until 11:59 p.m. on January 8, 2021,

or until it is extended, rescinded, superseded, or amended in writing either by Summit County or the Executive Director of the Utah Department of Health.

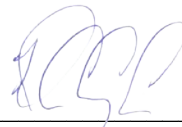
**Section 4. Publication.** This Amended Order shall be on file for public inspection with the Summit County Clerk and the Summit County Health Department.

**Section 5. Enforcement.** The County Sheriff and Chiefs of Police within the County are directed to ensure compliance with and enforce this Amended Order. Violations of this Amended Order shall be punished as an infraction. Notwithstanding such, the purpose of this Amended Order is to protect individuals' health and not to hold them criminally liable. Discretion will be used in the citing and prosecution of violations of this Amended Order.

**Section 6. Appeal.** This Amended Order may be appealed to the Summit County Board of Health within ten (10) calendar days in accordance with Summit County Code of Health §1-1-9.

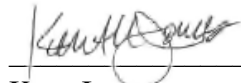
ORDERED, APPROVED, ADOPTED, and PASSED, and published, this 21<sup>st</sup> day of October, 2020.

**SUMMIT COUNTY COUNCIL**



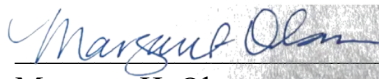
\_\_\_\_\_  
Doug Clyde, Chair

Attest:



\_\_\_\_\_  
Kent Jones  
Summit County Clerk

Approved as to form:



\_\_\_\_\_  
Margaret H. Olson  
Summit County Attorney

VOTING OF COUNTY COUNCIL:

Councilmember Carson	Aye
Councilmember Robinson	Aye
Councilmember Clyde	Aye
Councilmember Armstrong	Aye
Councilmember Wright	Aye

**BY ORDER OF THE SUMMIT COUNTY MANAGER**



---

Thomas C. Fisher  
Summit County Manager

**BY ORDER OF THE SUMMIT COUNTY HEALTH OFFICER**



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Richard C. Bullough, PhD  
County Health Officer



**DECLARATION OF LOCAL PUBLIC HEALTH EMERGENCY**  
**PUBLIC HEALTH ORDER**  
**Summit County, Utah**

**WHEREAS**, *Summit County Code of Health* §1-1-10(B) provides that the *County Health Officer* may declare a public health emergency; and,

**WHEREAS**, on March 12, 2020, the County Health Officer declared a *Local Public Health Emergency* with respect to the COVID-19 Pandemic (the “**COVID-19 Emergency**”); and,

**WHEREAS**, the COVID-19 Emergency was subsequently extended by order of the County Health Officer on April 7, 2020, May 1, 2020, September 1, 2020, and again on January 9, 2021; and,

**WHEREAS**, in accordance with HB 294, the COVID-19 Emergency ended in May 2021; and,

**WHEREAS**, the *Centers for Disease Control and Prevention* (the “**CDC**”) has identified the potential public health threat posed by the new and emerging *Delta Variant of COVID-19* (the “**Delta Variant**”), which is spreading both globally and in the United States, as “high,” and has advised that person-to-person spread of the Delta Variant will continue to occur globally, including within the United States; and,

**WHEREAS**, the Delta Variant poses a continuing, increasing, and immediate threat to the public health of Summit County residents and visitors. The Delta Variant is the dominant strain actively circulating in Summit County and is more contagious than the original virus and other variants; and,

**WHEREAS**, Summit County has a 14-day case rate of 249 per 100,000 people, placing the county within the Moderate Level of Transmission under criteria separately established by the State of Utah and the CDC; and,

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**IN AND FOR SUMMIT COUNTY, STATE OF UTAH**

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In the matter of:

COVID-19 Pandemic within Summit County  
(Delta Variant)

**PUBLIC HEALTH ORDER  
(Order of Constraint)**

Order No.: 2021-01

Date: August 21, 2021

Legal Authority: Utah Code §26A-1-114  
Utah Code §26A-1-102

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After giving legal notice to the *Summit County Manager* (the “**County Manager**”), the *Summit County Health Officer* (the “**Health Officer**”) declared a *Local Public Health Emergency* related to the COVID-19 Pandemic on August 21, 2021, for a period of thirty (30) days (*Utah Code* §26A-1-114(8)(a)).

The *Summit County Council* (the “**Council**”) may extend a Local Public Health Emergency longer than thirty (30) days (*Utah Code* §26A-1-114(8)(b)).

In Utah, local health departments are vested under *Utah Code* § 26A-1-114(1)(d) with authority to establish measures as may be necessary to promote and protect public health and control the spread of disease.

COVID-19 is a contagion that spreads from person to person. The Health Officer and County Manager recognize the need for Summit County and the public to continue to work cooperatively and proactively to slow the spread of COVID-19 and to address the myriad challenges COVID-19 has created.

The Health Officer and County Manager find that COVID-19 poses a continuing, increasing, and immediate threat to the public health of Summit County residents and visitors. The *Delta Variant* of the COVID-19 virus is the dominant strain actively circulating in Summit County and is more contagious than the original virus and other variants.



*Orders of Constraint* can only be issued during a declared Local Public Health Emergency (*Utah Code* §26A-1-102(9)(a)). A *Face-Covering* (defined below) mandate is a form of an Order of Constraint (*Utah Code* §26A-1-102(9)).

During a declared Local Public Health Emergency, the Health Officer and the County Manager can jointly issue an Order of Constraint (*Utah Code* §26A-1-114(9)(a)).

The Council can terminate an Order of Constraint at any time (*Utah Code* §26A-1-114(9)(a)).

The *Centers for Disease Control and Prevention* (the “**CDC**”) has provided a summary of the most up-to-date scientific data on COVID-19 in K-12 schools.<sup>1</sup> The CDC has recommended the “use of multiple strategies – also called layered prevention – [which] provides greater protection in breaking transmission chains than implementing a single strategy.” This is especially the case in “areas with moderate to high community transmission, low vaccination rates, and for people who are not fully vaccinated.”<sup>2</sup> According to a recent study from the United Kingdom, “for every five additional cases per 100,000 population in regional incidence, the risk of a school outbreak increased by 72%.”<sup>3</sup> Other studies found that where community transmission rates were low, there was no association between in-person learning and community spread, but when the transmission rates increased to moderate or high levels, transmission rates simultaneously rose in schools.<sup>4</sup> “A study of elementary schools in Utah who

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<sup>1</sup> Science Brief: Transmission of SARS-CoV-2 in K-12 Schools and Early Care and Education Programs (July 9, 2021) [https://www.cdc.gov/coronavirus/2019-ncov/science/science-briefs/transmission\\_k\\_12\\_schools.html?CDC\\_AA\\_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fmore%2Fscience-and-research%2Ftransmission\\_k\\_12\\_schools.html#schools-cov2-transmission](https://www.cdc.gov/coronavirus/2019-ncov/science/science-briefs/transmission_k_12_schools.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fmore%2Fscience-and-research%2Ftransmission_k_12_schools.html#schools-cov2-transmission)

<sup>2</sup> *Id.* See Honein MA, Barrios LC, Brooks JT. Data and Policy to Guide Opening Schools Safely to Limit the Spread of SARS-CoV-2 Infection. *JAMA* 2021;325(9):823-824. doi:10.1001/jama.2021.0374; Honein MA, Christie A, Rose DA, et al. Summary of Guidance for Public Health Strategies to Address High Levels of Community Transmission of SARS-CoV-2 and Related Deaths, December 2020. *MMWR Morb Mortal Wkly Rep* 2020;69(49):1860-1867. doi:10.15585/mmwr.mm6949e2.

<sup>3</sup> *Id.* See Ismail SA, Saliba V, Lopez Bernal J, et al. SARS-CoV-2 infection and transmission in educational settings: a prospective, cross-sectional analysis of infection clusters and outbreaks in England. *Lancet Infect Dis* 2021;21(3):344-353. doi:10.1016/s1473-3099(20)30882-3.

<sup>4</sup> Russell FM, Ryan K, Snow K, et al. COVID-19 in Victorian Schools: An analysis of child-care and school outbreak data and evidence-based recommendations for opening schools and keeping them open. *Report from Murdoch Children’s Research Institute and the University of Melbourne*. 2020; Published 2020 September 25; Goldhaber D, Imberman SA, Strunk KO, et al. To What Extent Does In-Person Schooling Contribute to the Spread of COVID-19? Evidence from Michigan and Washington. 2020. CALDER Working Paper No. 247-1220-2.

implemented layered prevention strategies, such as mask wearing and cohorting, found very low transmission (secondary attack rate 0.7%) in December 2020 – January 2021.”<sup>5</sup>

According to the most recent guidance from the CDC, “consistent and correct use of face masks reduces the spread of SARS-CoV-2 and, with some exceptions, is recommended for use indoors among people aged 2 and older who are not fully vaccinated. In general, people do not need to wear masks when outdoors.”<sup>6</sup> The CDC has further reported that “most studies that have shown success in limiting transmission in schools have required that staff only or staff and students wear masks as one of the school’s prevention strategies.”<sup>7</sup>

Further, “[e]vidence from 10 studies (across all three viruses, including 2,647 participants) found benefits for face masks in general (risk of infection or transmission when wearing a mask was 3% vs 17% when not wearing a mask).”<sup>8</sup> In fact, a 2020 study found decreased mortality rates associated with Face-Coverings.<sup>9</sup>

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<sup>5</sup> Science Brief: Transmission of SARS-CoV-2 in K-12 Schools and Early Care and Education Programs (July 9, 2021). See Hershov RB, Wu K, Lewis NM, et al. Low SARS-CoV-2 Transmission in Elementary Schools – Salt Lake County, Utah, December 3, 2020-January 31, 2021. *MMWR Morb Mortal Wkly Rep* 2021;70(12):442-448. doi:10.15585/mmwr.mm7012e3.

<sup>6</sup> Science Brief: Transmission of SARS-CoV-2 in K-12 Schools and Early Care and Education Programs (July 9, 2021).

<sup>7</sup> *Id.* See Zimmerman KO, Akinboyo IC, Brookhart MA, et al. Incidence and Secondary Transmission of SARS-CoV-2 Infections in Schools. *Pediatrics* 2021;147(4). doi:10.1542/peds.2020-048090; Gandini S, Rainisio M, Iannuzzo ML, et al. A cross-sectional and prospective cohort study of the role of schools in the SARS-CoV-2 second wave in Italy. *Lancet Reg Health Eur* 2021;5:100092. doi:10.1016/j.lanep.2021.100092; Fricchione MJ, Seo JY, Arwady MA. Data-Driven Reopening of Urban Public Education Through Chicago’s Tracking of COVID-19 School Transmission. *J Public Health Manag Pract* 2021;27(3):229-232. doi:10.1097/phh.0000000000001334; Link-Gelles R, DellaGrotta AL, Molina C, et al. Limited Secondary Transmission of SARS-CoV-2 in Child Care Programs – Rhode Island, June 1-July 31, 2020. *MMWR Morb Mortal Wkly Rep* 2020;69(34):1170-1172. doi:10.15585/mmwr.mm6934e2; Kim C, McGee S, Khuntia S, et al. Characteristics of COVID-19 Cases and Outbreaks at Child Care Facilities – District of Columbia, July-December 2020. *MMWR Morb Mortal Wkly Rep* 2021;70(20):744-748. doi:10.15585/mmwr.mm7020a3; Volpp KG, Kraut BH, Ghosh S, et al. Minimal SARS-CoV-2 Transmission After Implementation of a Comprehensive Mitigation Strategy at a School – New Jersey, August 20-November 27, 2020. *MMWR Morb Mortal Wkly Rep* 2021;70(11):377-381. doi:10.15585/mmwr.mm7011a2.

<sup>8</sup> “Physical distancing, face masks, and eye protection to prevent person-to-person transmission of SARS-CoV-2 and Covid 19: a systematic review and meta-analysis,” DK Chu, MD; EA Aki, MD; S Duda, MSc; K Solo, MSc, et. al. *The Lancet* (Open Access Published June 01, 2020).

<sup>9</sup> Leffler, Christopher & Ing, Edsel & Lykins, Joseph & Hogan, Matthew & McKeown, Craig & Grzybowski, Andrzej. (2020). Association of country-wide coronavirus mortality with demographics, testing, lockdowns, and public wearing of masks (Update June 15, 2020). <https://www.researchgate.net/community/COVID-19>

According to a recent study documented in the Official Journal of the American Academy of Pediatrics, hospitalizations were more frequent in children/adolescents with COVID-19 than with influenza.<sup>10</sup>

As a general measure, COVID-19 health restrictions cannot be imposed where the 14-day case rate is less than 191 per 100,000 people (*former Utah Code §26A-1-130(2)*).

Summit County has a 14-day case rate of 249 per 100,000 people, placing the county within the Moderate Level of Transmission under criteria separately established by the State of Utah and the CDC.<sup>11</sup>

Summit County has a 78% vaccination rate among its citizens who are eligible to receive the vaccine.<sup>12</sup> The incidents of hospitalizations for COVID-19 patients, as well as deaths, among vaccinated individuals is negligible. Further, reports are that break-through incidents of COVID-19 among vaccinated individuals are unusual, but where they have occurred, the individuals are either asymptomatic or report moderate symptoms.<sup>13</sup>

Although the Summit County Health Department continues its extensive efforts to vaccinate all eligible Summit County residents, no COVID-19 vaccine is yet approved by the FDA for children under the age of 12. With the spread of the COVID-19 Delta Variant and case rates rapidly increasing, Summit County is at a critical juncture in this pandemic, especially when considering the younger population that is ineligible for vaccination.

When considering actions to protect the children in the school setting, all available information is considered. On August 16, 2021 the American Academy of Pediatrics released a report of State-Level Data indicating children were 18% of weekly reported COVID-19 cases in the United States during the week of 8/5/2021 – 8/12/2021, a time period when many schools

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<sup>10</sup> Duarte-Salles, 30-Day Outcomes of Children and Adolescents With COVID-19: An International Experience (*Pediatrics* 2021) <https://pediatrics.aappublications.org/content/pediatrics/early/2021/05/28/peds.2020-042929.full.pdf>

<sup>11</sup> Summit County COVID-19 Dashboard, Summit County Health Department <https://summitcountyhealth.org/dashboard/>

<sup>12</sup> Id.

<sup>13</sup> KSL, Utah Hospitals Filling Up with Unvaccinated COVID-19 Patients (July 26, 2021); Salt Lake Tribune, Utah hospitals are filling up, and more than 95% of the COVID patients weren't vaccinated (July 13, 2021); U.S News & World Report, In Utah, Hospitals Swell With Unvaccinated COVID-19 Patients (July 27, 2021); New York Times, What to Know About Breakthrough Infections and the Delta Variant (August 11, 2021).

were returning from summer break. This number is the highest it has been since the start of the pandemic.<sup>14</sup>

Recent studies acknowledge that children generally fare better than adults when infected with COVID-19.<sup>15</sup> On August 20, 2021, the State of Utah reported 49,054 COVID-19 cases in individuals between the ages of 1-14, which accounts for 10.8% of the total COVID-19 cases in the State. Of the 49,054 cases (ages 1-14) reported in Utah on August 17, 2021, 345 (0.70%) have been hospitalized because of COVID-19. On the same day, the State also reported one COVID-19 death (0.002%) in a child between the ages of 1-14.

Considering the recent information regarding the outcomes of children infected with COVID-19 and the intent to keep children in school while minimizing risk, we must acknowledge the challenges and uncertainty presented by the Delta Variant for those who are ineligible for COVID-19 vaccination. Therefore, we must rely on the science and data, along with established frameworks, that support a layered approach to mitigating risk in the school setting. These resources include the outcomes associated with other school districts throughout the United States where the 2021-2022 school year started without formalized prevention strategies in place.<sup>16</sup>

The COVID-19 Delta Variant has been reported to be more infectious than the original COVID-19 virus,<sup>17</sup> thus making public schools susceptible to being super spreaders of the

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<sup>14</sup> <https://www.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/children-and-covid-19-state-level-data-report>

<sup>15</sup> CDC COVID-19 Response Team. Coronavirus Disease 2019 in Children – United States, February 12-April 2, 2020. *MMWR Morb Mortal Wkly Rep* 2020;69(14):422-426. doi:10.15585/mmwr.mm6914e4; Davies NG, Klepac P, Liu Y, et al. Age-dependent effects in the transmission and control of COVID-19 epidemics. *Nat Med* 2020;26(8):1205-1211. doi:10.1038/s41591-020-0962-9; Laws RL, Chancey RJ, Rabold EM, et al. Symptoms and Transmission of SARS-CoV-2 Among Children – Utah and Wisconsin, March-May 2020. *Pediatrics* 2021;147(1). doi:10.1542/peds.2020-027268; Ludvigsson JF. Children are unlikely to be the main drivers of the COVID-19 pandemic – A systematic review. *Acta Paediatr* 2020;109(8):1525-1530. doi:10.1111/apa.15371; Munro APS, Faust SN. COVID-19 in children: current evidence and key questions. *Curr Opin Infect Dis* 2020;33(6):540-547. doi:10.1097/qco.0000000000000690.

<sup>16</sup> Hogan, S. & Dixon, K. (2021, August 9). Metro Atlanta schools report more than 1,000 COVID cases in first days. *The Atlanta Journal-Constitution*. <https://www.ajc.com/education/metro-atlanta-schools-report-more-than-700-covid-cases-in-first-days/CZSKH2AIEZDMXMRJA6MJDA4U/>

News Staff. (2021, August 15). *Metro Atlanta school districts report over 4,000 cases of COVID-19 in first week*. <https://www.wsbtv.com/news/local/metro-atlanta-school-districts-report-over-3700-cases-covid-19-first-weeks/KO37EA3M5NDRFPGCGVEY6OIA4U/>

<sup>17</sup> CDC, [Delta Variant: What We Know About the Science](https://www.cdc.gov/coronavirus/2019-ncov/variants/delta-variant.html) (August 6, 2021)

COVID-19 Delta Variant. In order to narrowly target any Order of Constraint, it is the intent of the Health Officer and County Manager that a *Threshold Trigger* (defined below) be established for elementary private and public schools (the “**Elementary Schools**”) which would allow for a temporary Face-Covering order in specific instances where it is warranted and for a minimum amount of time.

The proposed Threshold Trigger uses the approach outlined in Utah Senate Bill 107 (SB 107) describing the threshold for implementing the Test-To-Stay program. In schools larger than 1,500 students, Test-To-Stay is activated when 2% of the population tests positive for COVID-19 during a 14-day timeframe. For schools with less than 1,500 students on a given campus, Test-To-Stay is activated when 30 positive COVID-19 cases are identified during a 14-day period. All of the schools in Summit County are subject to the 30-day threshold given they do not exceed 1,500 students on a given campus. However, this Order of Constraint uses the 2% caseload over a 14-day period, as described in SB107, to identify the threshold when masks are required in the school setting for an individual campus. Under these circumstances, where others are required to implement the Test-To-Stay program requirement as a stopgap measure for slowing COVID-19 transmission, this Order of Constraint uses the threshold to proactively address a potential outbreak and slow the spread of COVID-19 within the identified campus of concern. This approach will allow children to remain in school with minimal interruption to the learning environment. As such, individual campuses may be able to avoid activating the Test-To-Stay program given the effort to curb an outbreak at early onset.

Accordingly, the Threshold Trigger is met where 2% of the school population (inclusive of students, faculty, and administrative staff), in each Elementary School, as determined by the school district superintendent, test positive for COVID-19 over a 14-day period.

Based on the foregoing, the Health Officer and County Manager conclude that requiring students, faculty, and administrative staff to wear Face-Coverings when the *Threshold Trigger* is met for an in-person school setting under certain circumstances will help mitigate further widespread transmission of COVID-19 in the early stages of a potential outbreak while keeping the youngest students and their families safe and allowing in-person learning to continue.

**THEREFORE, PURSUANT TO UTAH CODE §26A-1-114, BE IT HEREBY ORDERED BY PHILIP BONDURANT, Dr. PH, MPH, SUMMIT COUNTY HEALTH OFFICER, AND THOMAS C. FISHER, SUMMIT COUNTY MANAGER, AS FOLLOWS:**

Section 1. **Purpose.** The intent of this Order of Constraint (the “**Order**”) is to establish a standing Threshold Trigger, which when met, requires all students, faculty, and administrative staff within an Elementary School in Summit County to wear a Face-Covering or Face-Shield

while on the school’s campus. All provisions of this Order shall be interpreted to effectuate this intent.

**Section 2. Definitions.**

2.1 “Face-Covering” is a physical barrier that:

- i. covers the nose and mouth without openings that can be seen through;
- ii. is made of synthetic or natural fabrics;
- iii. secures under the chin;
- iv. fits snugly against the nose and sides of the face; and
- v. does not have an exhalation valve or vent.

2.2 “Face-Shield” means a face covering that:

- i. covers the entire face;
- ii. protects the eyes of the wearer;
- iii. is made of clear plastic or similar nonpermeable transparent material;
- iv. secures around the top of the head;
- v. does not secure under the chin;
- vi. does not fit snugly against the nose or sides of the face; and
- vii. can be used in conjunction with a mask for enhanced protection.

**Section 3. Face-Coverings and Face-Shields Mandatory.** In the event that 2% of the school population (inclusive of students, faculty, and administrative staff) on any Elementary School campus have tested positive for COVID-19 during any 14-day period (the “**Threshold Trigger**”), Face-Coverings or Face-Shields will be required for all students, faculty, and administrative staff during the school day, including after school extra-curricular activities, at that school’s campus until the incidents are lower than the Threshold Trigger as determined by the Health Officer.

**Section 4. Exemptions.**

4.1 Notwithstanding any other provision of this Order, an individual required to wear a Face-Covering or Face-Shield may remove such in the following situations:

4.1.1 while outdoors;

- 4.1.2 while actively eating or drinking, provided the individual remains in place while eating or drinking;
  - 4.1.3 while alone or only with other members of the same household in a room, cubicle, school-provided transportation, or similar enclosure;
  - 4.1.4 individuals who are hearing impaired, or communicating with an individual who is hearing impaired, where the ability to see the mouth is essential for communication;
  - 4.1.5 while obtaining or providing a service that requires the temporary removal of the Face-Covering, such as speech therapy services;
  - 4.1.6 while actively performing as an athlete at a school-organized or -sponsored athletic event;
  - 4.1.7 while giving an educational, artistic, cultural, musical, or theatrical presentation or performance at a school for an audience;
  - 4.1.8 while exercising or engaging in athletic training while indoors and maintaining at least six feet of physical distance from any other individual;
  - 4.1.9 while performing a task which would create a risk to the individual related to their work, as determined by local, state or federal regulators or workplace safety guidelines;
  - 4.1.10 while a student is napping; and
  - 4.1.11 while swimming or on duty as a lifeguard.
- 4.2 Notwithstanding any other provision of this Order, the following individuals are exempt from the Face-Covering and Face-Shield requirements:
- 4.2.1 an individual who is unconscious, incapacitated, or otherwise unable to remove the Face-Covering or Face-Shield without assistance;
  - 4.2.2 an individual with a medical condition, mental health condition, or intellectual or developmental disability, that prevents the individual from wearing a Face- Covering or Face Shield; and
  - 4.2.3 an individual who has an Individualized Education Program (“**IEP**”) under the Individuals with Disabilities Education Act, 20 U.S.C. § 1414, or an accommodation under Section 504 of the Rehabilitation Act of 1973, 29 U.S.C. § 794, that would necessitate exempting the individual from wearing a Face-Covering or Face-Shield.

Section 5.     **Effective Date; Duration.** This Order shall become effective on August 25, 2021 at 12:01 a.m., and will continue to be in effect until the termination of the Local Public Health Emergency.


Section 6.     **Publication.** This Order shall be on file for public inspection with the Summit County Clerk and the Summit County Health Department.

Section 7.     **Enforcement.** The Health Officer, in consultation with the Superintendents of the North Summit School District, South Summit School District, and Park City School District, shall ensure compliance with and enforce this Order. This Order is intended to protect public health and not to hold individuals criminally liable. Discretion will be used in the citing and prosecution of violations of this Order.


Section 8.     **Appeal.** This Order may be appealed to the Third District Court in and for Summit County, Utah.

ORDERED and APPROVED, and published, this 21<sup>st</sup> day of August, 2021.

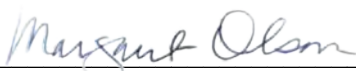
**BY ORDER OF THE SUMMIT COUNTY MANAGER**

  
\_\_\_\_\_  
Thomas C. Fisher  
Summit County Manager

**BY ORDER OF THE SUMMIT COUNTY HEALTH OFFICER**

  
\_\_\_\_\_  
Philip Bondurant, Dr. PH, MPH  
County Health Officer

APPROVED AS TO FORM:

  
\_\_\_\_\_  
Margaret H. Olson  
Summit County Attorney



**WHEREAS**, the County Health Officer finds the above facts raise the likelihood of widespread community transmission occurring among the general public and the need for Summit County and the public to work cooperatively and proactively to slow the spread of the Delta Variant and address any challenges that may arise due to this disease in Summit County; and,

**WHEREAS**, the County Health Officer does hereby find that there is an imminent and proximate threat to public health from the introduction of the Delta Variant into Summit County; and,

**WHEREAS**, the County Health Officer has provided the Summit County Manager with twenty-four (24) hour advanced notice of his intent to issue a Local Public Health Emergency Declaration in accordance with Utah Code §26A-1-114(7)(a).

**THEREFORE, PURSUANT TO UTAH CODE §26A-1-114 AND SUMMIT COUNTY CODE OF HEALTH §1-1-10(b), BE IT DELCARED BY PHILIP BONDURANT, DR. PH, MPH, COUNTY HEALTH OFFICER, AS FOLLOWS:**

Section 1.     **Declaration of Local Public Health Emergency.** It is hereby declared that there is a *Local Public Health Emergency* affecting Summit County, Utah (the “**Delta Variant Emergency**”), which exceeds the resources of the community, and assistance is requested from both the State of Utah and the federal government to provide all necessary resources to combat such emergency to protect the community and provide emergency assistance.

Section 2.     **Duration.** This declaration of the Delta Variant Emergency shall expire thirty (30) days after the *Effective Date* (defined below) unless extended by the Summit County Council.

Section 3.     **Publication.** This declaration of the Delta Variant Emergency shall be on file for public inspection with the Summit County Health Department.

Section 4.     **Notice to Governor.** A copy of this declaration of the Delta Variant Emergency shall be sent to the Office of the Governor of the State of Utah.

Effective Date: August 21, 2021

SUMMIT COUNTY HEALTH DEPARTMENT



Philip Bondurant, Dr. PH, MPH  
Summit County Health Officer

Approved as to Form:



Margaret H. Olson  
Summit County Attorney

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**IN AND FOR SUMMIT COUNTY, STATE OF UTAH**

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In the matter of:

COVID-19 Pandemic within Summit County  
(Delta Variant)

**PUBLIC HEALTH ORDER  
(Order of Constraint)**

Order No.: 2021-01

Date: August 21, 2021

Legal Authority: Utah Code §26A-1-114  
Utah Code §26A-1-102

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After giving legal notice to the *Summit County Manager* (the “**County Manager**”), the *Summit County Health Officer* (the “**Health Officer**”) declared a *Local Public Health Emergency* related to the COVID-19 Pandemic on August 21, 2021, for a period of thirty (30) days (*Utah Code* §26A-1-114(8)(a)).

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The Health Officer and County Manager find that COVID-19 poses a continuing, increasing, and immediate threat to the public health of Summit County residents and visitors. The *Delta Variant* of the COVID-19 virus is the dominant strain actively circulating in Summit County and is more contagious than the original virus and other variants.

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The Council can terminate an Order of Constraint at any time (*Utah Code* §26A-1-114(9)(a)).

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<sup>3</sup> *Id.* See Ismail SA, Saliba V, Lopez Bernal J, et al. SARS-CoV-2 infection and transmission in educational settings: a prospective, cross-sectional analysis of infection clusters and outbreaks in England. *Lancet Infect Dis* 2021;21(3):344-353. doi:10.1016/s1473-3099(20)30882-3.

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implemented layered prevention strategies, such as mask wearing and cohorting, found very low transmission (secondary attack rate 0.7%) in December 2020 – January 2021.”<sup>5</sup>

According to the most recent guidance from the CDC, “consistent and correct use of face masks reduces the spread of SARS-CoV-2 and, with some exceptions, is recommended for use indoors among people aged 2 and older who are not fully vaccinated. In general, people do not need to wear masks when outdoors.”<sup>6</sup> The CDC has further reported that “most studies that have shown success in limiting transmission in schools have required that staff only or staff and students wear masks as one of the school’s prevention strategies.”<sup>7</sup>

Further, “[e]vidence from 10 studies (across all three viruses, including 2,647 participants) found benefits for face masks in general (risk of infection or transmission when wearing a mask was 3% vs 17% when not wearing a mask).”<sup>8</sup> In fact, a 2020 study found decreased mortality rates associated with Face-Coverings.<sup>9</sup>

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<sup>5</sup> Science Brief: Transmission of SARS-CoV-2 in K-12 Schools and Early Care and Education Programs (July 9, 2021). See Hershow RB, Wu K, Lewis NM, et al. Low SARS-CoV-2 Transmission in Elementary Schools – Salt Lake County, Utah, December 3, 2020-January 31, 2021. *MMWR Morb Mortal Wkly Rep* 2021;70(12):442-448. doi:10.15585/mmwr.mm7012e3.

<sup>6</sup> Science Brief: Transmission of SARS-CoV-2 in K-12 Schools and Early Care and Education Programs (July 9, 2021).

<sup>7</sup> *Id.* See Zimmerman KO, Akinboyo IC, Brookhart MA, et al. Incidence and Secondary Transmission of SARS-CoV-2 Infections in Schools. *Pediatrics* 2021;147(4). doi:10.1542/peds.2020-048090; Gandini S, Rainisio M, Iannuzzo ML, et al. A cross-sectional and prospective cohort study of the role of schools in the SARS-CoV-2 second wave in Italy. *Lancet Reg Health Eur* 2021;5:100092. doi:10.1016/j.lanep.2021.100092; Fricchione MJ, Seo JY, Arwady MA. Data-Driven Reopening of Urban Public Education Through Chicago’s Tracking of COVID-19 School Transmission. *J Public Health Manag Pract* 2021;27(3):229-232. doi:10.1097/phh.0000000000001334; Link-Gelles R, DellaGrotta AL, Molina C, et al. Limited Secondary Transmission of SARS-CoV-2 in Child Care Programs – Rhode Island, June 1-July 31, 2020. *MMWR Morb Mortal Wkly Rep* 2020;69(34):1170-1172. doi:10.15585/mmwr.mm6934e2; Kim C, McGee S, Khuntia S, et al. Characteristics of COVID-19 Cases and Outbreaks at Child Care Facilities – District of Columbia, July-December 2020. *MMWR Morb Mortal Wkly Rep* 2021;70(20):744-748. doi:10.15585/mmwr.mm7020a3; Volpp KG, Kraut BH, Ghosh S, et al. Minimal SARS-CoV-2 Transmission After Implementation of a Comprehensive Mitigation Strategy at a School – New Jersey, August 20-November 27, 2020. *MMWR Morb Mortal Wkly Rep* 2021;70(11):377-381. doi:10.15585/mmwr.mm7011a2.

<sup>8</sup> “Physical distancing, face masks, and eye protection to prevent person-to-person transmission of SARS-CoV-2 and Covid 19: a systematic review and meta-analysis,” DK Chu, MD; EA Aki, MD; S Duda, MSc; K Solo, MSc, et. al. *The Lancet* (Open Access Published June 01, 2020).

<sup>9</sup> Leffler, Christopher & Ing, Edsel & Lykins, Joseph & Hogan, Matthew & McKeown, Craig & Grzybowski, Andrzej. (2020). Association of country-wide coronavirus mortality with demographics, testing, lockdowns, and public wearing of masks (Update June 15, 2020). <https://www.researchgate.net/community/COVID-19>

According to a recent study documented in the Official Journal of the American Academy of Pediatrics, hospitalizations were more frequent in children/adolescents with COVID-19 than with influenza.<sup>10</sup>

As a general measure, COVID-19 health restrictions cannot be imposed where the 14-day case rate is less than 191 per 100,000 people (*former Utah Code* §26A-1-130(2)).

Summit County has a 14-day case rate of 249 per 100,000 people, placing the county within the Moderate Level of Transmission under criteria separately established by the State of Utah and the CDC.<sup>11</sup>

Summit County has a 78% vaccination rate among its citizens who are eligible to receive the vaccine.<sup>12</sup> The incidents of hospitalizations for COVID-19 patients, as well as deaths, among vaccinated individuals is negligible. Further, reports are that break-through incidents of COVID-19 among vaccinated individuals are unusual, but where they have occurred, the individuals are either asymptomatic or report moderate symptoms.<sup>13</sup>

Although the Summit County Health Department continues its extensive efforts to vaccinate all eligible Summit County residents, no COVID-19 vaccine is yet approved by the FDA for children under the age of 12. With the spread of the COVID-19 Delta Variant and case rates rapidly increasing, Summit County is at a critical juncture in this pandemic, especially when considering the younger population that is ineligible for vaccination.

When considering actions to protect the children in the school setting, all available information is considered. On August 16, 2021 the American Academy of Pediatrics released a report of State-Level Data indicating children were 18% of weekly reported COVID-19 cases in the United States during the week of 8/5/2021 – 8/12/2021, a time period when many schools

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<sup>10</sup> Duarte-Salles, 30-Day Outcomes of Children and Adolescents With COVID-19: An International Experience (*Pediatrics* 2021) <https://pediatrics.aappublications.org/content/pediatrics/early/2021/05/28/peds.2020-042929.full.pdf>

<sup>11</sup> Summit County COVID-19 Dashboard, Summit County Health Department <https://summitcountyhealth.org/dashboard/>

<sup>12</sup> Id.

<sup>13</sup> KSL, Utah Hospitals Filling Up with Unvaccinated COVID-19 Patients (July 26, 2021); Salt Lake Tribune, Utah hospitals are filling up, and more than 95% of the COVID patients weren't vaccinated (July 13, 2021); U.S News & World Report, In Utah, Hospitals Swell With Unvaccinated COVID-19 Patients (July 27, 2021); New York Times, What to Know About Breakthrough Infections and the Delta Variant (August 11, 2021).

were returning from summer break. This number is the highest it has been since the start of the pandemic.<sup>14</sup>

Recent studies acknowledge that children generally fare better than adults when infected with COVID-19.<sup>15</sup> On August 20, 2021, the State of Utah reported 49,054 COVID-19 cases in individuals between the ages of 1-14, which accounts for 10.8% of the total COVID-19 cases in the State. Of the 49,054 cases (ages 1-14) reported in Utah on August 17, 2021, 345 (0.70%) have been hospitalized because of COVID-19. On the same day, the State also reported one COVID-19 death (0.002%) in a child between the ages of 1-14.

Considering the recent information regarding the outcomes of children infected with COVID-19 and the intent to keep children in school while minimizing risk, we must acknowledge the challenges and uncertainty presented by the Delta Variant for those who are ineligible for COVID-19 vaccination. Therefore, we must rely on the science and data, along with established frameworks, that support a layered approach to mitigating risk in the school setting. These resources include the outcomes associated with other school districts throughout the United States where the 2021-2022 school year started without formalized prevention strategies in place.<sup>16</sup>

The COVID-19 Delta Variant has been reported to be more infectious than the original COVID-19 virus,<sup>17</sup> thus making public schools susceptible to being super spreaders of the

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<sup>14</sup> <https://www.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/children-and-covid-19-state-level-data-report>

<sup>15</sup> CDC COVID-19 Response Team. Coronavirus Disease 2019 in Children – United States, February 12-April 2, 2020. *MMWR Morb Mortal Wkly Rep* 2020;69(14):422-426. doi:10.15585/mmwr.mm6914e4; Davies NG, Klepac P, Liu Y, et al. Age-dependent effects in the transmission and control of COVID-19 epidemics. *Nat Med* 2020;26(8):1205-1211. doi:10.1038/s41591-020-0962-9; Laws RL, Chancey RJ, Rabold EM, et al. Symptoms and Transmission of SARS-CoV-2 Among Children – Utah and Wisconsin, March-May 2020. *Pediatrics* 2021;147(1). doi:10.1542/peds.2020-027268; Ludvigsson JF. Children are unlikely to be the main drivers of the COVID-19 pandemic – A systematic review. *Acta Paediatr* 2020;109(8):1525-1530. doi:10.1111/apa.15371; Munro APS, Faust SN. COVID-19 in children: current evidence and key questions. *Curr Opin Infect Dis* 2020;33(6):540-547. doi:10.1097/qco.0000000000000690.

<sup>16</sup> Hogan, S. & Dixon, K. (2021, August 9). Metro Atlanta schools report more than 1,000 COVID cases in first days. *The Atlanta Journal-Constitution*. <https://www.ajc.com/education/metro-atlanta-schools-report-more-than-700-covid-cases-in-first-days/CZSKH2AIEZDMXMRJA6MJDA4U/>

News Staff. (2021, August 15). *Metro Atlanta school districts report over 4,000 cases of COVID-19 in first week*. <https://www.wsbtv.com/news/local/metro-atlanta-school-districts-report-over-3700-cases-covid-19-first-weeks/KO37EA3M5NDRFPGCGVEY6OIA4U/>

<sup>17</sup> CDC, [Delta Variant: What We Know About the Science](https://www.cdc.gov/coronavirus/2019-ncov/variants/delta-variant.html) (August 6, 2021)

COVID-19 Delta Variant. In order to narrowly target any Order of Constraint, it is the intent of the Health Officer and County Manager that a *Threshold Trigger* (defined below) be established for elementary private and public schools (the “**Elementary Schools**”) which would allow for a temporary Face-Covering order in specific instances where it is warranted and for a minimum amount of time.

The proposed Threshold Trigger uses the approach outlined in Utah Senate Bill 107 (SB 107) describing the threshold for implementing the Test-To-Stay program. In schools larger than 1,500 students, Test-To-Stay is activated when 2% of the population tests positive for COVID-19 during a 14-day timeframe. For schools with less than 1,500 students on a given campus, Test-To-Stay is activated when 30 positive COVID-19 cases are identified during a 14-day period. All of the schools in Summit County are subject to the 30-day threshold given they do not exceed 1,500 students on a given campus. However, this Order of Constraint uses the 2% caseload over a 14-day period, as described in SB107, to identify the threshold when masks are required in the school setting for an individual campus. Under these circumstances, where others are required to implement the Test-To-Stay program requirement as a stopgap measure for slowing COVID-19 transmission, this Order of Constraint uses the threshold to proactively address a potential outbreak and slow the spread of COVID-19 within the identified campus of concern. This approach will allow children to remain in school with minimal interruption to the learning environment. As such, individual campuses may be able to avoid activating the Test-To-Stay program given the effort to curb an outbreak at early onset.

Accordingly, the Threshold Trigger is met where 2% of the school population (inclusive of students, faculty, and administrative staff), in each Elementary School, as determined by the school district superintendent, test positive for COVID-19 over a 14-day period.

Based on the foregoing, the Health Officer and County Manager conclude that requiring students, faculty, and administrative staff to wear Face-Coverings when the *Threshold Trigger* is met for an in-person school setting under certain circumstances will help mitigate further widespread transmission of COVID-19 in the early stages of a potential outbreak while keeping the youngest students and their families safe and allowing in-person learning to continue.

**THEREFORE, PURSUANT TO UTAH CODE §26A-1-114, BE IT HEREBY ORDERED BY PHILIP BONDURANT, Dr. PH, MPH, SUMMIT COUNTY HEALTH OFFICER, AND THOMAS C. FISHER, SUMMIT COUNTY MANAGER, AS FOLLOWS:**

Section 1. **Purpose.** The intent of this Order of Constraint (the “**Order**”) is to establish a standing Threshold Trigger, which when met, requires all students, faculty, and administrative staff within an Elementary School in Summit County to wear a Face-Covering or Face-Shield

while on the school’s campus. All provisions of this Order shall be interpreted to effectuate this intent.

**Section 2. Definitions.**

2.1 “Face-Covering” is a physical barrier that:

- i. covers the nose and mouth without openings that can be seen through;
- ii. is made of synthetic or natural fabrics;
- iii. secures under the chin;
- iv. fits snugly against the nose and sides of the face; and
- v. does not have an exhalation valve or vent.

2.2 “Face-Shield” means a face covering that:

- i. covers the entire face;
- ii. protects the eyes of the wearer;
- iii. is made of clear plastic or similar nonpermeable transparent material;
- iv. secures around the top of the head;
- v. does not secure under the chin;
- vi. does not fit snugly against the nose or sides of the face; and
- vii. can be used in conjunction with a mask for enhanced protection.

**Section 3. Face-Coverings and Face-Shields Mandatory.** In the event that 2% of the school population (inclusive of students, faculty, and administrative staff) on any Elementary School campus have tested positive for COVID-19 during any 14-day period (the “**Threshold Trigger**”), Face-Coverings or Face-Shields will be required for all students, faculty, and administrative staff during the school day, including after school extra-curricular activities, at that school’s campus until the incidents are lower than the Threshold Trigger as determined by the Health Officer.

**Section 4. Exemptions.**

4.1 Notwithstanding any other provision of this Order, an individual required to wear a Face-Covering or Face-Shield may remove such in the following situations:

4.1.1 while outdoors;



- 4.1.2 while actively eating or drinking, provided the individual remains in place while eating or drinking;
  - 4.1.3 while alone or only with other members of the same household in a room, cubicle, school-provided transportation, or similar enclosure;
  - 4.1.4 individuals who are hearing impaired, or communicating with an individual who is hearing impaired, where the ability to see the mouth is essential for communication;
  - 4.1.5 while obtaining or providing a service that requires the temporary removal of the Face-Covering, such as speech therapy services;
  - 4.1.6 while actively performing as an athlete at a school-organized or -sponsored athletic event;
  - 4.1.7 while giving an educational, artistic, cultural, musical, or theatrical presentation or performance at a school for an audience;
  - 4.1.8 while exercising or engaging in athletic training while indoors and maintaining at least six feet of physical distance from any other individual;
  - 4.1.9 while performing a task which would create a risk to the individual related to their work, as determined by local, state or federal regulators or workplace safety guidelines;
  - 4.1.10 while a student is napping; and
  - 4.1.11 while swimming or on duty as a lifeguard.
- 4.2 Notwithstanding any other provision of this Order, the following individuals are exempt from the Face-Covering and Face-Shield requirements:
- 4.2.1 an individual who is unconscious, incapacitated, or otherwise unable to remove the Face-Covering or Face-Shield without assistance;
  - 4.2.2 an individual with a medical condition, mental health condition, or intellectual or developmental disability, that prevents the individual from wearing a Face- Covering or Face Shield; and
  - 4.2.3 an individual who has an Individualized Education Program (“**IEP**”) under the Individuals with Disabilities Education Act, 20 U.S.C. § 1414, or an accommodation under Section 504 of the Rehabilitation Act of 1973, 29 U.S.C. § 794, that would necessitate exempting the individual from wearing a Face-Covering or Face-Shield.

Section 5.     **Effective Date; Duration.** This Order shall become effective on August 25, 2021 at 12:01 a.m., and will continue to be in effect until the termination of the Local Public Health Emergency.


Section 6.     **Publication.** This Order shall be on file for public inspection with the Summit County Clerk and the Summit County Health Department.

Section 7.     **Enforcement.** The Health Officer, in consultation with the Superintendents of the North Summit School District, South Summit School District, and Park City School District, shall ensure compliance with and enforce this Order. This Order is intended to protect public health and not to hold individuals criminally liable. Discretion will be used in the citing and prosecution of violations of this Order.


Section 8.     **Appeal.** This Order may be appealed to the Third District Court in and for Summit County, Utah.

ORDERED and APPROVED, and published, this 21<sup>st</sup> day of August, 2021.

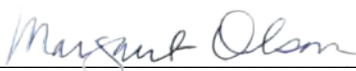
**BY ORDER OF THE SUMMIT COUNTY MANAGER**

  
\_\_\_\_\_  
Thomas C. Fisher  
Summit County Manager

**BY ORDER OF THE SUMMIT COUNTY HEALTH OFFICER**

  
\_\_\_\_\_  
Philip Bondurant, Dr. PH, MPH  
County Health Officer

APPROVED AS TO FORM:

  
\_\_\_\_\_  
Margaret H. Olson  
Summit County Attorney

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**IN AND FOR SUMMIT COUNTY, STATE OF UTAH**

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In the matter of:

COVID-19 Pandemic within Summit County  
(Delta Variant)

**PUBLIC HEALTH ORDER  
(Order of Constraint)**

Order No.: 2021-02

Date: September 23, 2021

Legal Authority: Utah Code §26A-1-114  
Utah Code §26A-1-102

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After giving legal notice to the *Summit County Manager* (the “**County Manager**”), the *Summit County Health Officer* (the “**Health Officer**”) declared a *Local Public Health Emergency* related to the COVID-19 Pandemic on August 21, 2021, for a period of thirty (30) days (*Utah Code §26A-1-114(8)(a)*).

On September 20, 2021, the *Summit County Council* (the “**Council**”) extended the *Local Public Health Emergency* until December 31, 2021 (*Utah Code §26A-1-114(8)(b)*).

In Utah, local health departments are vested under *Utah Code § 26A-1-114(1)(d)* with authority to establish measures as may be necessary to promote and protect public health and control the spread of disease.

COVID-19 is a contagion that spreads from person to person. The *Health Officer* and *County Manager* recognize the need for Summit County and the public to continue to work cooperatively and proactively to slow the spread of COVID-19 and to address the myriad challenges COVID-19 has created.

The *Health Officer* and *County Manager* find that COVID-19 poses a continuing, increasing, and immediate threat to the public health of Summit County residents and visitors. The *Delta Variant* of the COVID-19 virus is the dominant strain actively circulating in Summit County and is more contagious than the original virus and other variants.

*Orders of Constraint* can only be issued during a declared *Local Public Health Emergency* (Utah Code §26A-1-102(9)(a)). A *Face-Covering* (defined below) mandate is a form of an *Order of Constraint* (Utah Code §26A-1-102(9)).

During a declared *Local Public Health Emergency*, the *Health Officer* and the *County Manager* can jointly issue an *Order of Constraint* (Utah Code §26A-1-114(9)(a)).

The Council can terminate an *Order of Constraint* at any time (Utah Code §26A-1-114(9)(a)).

The *Centers for Disease Control and Prevention* (the “**CDC**”) has provided a summary of the most up-to-date scientific data on COVID-19 in K-12 schools.<sup>1</sup> The CDC has recommended the “use of multiple strategies – also called layered prevention – [which] provides greater protection in breaking transmission chains than implementing a single strategy.” This is especially the case in “areas with moderate to high community transmission, low vaccination rates, and for people who are not fully vaccinated.”<sup>2</sup> According to a recent study from the United Kingdom, “for every five additional cases per 100,000 population in regional incidence, the risk of a school outbreak increased by 72%.”<sup>3</sup> Other studies found that where community transmission rates were low, there was no association between in-person learning and community spread, but when the transmission rates increased to moderate or high levels, transmission rates simultaneously rose in schools.<sup>4</sup> “A study of elementary schools in Utah who

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<sup>1</sup> Science Brief: Transmission of SARS-CoV-2 in K-12 Schools and Early Care and Education Programs (July 9, 2021) [https://www.cdc.gov/coronavirus/2019-ncov/science/science-briefs/transmission\\_k\\_12\\_schools.html?CDC\\_AA\\_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fmore%2Fscience-and-research%2Ftransmission\\_k\\_12\\_schools.html#schools-cov2-transmission](https://www.cdc.gov/coronavirus/2019-ncov/science/science-briefs/transmission_k_12_schools.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fmore%2Fscience-and-research%2Ftransmission_k_12_schools.html#schools-cov2-transmission)

<sup>2</sup> *Id.* See Honein MA, Barrios LC, Brooks JT. Data and Policy to Guide Opening Schools Safely to Limit the Spread of SARS-CoV-2 Infection. *JAMA* 2021;325(9):823-824. doi:10.1001/jama.2021.0374; Honein MA, Christie A, Rose DA, et al. Summary of Guidance for Public Health Strategies to Address High Levels of Community Transmission of SARS-CoV-2 and Related Deaths, December 2020. *MMWR Morb Mortal Wkly Rep* 2020;69(49):1860-1867. doi:10.15585/mmwr.mm6949e2.

<sup>3</sup> *Id.* See Ismail SA, Saliba V, Lopez Bernal J, et al. SARS-CoV-2 infection and transmission in educational settings: a prospective, cross-sectional analysis of infection clusters and outbreaks in England. *Lancet Infect Dis* 2021;21(3):344-353. doi:10.1016/s1473-3099(20)30882-3.

<sup>4</sup> Russell FM, Ryan K, Snow K, et al. COVID-19 in Victorian Schools: An analysis of child-care and school outbreak data and evidence-based recommendations for opening schools and keeping them open. *Report from Murdoch Children’s Research Institute and the University of Melbourne*. 2020; Published 2020 September 25; Goldhaber D, Imberman SA, Strunk KO, et al. To What Extent Does In-Person Schooling Contribute to the Spread of COVID-19? Evidence from Michigan and Washington. 2020. CALDER Working Paper No. 247-1220-2.

implemented layered prevention strategies, such as mask wearing and cohorting, found very low transmission (secondary attack rate 0.7%) in December 2020 – January 2021.”<sup>5</sup>

According to the most recent guidance from the CDC, “consistent and correct use of face masks reduces the spread of SARS-CoV-2 and, with some exceptions, is recommended for use indoors among people aged 2 and older who are not fully vaccinated. In general, people do not need to wear masks when outdoors.”<sup>6</sup> The CDC has further reported that “most studies that have shown success in limiting transmission in schools have required that staff only or staff and students wear masks as one of the school’s prevention strategies.”<sup>7</sup>

Further, “[e]vidence from 10 studies (across all three viruses, including 2,647 participants) found benefits for face masks in general (risk of infection or transmission when wearing a mask was 3% vs 17% when not wearing a mask).”<sup>8</sup> In fact, a 2020 study found decreased mortality rates associated with *Face-Coverings*.<sup>9</sup> The most recent and comprehensive study found that mask wearing reduced the incidents of COVID-19 by 9.3%.<sup>10</sup>

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<sup>5</sup> Science Brief: Transmission of SARS-CoV-2 in K-12 Schools and Early Care and Education Programs (July 9, 2021). See Hershow RB, Wu K, Lewis NM, et al. Low SARS-CoV-2 Transmission in Elementary Schools – Salt Lake County, Utah, December 3, 2020-January 31, 2021. *MMWR Morb Mortal Wkly Rep* 2021;70(12):442-448. doi:10.15585/mmwr.mm7012e3.

<sup>6</sup> Science Brief: Transmission of SARS-CoV-2 in K-12 Schools and Early Care and Education Programs (July 9, 2021).

<sup>7</sup> *Id.* See Zimmerman KO, Akinboyo IC, Brookhart MA, et al. Incidence and Secondary Transmission of SARS-CoV-2 Infections in Schools. *Pediatrics* 2021;147(4). doi:10.1542/peds.2020-048090; Gandini S, Rainisio M, Iannuzzo ML, et al. A cross-sectional and prospective cohort study of the role of schools in the SARS-CoV-2 second wave in Italy. *Lancet Reg Health Eur* 2021;5:100092. doi:10.1016/j.lanep.2021.100092; Fricchione MJ, Seo JY, Arwady MA. Data-Driven Reopening of Urban Public Education Through Chicago’s Tracking of COVID-19 School Transmission. *J Public Health Manag Pract* 2021;27(3):229-232. doi:10.1097/phh.0000000000001334; Link-Gelles R, DellaGrotta AL, Molina C, et al. Limited Secondary Transmission of SARS-CoV-2 in Child Care Programs – Rhode Island, June 1-July 31, 2020. *MMWR Morb Mortal Wkly Rep* 2020;69(34):1170-1172. doi:10.15585/mmwr.mm6934e2; Kim C, McGee S, Khuntia S, et al. Characteristics of COVID-19 Cases and Outbreaks at Child Care Facilities – District of Columbia, July-December 2020. *MMWR Morb Mortal Wkly Rep* 2021;70(20):744-748. doi:10.15585/mmwr.mm7020a3; Volpp KG, Kraut BH, Ghosh S, et al. Minimal SARS-CoV-2 Transmission After Implementation of a Comprehensive Mitigation Strategy at a School – New Jersey, August 20-November 27, 2020. *MMWR Morb Mortal Wkly Rep* 2021;70(11):377-381. doi:10.15585/mmwr.mm7011a2.

<sup>8</sup> “Physical distancing, face masks, and eye protection to prevent person-to-person transmission of SARS-CoV-2 and Covid 19: a systematic review and meta-analysis,” DK Chu, MD; EA Aki, MD; S Duda, MSc; K Solo, MSc, et. al. *The Lancet* (Open Access Published June 01, 2020).

<sup>9</sup> Leffler, Christopher & Ing, Edsel & Lykins, Joseph & Hogan, Matthew & McKeown, Craig & Grzybowski, Andrzej. (2020). Association of country-wide coronavirus mortality with demographics, testing, lockdowns, and public wearing of masks (Update June 15, 2020). <https://www.researchgate.net/community/COVID-19>

According to a recent study documented in the Official Journal of the American Academy of Pediatrics, hospitalizations were more frequent in children/adolescents with COVID-19 than with influenza.<sup>11</sup>

As a general measure, COVID-19 health restrictions cannot be imposed where the 14-day case rate is less than 191 per 100,000 people (*former Utah Code* §26A-1-130(2)).

Summit County has a 14-day case rate of 354 per 100,000 people, placing the county within the High Level of Transmission under criteria separately established by the State of Utah and the CDC.<sup>12</sup>

Summit County has an 82% vaccination rate among its citizens who are eligible to receive the vaccine.<sup>13</sup> While the vaccination rate among 16-18 year-olds remains high, the vaccination rates among 12-15 year-olds is only 55%.<sup>14</sup> The CDC has defined *Herd-Immunity* (or *Community Immunity*) as “[a] situation in which a sufficient proportion of a population is immune to an infectious disease (through vaccination and/or prior illness) to make its spread from person to person unlikely.”<sup>15</sup> *Herd-Immunity* is different for different diseases. For example, *Herd-Immunity* for measles is 95% and for polio is 80%. While *Herd-Immunity* for COVID-19 was thought to be 70% at one time (*Native Strain*), epidemiologists now suggest it could be closer to 80% (*Delta Variant*).<sup>16</sup>

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<sup>10</sup> Abaluck, Kwong, Styczynski, Haque, et. al., “The Impact of Community Masking on COVID-19: A Cluster-Randomized Trial in Bangladesh” (August 31, 2021) [https://www.poverty-action.org/sites/default/files/publications/Mask\\_RCT\\_Symptomatic\\_Seropositivity\\_083121.pdf](https://www.poverty-action.org/sites/default/files/publications/Mask_RCT_Symptomatic_Seropositivity_083121.pdf)

<sup>11</sup> Duarte-Salles, 30-Day Outcomes of Children and Adolescents With COVID-19: An International Experience (*Pediatrics* 2021) <https://pediatrics.aappublications.org/content/pediatrics/early/2021/05/28/peds.2020-042929.full.pdf>

<sup>12</sup> Summit County COVID-19 Dashboard, Summit County Health Department <https://summitcountyhealth.org/dashboard/>

<sup>13</sup> Id.

<sup>14</sup> Id.

<sup>15</sup> CDC, Vaccines & Immunizations, Glossary, <https://www.cdc.gov/vaccines/terms/glossary.html>. Herd Immunity is calculated using vaccination rates without taking into consideration infection-based immunity. Per Chen, Prettnner, Kuhn, and Bloom (2021), “Our results show that the United States would incur a sizeable burden if it adopted a non-interventionist herd immunity approach.” While infection-based immunity provides an important contribution to ending the COVID-19 pandemic, it is difficult to calculate and rates of natural immunity vary by region. Therefore, the uncertainty created by the lack of data and the inability to measure rates of natural-immunity make it an outlier when calculating herd-immunity.

<sup>16</sup> Herd-Immunity is calculated as follows:  $1 - (1/R0) = \text{herd immunity}$

Although the Summit County Health Department continues its extensive efforts to vaccinate all eligible Summit County residents, there continues to be a lag among 12-15 year-olds who as a group have not reached Herd-Immunity. The 12-15 year age group resides in our Middle Schools and Junior High Schools.

Further, there continues to be a gap in vaccine eligibility for children [eligible (>12) and ineligible (<11)], at the junction between Elementary School and Middle School/Junior High School (the “*Gap Students*”).

When considering actions to protect children in a school setting, all available information is considered. On September 9, 2021, the American Academy of Pediatrics released a report of State-Level Data indicating children were 28.9% of weekly reported COVID-19 cases in the United States during the week of 9/2/2021 – 9/9/2021, up 10% points from August 12, 2021, when many schools were returning from summer break. This number is the highest it has been since the start of the pandemic.<sup>17</sup>

While recent studies acknowledge that children generally fare better than adults when infected with COVID-19,<sup>18</sup> the *Delta Variant* has been far more unpredictable.

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#### Delta Variant Calculation

- Delta has a mean R0 of 5.08 (Liu & Rocklov, 2021) <https://academic.oup.com/jtm/advance-article/doi/10.1093/jtm/taab124/6346388>
  - \*range of R0 3.2 to 8
- $1-(1/5.08) = .80315$
- $.80315 \times 100 = 80.32\%$  vaccinated for Herd-Immunity

This calculation aligns with Charumilind, S., Craven, M., Lamb, J., Sabow, A., & Wilson, M. “*When will the covid-19 pandemic end? an update*” (2021) <https://www.mckinsey.com/industries/healthcare-systems-and-services/our-insights/when-will-the-covid-19-pandemic-end>. See Kwok, K. O., Lai, F., Wei, W. I., Wong, S. Y. S., & Tang, J. W. “*Herd immunity—estimating the level required to halt the COVID-19 epidemics in affected countries*” *Journal of Infection*, 80(6), e32-e33 (2020) [https://www.journalofinfection.com/article/S0163-4453\(20\)30154-7/fulltext](https://www.journalofinfection.com/article/S0163-4453(20)30154-7/fulltext); Chen, S., Prettnner, K., Kuhn, M., & Bloom, D. E. “*The economic burden of COVID-19 in the United States: Estimates and projections under an infection-based herd immunity approach*” *The Journal of the Economics of Ageing*, 100328 (2021) <https://www.sciencedirect.com/science/article/pii/S2212828X21000219>. See also Carrie MacMillan, “*Herd Immunity: Will We Ever Get There?*” (Yale School of Medicine: May 21, 2021) <https://www.yalemedicine.org/news/herd-immunity>

<sup>17</sup> <https://www.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/children-and-covid-19-state-level-data-report/>

<sup>18</sup> CDC COVID-19 Response Team. Coronavirus Disease 2019 in Children – United States, February 12–April 2, 2020. *MMWR Morb Mortal Wkly Rep* 2020;69(14):422–426. doi:10.15585/mmwr.mm6914e4; Davies NG, Klepac P, Liu Y, et al. Age-dependent effects in the transmission and control of COVID-19 epidemics. *Nat Med* 2020;26(8):1205–1211. doi:10.1038/s41591-020-0962-9; Laws RL, Chancey RJ, Rabold EM, et al. Symptoms and Transmission of SARS-CoV-2 Among Children – Utah and Wisconsin, March–May

As a result, *Public Health Order 2021-01* was issued on August 21, 2021 in order to keep children in school while minimizing risk and acknowledging the challenges and uncertainty presented by the Delta Variant for those who are ineligible for COVID-19 vaccination.

*Public Health Order 2021-01* relied on the science and data, along with established frameworks, that support a layered approach to mitigating risk in the school setting. These resources include the outcomes associated with other school districts throughout the United States where the 2021-2022 school year started without formalized prevention strategies in place.<sup>19</sup>

The COVID-19 *Delta Variant* has been reported to be more infectious than the original COVID-19 virus,<sup>20</sup> thus making public schools susceptible to being super spreaders of the COVID-19 *Delta Variant*. This is now being seen in neighboring counties where the vaccination rates are lower than in Summit County. In order to narrowly target any *Order of Constraint*, it is the intent of the *Health Officer* and *County Manager* that a stop gap measure similar to that in vaccine ineligible populations (Elementary School children) should be in place in Middle Schools and Junior High Schools until the 80% vaccination goal is reached in those populations 12-15 years of age. In the event of an outbreak, this approach offers protection to those individuals who are ineligible for vaccination (the *Gap Students*), minimizes the chance of progressing to Test-to-Stay, and keeps children in school.

The proposed *Threshold Trigger* uses the same approach as outlined in *Public Health Order 2021-01*, which tracks with state legislation describing the threshold for implementing the Test-To-Stay program. In schools larger than 1,500 students, Test-To-Stay is activated when 2% of the population tests positive for COVID-19 during a 14-day timeframe. For schools with less than 1,500 students on a given campus, Test-To-Stay is activated when 30 positive COVID-19

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2020. *Pediatrics* 2021;147(1). doi:10.1542/peds.2020-027268; Ludvigsson JF. Children are unlikely to be the main drivers of the COVID-19 pandemic – A systematic review. *Acta Paediatr* 2020;109(8):1525-1530. doi:10.1111/apa.15371; Munro APS, Faust SN. COVID-19 in children: current evidence and key questions. *Curr Opin Infect Dis* 2020;33(6):540-547. doi:10.1097/qco.0000000000000690.

<sup>19</sup> Hogan, S. & Dixon, K. (2021, August 9). Metro Atlanta schools report more than 1,000 COVID cases in first days. *The Atlanta Journal-Constitution*. <https://www.ajc.com/education/metro-atlanta-schools-report-more-than-700-covid-cases-in-first-days/CZSKH2AIEZDMXMRJA6MJDIA4U/>

News Staff. (2021, August 15). *Metro Atlanta school districts report over 4,000 cases of COVID-19 in first week*. <https://www.wsbtv.com/news/local/metro-atlanta-school-districts-report-over-3700-cases-covid-19-first-weeks/KO37EA3M5NDRFPGCGVEY6OIA4U/>

<sup>20</sup> CDC, [Delta Variant: What We Know About the Science](https://www.cdc.gov/coronavirus/2019-ncov/variants/delta-variant.html) (August 6, 2021)



cases are identified during a 14-day period. All of the schools in Summit County are subject to the 30-case threshold given that they do not exceed 1,500 students on a given campus. However, this *Order of Constraint* uses the 2% caseload over a 14-day period, as described in state legislation, to identify the threshold when masks are required in the school setting for an individual campus. Under these circumstances, where others are required to implement the Test-To-Stay program requirement as a stopgap measure for slowing COVID-19 transmission, this *Order of Constraint* uses a threshold to proactively address a potential outbreak and slow the spread of COVID-19 within the identified campus of concern. This approach will allow children to remain in school with minimal interruption to the learning environment. As such, individual campuses may be able to avoid activating the Test-To-Stay program given the effort to curb an outbreak at early onset.

Accordingly, the *Threshold Trigger* is met where 2% of the school population (inclusive of students, faculty, and administrative staff), in each Middle School or Junior High School, as determined by the school district superintendent, test positive for COVID-19 over a 14-day period. The methodology for determining a school associated case is set by the Utah Department of Health and applies to all staff, faculty, and students who meet the established criteria.

Based on the foregoing, the *Health Officer* and *County Manager* conclude that requiring students, faculty, and administrative staff to wear *Face-Coverings* when the *Threshold Trigger* is met for an in-person school setting under certain circumstances will help mitigate further widespread transmission of COVID-19 in the early stages of a potential outbreak while keeping students and their families safe and allowing in-person learning to continue.

**THEREFORE, PURSUANT TO UTAH CODE §26A-1-114, BE IT HEREBY ORDERED BY PHILIP BONDURANT, Dr. PH, MPH, SUMMIT COUNTY HEALTH OFFICER, AND THOMAS C. FISHER, SUMMIT COUNTY MANAGER, AS FOLLOWS:**

Section 1.     **Purpose.** The intent of this *Order of Constraint* (the “**Order**”) is to establish a standing *Threshold Trigger*, which when met, requires all students, faculty, and administrative staff within a public or private Middle School (including K-8 schools) or Junior High School in Summit County to wear a *Face-Covering* or *Face-Shield* while on the school’s campus. All provisions of this *Order* shall be interpreted to effectuate this intent.

Section 2.     **Definitions.**

- 2.1     “*Face-Covering*” is a physical barrier that:
- i. covers the nose and mouth without openings that can be seen through;
  - ii. is made of synthetic or natural fabrics;
  - iii. secures under the chin;

- iv. fits snugly against the nose and sides of the face; and
- v. does not have an exhalation valve or vent.

2.2 “*Face-Shield*” means a face covering that:

- i. covers the entire face;
- ii. protects the eyes of the wearer;
- iii. is made of clear plastic or similar nonpermeable transparent material;
- iv. secures around the top of the head;
- v. does not secure under the chin;
- vi. does not fit snugly against the nose or sides of the face; and
- vii. can be used in conjunction with a mask for enhanced protection.

**Section 3. Face-Coverings and Face-Shields Mandatory.** In the event that 2% of the school population (inclusive of students, faculty, and administrative staff) on any public or private Middle School (including K-8 schools) or Junior High School campus have tested positive for COVID-19 during any 14-day period (the “**Threshold Trigger**”), *Face-Coverings* or *Face-Shields* will be required for all students, faculty, and administrative staff during the school day, including after school extra-curricular activities, at that school’s campus for fourteen (14) consecutive days following the date upon which the *Threshold Trigger* was met (the “**Trigger Date**”). The 14-day positive case total will be re-evaluated on the 14<sup>th</sup> day following the *Trigger Date*. In the event that the re-evaluated 14-day positive case total falls below the *Threshold Trigger*, *Face-Coverings* or *Face-Shields* will no longer be required for indoor settings on that school campus. However, in the event that the 14-day positive case total continues to equal or exceed the *Threshold Trigger*, *Face-Coverings* or *Face-Shields* will continue to be required until the 14-day positive case total is below the *Threshold Trigger* for that school campus.

**Section 4. Exemptions.**

- 4.1 Notwithstanding any other provision of this *Order*, an individual required to wear a *Face-Covering* or *Face-Shield* may remove such in the following situations:
  - 4.1.1 while outdoors;
  - 4.1.2 while actively eating or drinking, provided the individual remains in place while eating or drinking;

- 4.1.3 while alone or only with other members of the same household in a room, cubicle, school-provided transportation, or similar enclosure;
  - 4.1.4 individuals who are hearing impaired, or communicating with an individual who is hearing impaired, where the ability to see the mouth is essential for communication;
  - 4.1.5 while obtaining or providing a service that requires the temporary removal of the *Face-Covering*, such as speech therapy services;
  - 4.1.6 while actively performing as an athlete at a school-organized or -sponsored athletic event;
  - 4.1.7 while giving an educational, artistic, cultural, musical, or theatrical presentation or performance at a school for an audience;
  - 4.1.8 while exercising or engaging in athletic training while indoors and maintaining at least six feet of physical distance from any other individual;
  - 4.1.9 while performing a task which would create a risk to the individual related to their work, as determined by local, state or federal regulators or workplace safety guidelines;
  - 4.1.10 while a student is napping; and
  - 4.1.11 while swimming or on duty as a lifeguard.
- 4.2 Notwithstanding any other provision of this *Order*, the following individuals are exempt from the *Face-Covering* and *Face-Shield* requirements:
- 4.2.1 an individual who is unconscious, incapacitated, or otherwise unable to remove the *Face-Covering* or *Face-Shield* without assistance;
  - 4.2.2 an individual with a medical condition, mental health condition, or intellectual or developmental disability, that prevents the individual from wearing a *Face-Covering* or *Face Shield*; and
  - 4.2.3 an individual who has an *Individualized Education Program* (“**IEP**”) under the Individuals with Disabilities Education Act, 20 U.S.C. § 1414, or an accommodation under Section 504 of the Rehabilitation Act of 1973, 29 U.S.C. § 794, that would necessitate exempting the individual from wearing a *Face-Covering* or *Face-Shield*.

Section 5.     **Effective Date; Duration.** This *Order* shall become effective on September 27, 2021 at 12:01 a.m., and will continue to be in effect until the termination of the Local Public Health Emergency.

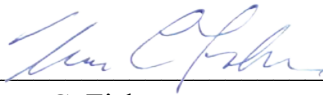
Section 6.     **Publication.** This *Order* shall be on file for public inspection with the Summit County Clerk and the Summit County Health Department.

Section 7.     **Enforcement.** The *Health Officer*, in consultation with the Superintendents of the North Summit School District, South Summit School District, and Park City School District, shall ensure compliance with and enforce this *Order*. This *Order* is intended to protect public health and not to hold individuals criminally liable. Discretion will be used in the citing and prosecution of violations of this *Order*.

Section 8.     **Appeal.** This *Order* may be appealed to the Third District Court in and for Summit County, Utah.

ORDERED and APPROVED, and published, this 23<sup>rd</sup> day of September, 2021.

**BY ORDER OF THE SUMMIT COUNTY MANAGER**



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Thomas C. Fisher  
Summit County Manager

**BY ORDER OF THE SUMMIT COUNTY HEALTH OFFICER**



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Philip Bondurant, Dr. PH, MPH  
County Health Officer

APPROVED AS TO FORM:

*David L. Thomas*

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David L. Thomas  
Chief Civil Deputy

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**IN AND FOR SUMMIT COUNTY, STATE OF UTAH**

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In the matter of:

COVID-19 Pandemic within Summit County  
(Omicron Variant)

**PUBLIC HEALTH ORDER  
(Order of Constraint)**

Order No.: 2022-01

Date: January 6, 2022

Legal Authority: Utah Code §26A-1-114  
Utah Code §26A-1-102

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After giving legal notice to the *Summit County Manager* (the “**County Manager**”), the *Summit County Health Officer* (the “**Health Officer**”) declared a *Local Public Health Emergency* related to the COVID-19 Pandemic on August 21, 2021, for a period of thirty (30) days (*Utah Code §26A-1-114(8)(a)*).

The *Summit County Council* (the “**Council**”) may extend a *Local Public Health Emergency* longer than thirty (30) days (*Utah Code §26A-1-114(8)(b)*).

On September 20, 2021, the *Council* extended the *Local Public Health Emergency* by Resolution No. 2021-13 until December 31, 2021 (*Utah Code §26A-1-114(8)(b)*).

On December 15, 2021, the *Council* extended the *Local Public Health Emergency* by Resolution No. 2021-23 until June 30, 2022 (*Utah Code §26A-1-114(8)(b)*).

In Utah, local health departments are vested under *Utah Code § 26A-1-114(1)(d)* with authority to establish measures as may be necessary to promote and protect public health and control the spread of disease.

COVID-19 is a contagion that spreads from person-to-person. The *Health Officer* and *County Manager* recognize the need for Summit County and the public to continue to work cooperatively and proactively to slow the spread of COVID-19 and to address the myriad challenges COVID-19 has created.

Various vaccines have been approved by the U.S. Food and Drug Administration (“**FDA**”) for use in the United States. “Research shows that COVID-19 vaccines used in the United States protect against severe disease, hospitalization, and death from some known variants of concern. . . [However,] they may not be as effective in preventing asymptomatic infection.” Effectiveness of vaccines in the transmission of COVID-19 vary from between 65% to 95%; thus demonstrating that breakthrough cases are expected. However, “all approved or authorized COVID-19 vaccines demonstrate high efficacy (≥89%) against COVID-19 severe enough to require hospitalization.”<sup>1</sup>

Summit County has an 85% vaccination rate among its citizens who are eligible to receive the vaccine. However, as of January 3, 2022, 52% of Summit County residents ages 5-11 remain unvaccinated.<sup>2</sup> Residents who have not been vaccinated are at 5 times greater risk of hospitalization from COVID-19 complications compared to those who are vaccinated.<sup>3</sup>

On November 26, 2021, the World Health Organization (“**WHO**”) declared the new COVID B.1.1.529 variant, named *Omicron*, a variant of concern due to mutations and preliminary evidence suggesting an increased risk of reinfection and spread across the world, including to the United States.<sup>4</sup>

*WHO* and the U.S. Centers for Disease Control and Prevention (“**CDC**”) have advised all individuals to take measures to reduce their risk of COVID-19, especially the *Delta* and *Omicron variants*, including proven public health and social measures such as wearing well-fitting masks, hand hygiene, physical distancing, improving ventilation of indoor spaces, avoiding crowded spaces, getting vaccinated, and receiving a booster shot.<sup>5</sup>

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<sup>1</sup> U.S. Centers for Disease Control and Prevention, “COVID-19” [Monitoring COVID-19 Vaccine Effectiveness](https://www.cdc.gov/coronavirus/2019-ncov/vaccines/effectiveness/how-they-work.html) <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/effectiveness/how-they-work.html> (December 23, 2021). See also Morbidity and Mortality Weekly Report - MMWR COVID-19 Vaccine Effectiveness and Safety Reports [https://www.cdc.gov/mmwr/covid19\\_vaccine\\_safety.html](https://www.cdc.gov/mmwr/covid19_vaccine_safety.html); CDC, Science Brief: COVID-19 Vaccines and Vaccination <https://www.cdc.gov/coronavirus/2019-ncov/science/science-briefs/fully-vaccinated-people.html> (September 15, 2021).

<sup>2</sup> Summit County COVID-19 Dashboard, Summit County Health Department <https://summitcountyhealth.org/dashboard/>

<sup>3</sup> Id.

<sup>4</sup> World Health Organization, “Classification of Omicron (B.1.1.529): SARS-CoV-2 Variant of Concern” [https://www.who.int/news/item/26-11-2021-classification-of-omicron-\(b.1.1.529\)-sars-cov-2-variant-of-concern](https://www.who.int/news/item/26-11-2021-classification-of-omicron-(b.1.1.529)-sars-cov-2-variant-of-concern) (November 26, 2021).

<sup>5</sup> CDC, “Omicron Variant: What You Need to Know” <https://www.cdc.gov/coronavirus/2019-ncov/variants/omicron-variant.html> (December 20, 2021).

The *Health Officer* and *County Manager* find that COVID-19 poses a continuing, increasing, and immediate threat to the public health of Summit County residents and visitors. The *Omicron variant* of the COVID-19 virus is the dominant strain actively circulating in Summit County and is more contagious than the original virus and other variants. According to Dr. Roby Bhattacharyya, an infectious disease expert at Massachusetts General Hospital, *Omicron* is more infectious than measles, which has historically been one of the most infectious diseases known. Added Epidemiologist William Hanage, co-director of the Center for Communicable Disease Dynamics at Harvard University, “*Omicron* is certainly the most rapidly spreading virus among the ones we have been able to investigate at this level of detail.” He continues, “Many *Omicron* infections, especially in vaccinated people, will be mild, comparable to a short cold. The problem is that there will be serious cases and because it is so infectious, the total number that will need medical attention will put a strain on the health system.”<sup>6</sup>

COVID-19 infection is transmitted predominately by inhalation of respiratory droplets and studies show that masks and face coverings block the release of respiratory droplets into the environment and can also reduce the wearer’s exposure to droplets from others because COVID-19 viral particles spread between people more readily indoors and when people are closer together for longer periods of time indoors.<sup>7</sup>

According to the most recent guidance from the CDC, “[a]t least ten studies have confirmed the benefit of universal masking in community level analyses: in a unified hospital system, a German city, two U.S. states [Arizona and Kansas], a panel of 15 U.S. states and Washington, D.C., as well as both Canada and the U.S. nationally. Each analysis demonstrated that, following directives from organizational and political leadership for universal masking, new infections fell significantly. Two of these studies and an additional analysis of data from 200 counties that included the U.S. also demonstrated reductions in mortality. Another 10-site study showed reductions in hospitalization growth rates following mask mandate implementation. A separate series of cross-sectional surveys in the U.S. suggested that a 10% increase in self-reported mask wearing tripled the likelihood of stopping community transmission. An economic analysis using U.S. data found that, given these effects, increasing universal masking by 15% could prevent the

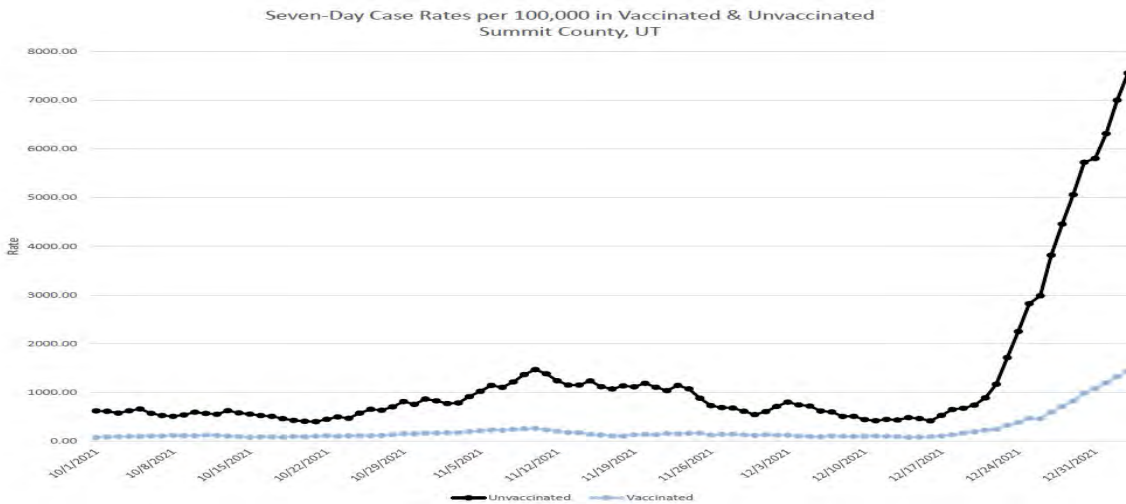
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<sup>6</sup> Manuel Ansedé, *El Pais* “Omicron: ‘The fastest-spreading virus in history’” <https://english.elpais.com/usa/2022-01-03/omicron-the-fastest-spreading-virus-in-history.html> (January 3, 2022). See also Lisa Schnirring, *Center for Infectious Disease Research and Policy* “South African Omicron study finds drop in vaccine protection, fewer hospitalized” <https://www.cidrap.umn.edu/news-perspective/2021/12/south-africa-omicron-study-finds-drop-vaccine-protection-fewer-hospitalized> (December 14, 2021).

<sup>7</sup> CDC, Science Brief: Community Use of Masks to Control the Spread of SARS-CoV-2, <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/about-face-coverings.html> (December 6, 2021).

need for lockdowns and reduce associated losses of up to \$1 trillion or about 5% of gross domestic product.”<sup>8</sup>

On December 23, 2021, Summit County experienced a record increase in the number of COVID-19 cases that surpassed previous case counts during any part of the COVID-19 pandemic response. On January 4, 2022, Summit County experienced the highest single daily COVID-19 case count (216) since the start of the pandemic.<sup>9</sup>

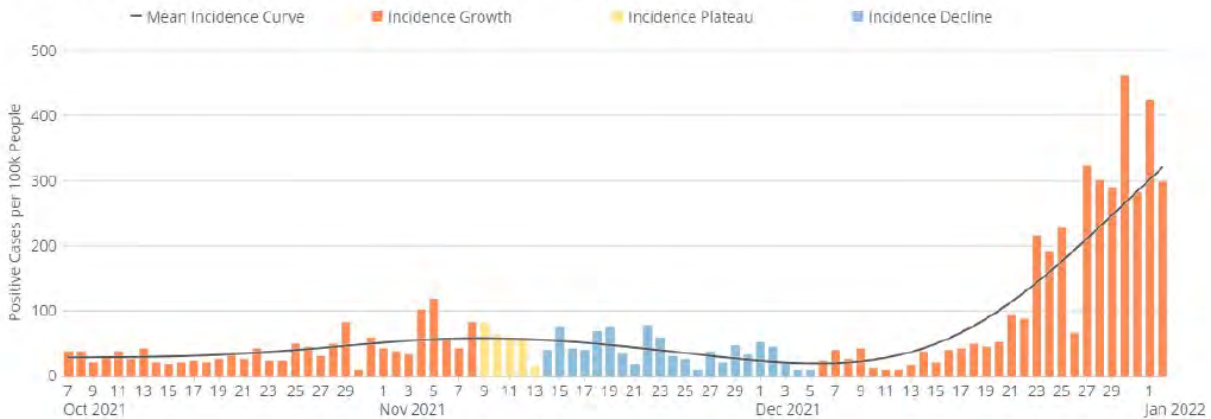


<sup>8</sup> Id. See also Wang X, Ferro EG, Zhou G, Hashimoto D, Bhatt DL. Association between universal masking in a health care system and SARS-CoV-2 positivity among health care workers. *JAMA*. 2020;324(7):703–704; Mitze T, Kosfeld R, Rode J, Wälde K. Face masks considerably reduce COVID-19 cases in Germany. *Proc Natl Acad Sci U S A*. 2020;117(51):32293–32301; Gallaway MS, Rigler J, Robinson S, et al. Trends in COVID-19 incidence after implementation of mitigation measures – Arizona, January 22–August 7, 2020. *MMWR Morb Mortal Wkly Rep*. 2020;69(40):1460–1463; Van Dyke ME, Rogers TM, Pevzner E, et al. Trends in county-level COVID-19 incidence in counties with and without a mask mandate – Kansas, June 1–August 23, 2020. *MMWR Morb Mortal Wkly Rep*. 2020;69(47):1777–1781; Lyu W, Wehby GL. Community use of face masks and COVID-19: evidence from a natural experiment of state mandates in the US. *Health Aff (Millwood)*. 2020;39(8):1419–1425; Hatzius J, Struyven D, Rosenberg I. Face masks and GDP. Updated June 29, 2020. Accessed July 8, 2020. <https://www.goldmansachs.com/insights/pages/face-masks-and-gdp.html>; Karaivanov A, Lu SE, Shigeoka H, Chen C, Pamplona S. Face masks, public policies and slowing the spread of COVID-19: evidence from Canada. *J Health Econ*. 2021;78:102475; Joo H, Miller GF, Sunshine G, et al. Decline in COVID-19 hospitalization growth rates associated with statewide mask mandates – 10 states, March–October 2020. *MMWR Morb Mortal Wkly Rep*. 2021;70(6):212–216; Chernozhukov V, Kasahara H, Schrimpf P. Causal impact of masks, policies, behavior on early COVID-19 pandemic in the U.S. *J Econom*. 2021;220(1):23–62; Guy GP Jr, Lee FC, Sunshine G, et al. Association of state-issued mask mandates and allowing on-premises restaurant dining with county-level COVID-19 case and death growth rates – United States, March 1–December 31, 2020. *MMWR Morb Mortal Wkly Rep*. 2021;70(10):350–354; Rader B, White LF, Burns MR, et al. Mask-wearing and control of SARS-CoV-2 transmission in the USA: a cross-sectional study. *The Lancet Digital Health*. 2021;3(3):e148–e157.

<sup>9</sup> Summit County COVID-19 Dashboard, Summit County Health Department <https://summitcountyhealth.org/dashboard/>



## Summit County Positive Cases per 100k People - Detailed



According to the Utah Department of Health, as of January 4, 2022, 86.4% of all ICU beds within the State of Utah were occupied. “When 85% capacity is reached, Utah will be functionally out of staffed ICU beds, indicating an overwhelmed hospital system.”<sup>10</sup>

Summit County continues to see an unprecedented demand for testing, which places additional strain on County resources.

Increased COVID-19 transmissions are expected for the next 30 to 45 days with the *Omicron variant*, risking stable continuation of essential services for all living in or visiting Summit County, and straining the local economy during a critical economic time of the year.

*Orders of Constraint* can only be issued during a declared *Local Public Health Emergency* (*Utah Code §26A-1-102(9)(a)*). A *Face-Covering* (defined below) mandate is a form of an *Order of Constraint* (*Utah Code §26A-1-102(9)*).

During a declared *Local Public Health Emergency*, the *Health Officer* and the *County Manager* can jointly issue an *Order of Constraint* (*Utah Code §26A-1-114(9)(a)*).

The *Council* can terminate an *Order of Constraint* at any time (*Utah Code §26A-1-114(9)(a)*).

Based on the foregoing, the *Health Officer* and *County Manager* conclude that requiring all individuals living within or visiting Summit County to wear *Face-Coverings* will help mitigate further widespread transmission of COVID-19 in Summit County.

<sup>10</sup> Utah Department of Health, COVID-19 Data Dashboard <https://coronavirus.utah.gov/case-counts/>

**THEREFORE, PURSUANT TO UTAH CODE §26A-1-114, BE IT HEREBY ORDERED BY PHILIP BONDURANT, Dr. PH, MPH, SUMMIT COUNTY HEALTH OFFICER, AND THOMAS C. FISHER, SUMMIT COUNTY MANAGER, AS FOLLOWS:**

Section 1.     **Purpose.** The intent of this *Order of Constraint* (the “**Order**”) is to require all individuals living within or visiting Summit County, Utah, to wear *Face-Coverings* while inside publicly accessed indoor establishments. All provisions of this *Order* shall be interpreted to effectuate this intent.

Section 2.     **Definitions.**

- 2.1     “*Face-Covering*” is a physical barrier that:
- i. covers the nose and mouth without openings that can be seen through;
  - ii. is made of synthetic or natural fabrics;
  - iii. secures under the chin;
  - iv. fits snugly against the nose and sides of the face; and
  - v. does not have an exhalation valve or vent.

Section 3.     **Proper Use of *Face-Coverings*.**

- 3.1     Individuals shall wear a *Face-Covering* that covers the nose and the mouth, and rests snugly above the nose, below the mouth, and on the sides of the face. Higher quality masks, such as KN95s or KF94s, can offer an additional layer of protection.
- 3.2     Because children between the ages of three (3) and twelve (12) years can have challenges wearing a *Face-Covering* properly (e.g., excessively touching the *Face-Covering*, not changing the *Face-Covering* if visibly soiled, risk of strangulation or suffocation, etc.), they are to be worn with the assistance and close supervision of an adult. *Face-Coverings* are never to be worn by children when sleeping.

Section 4.     **Face-Coverings Mandatory.** All individuals currently living within or visiting Summit County, Utah, regardless of COVID-19 vaccination status or past COVID-19 infection, shall wear a *Face-Covering* in the following circumstances:

- 4.1     Inside of, or in line to enter, any indoor space, which is open to members of the public, including without limitation, grocery stores, restaurants, hotels, building lobbies, offices, retail stores, school classrooms, and other common or shared

spaces where individuals may interact, such as restrooms, hallways, elevators, and meeting rooms;

- 4.2 Obtaining services from the healthcare industry in settings, including without limitation, a hospital, pharmacy, medical clinic, laboratory, physician or dental office, veterinary clinic, or blood bank, unless otherwise directed by a healthcare provider;
- 4.3 Employees, staff, or volunteers engaging in work, whether inside at the workplace or performing work off-site, when:
  - 4.3.1 Interacting in-person with any member of the public;
  - 4.3.2 Working in any space visited by members of the public, regardless of whether anyone from the public is present at the time; and
  - 4.3.3 Working in any space where food is prepared or packaged for sale or distribution.

**Section 5. Exemptions.**

- 5.1 Notwithstanding any other provision of this *Order*, an individual required to wear a *Face-Covering* may remove such in the following situations:
  - 5.1.1 while outdoors;
  - 5.1.2 while sleeping;
  - 5.1.3 while actively eating or drinking, provided the individual remains in place while eating or drinking;
  - 5.1.4 while alone or only with other members of the same household in a room, cubicle, school-provided transportation, or similar enclosure;
  - 5.1.5 while obtaining or providing a service involving the nose or face for which temporary removal of the *Face-Covering* is necessary to perform the service;
  - 5.1.6 while actively performing as an athlete;
  - 5.1.7 while giving an educational, artistic, cultural, musical, or theatrical presentation or performance at a school for an audience or at a religious gathering;

- 5.1.8 while exercising or engaging in athletic training while indoors and maintaining at least six feet of physical distance from any other individual;
  - 5.1.9 while purchasing a product or receiving a service that requires identification where the individual may briefly remove a *Face-Covering* , as necessary, so that the retailer or service provider can verify identity;
  - 5.1.10 while a student is napping;
  - 5.1.11 while swimming or on duty as a lifeguard; and
  - 5.1.12 while giving religious instruction.
- 5.2 Notwithstanding any other provision of this *Order*, the following individuals are exempt from the *Face-Covering* requirements:
- 5.2.1 Individuals age two (2) years or under.
  - 5.2.2 Individuals with a medical condition, mental health condition, or disability that prevents wearing a *Face-Covering*.
  - 5.2.3 Individuals who are hearing impaired, or communicating with an individual who is hearing impaired, where the ability to see the mouth is essential for communication.
  - 5.2.4 Individuals for whom wearing a *Face-Covering* would create a risk to the individual related to their work, as determined by local, state or federal regulators or workplace safety guidelines.
  - 5.2.5 Individuals who are seated at a restaurant or other establishment that offers food or beverage service, while they are eating or drinking.
  - 5.2.6 Individuals engaging in work where they are alone in an indoor establishment or facility.
  - 5.2.7 Individuals who are unconscious, incapacitated, or otherwise unable to remove the *Face-Covering* without assistance.
  - 5.2.8 Individuals who have *Individualized Education Programs* (“**IEP**”) under the Individuals with Disabilities Education Act, 20 U.S.C. § 1414, or an accommodation under Section 504 of the Rehabilitation Act of 1973, 29 U.S.C. § 794, that would necessitate exempting the individual from wearing a *Face-Covering*.

Section 6.     **Posting.** All businesses open to the public where *Face-Coverings* are required hereunder, shall post a notice in form and substance promulgated by the Summit County Health Department, in a clearly visible location at or near the entrance to such place of business, that declares that *Face-Coverings* are to be worn by order of the Summit County Health Officer and County Manager.

Section 7.     **Effective Date; Duration.** This *Order* shall become effective on January 7, 2022 at 12:01 a.m., and will continue to be in effect until 5 p.m. on February 21, 2022, or until it is extended, rescinded, superseded or amended in writing.


Section 8.     **Publication.** This *Order* shall be on file for public inspection with the Summit County Clerk and the Summit County Health Department.

Section 9.     **Enforcement.** The Summit County Sheriff and Chiefs of Police within Summit County are directed to ensure compliance with and enforce this *Order*. Violations of this *Order* shall be punished as an infraction. Notwithstanding such, the purpose of this *Order* is to protect individuals' health and not to hold them criminally liable. Discretion will be used in the citing and prosecution of violations of this *Order*.


Section 10.    **Appeal.** This *Order* may be appealed to the Third District Court in and for Summit County, Utah.

ORDERED and APPROVED, and published, this 6<sup>th</sup> day of January, 2022.

**BY ORDER OF THE SUMMIT COUNTY MANAGER**

  
\_\_\_\_\_  
Thomas C. Fisher  
Summit County Manager

**BY ORDER OF THE SUMMIT COUNTY HEALTH OFFICER**

  
\_\_\_\_\_  
Philip Bondurant, Dr. PH, MPH  
County Health Officer

APPROVED AS TO FORM:

*David L. Thomas*

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David L. Thomas  
Chief Civil Deputy



**DECLARATION TO TERMINATE LOCAL PUBLIC HEALTH  
EMERGENCY**

**PUBLIC HEALTH ORDER**

**Summit County, Utah**

**WHEREAS**, Summit County Code of Health §1-1-10(B) provides that the Summit County Health Officer may declare or terminate a public health emergency; and,

**WHEREAS**, on March 12, 2020, the Summit County Health Officer declared a local public health emergency with respect to the COVID-19 pandemic (the “Local Public Health Emergency”); and,

**WHEREAS**, on March 31, 2022, Summit County was defined as a low transmission area for COVID-19 by the Centers for Disease Control; and,

**WHEREAS**, Summit County has a vaccination rate of 87% of eligible residents being fully vaccinated; and,

**WHEREAS**, various therapeutic treatments, monoclonal antibody therapies, antiviral prescriptions, vaccines, and booster shots are readily available from a variety of providers to combat the severe outcomes associated with a COVID-19 infection; and,

**WHEREAS**, on April 1, 2022, under the direction of Utah Governor Spencer Cox, the State of Utah has transitioned to a “steady state” approach for the COVID-19 pandemic; and,

**WHEREAS**, the Summit County Health Officer does hereby find that the COVID-19 virus no longer presents an imminent and proximate threat to public health in Summit County.

**THEREFORE, PURSUANT TO UCA §26A-1-114 AND SUMMIT COUNTY CODE OF HEALTH §1-1-10(b), BE IT DELCARED BY PHILIP C. BONDURANT, SUMMIT COUNTY HEALTH OFFICER, AS FOLLOWS:**

**Section 1. Declaration to terminate the Local Public Health Emergency.** It is hereby declared that the Local Public Health Emergency in Summit County, Utah, will be terminated by

authority of the Summit County Health Officer on April 1, 2022 at 11:59 pm MST (the “Health Emergency Termination”).

Section 2.     **Duration.** This Health Emergency Termination has no expiration date.

Section 3.     **Publication.** This Health Emergency Termination shall be on file for public inspection with the Summit County Health Department.

Section 4.     **Notice to Governor.** A copy of this Health Emergency Termination ending the Local Public Health Emergency shall be sent to the Office of the Governor of the State of Utah.

Effective Date: April 1, 2022 11:59pm MST

SUMMIT COUNTY HEALTH DEPARTMENT

*Philip C. Bondurant*

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Philip C. Bondurant, Dr.PH, MPH  
County Health Officer

Approved as to Form:

*David L. Thomas*

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David L. Thomas  
Chief Civil Deputy



# Summit County Health Department Issues Coronavirus Statement

Summit County, Utah (February 28, 2020)

There have been many rumors and speculations about Coronavirus circulating on global, national and local levels over the past few weeks. Coronavirus, or COVID-19, is a new and emerging public health concern that we are prepared to respond to locally if necessary. Although discussions about COVID-19 may be alarming, it is important to remember that, at this time, the seasonal flu is a greater public health concern in the United States. Good health practices such as washing hands frequently, covering coughs and staying home when you do not feel well are always recommended.

A recent statement by the Centers for Disease Control (CDC) predicts that COVID-19 will impact the United States, and the agency is encouraging Americans and local public health agencies to be ready. Through careful planning and past experiences, the Summit County Health Department is confident in our ability to meet this potential threat and enact response plans that provide support and care to our community. We will continue to monitor the situation closely and prepare to serve our community if or when the time comes. As the situation changes and develops, we encourage you to seek information only from trusted sources such as the CDC, the Utah Department of Health (UDOH), or the Summit County Health Department.

## **Summit County announces third and fourth COVID-19 cases**

Summit County, Utah (March 13, 2020) – The Summit County Health Department (SCHD) today announced the county's third and fourth COVID-19 cases.

Both patients are adult males younger than 60 and are out-of-state visitors. The two individuals did not travel to Summit County together. Both exhibited mild symptoms. For patient privacy reasons and in compliance with HIPAA law, no further information will be released regarding their demographics.

The Summit County Health Department is working to identify and contact anyone who may have been in close contact with the confirmed cases. These individuals will be monitored by public health professionals for symptoms related to COVID-19. Public health precautions have been implemented to protect the community based on Utah Department of Health (UDOH) and the Centers for Disease Control (CDC) recommendations.

In addition to the two cases announced today, Summit County's previous cases included one resident, an adult male younger than 60, and an out-of-state visitor, an adult male younger than 60. Both individuals are self-isolating at undisclosed locations and have mild symptoms.

Beginning the week of March 16, the Summit County Health Department will limit confirmed case announcements to weekly updates released every Tuesday before 12 p.m. MST. If or when community spread occurs, it will be announced separately as soon as it is confirmed.

The symptoms of COVID-19 are similar to what someone may be experiencing as the result of seasonal influenza – namely a fever, cough, or shortness of breath. These symptoms on their own are not worrisome and should not cause alarm. But if someone exhibits these symptoms who has recently traveled to areas with widespread COVID-19 illness or has been in close contact with a known positive case, that individual should immediately notify their health care provider, who will coordinate with the appropriate public health officials to determine next steps.

There is currently no vaccine or antiviral treatment available for coronavirus and it is flu and respiratory disease season. The Utah Department of Health recommends getting vaccinated for influenza, and taking everyday preventive actions to stop the spread of germs including regular hand washing, covering coughs and sneezes with a tissue or an elbow, and staying home when you're sick. All nonessential travel to areas affected by COVID-19 is also discouraged.

# New Case of COVID-19 in Summit County Signals Community Spread - UDOH

March 14, 2022

(Salt Lake City, UT) – The Utah Department of Health (UDOH) and the Summit County Health Department (SCHD) today announced a new case of COVID-19 that is the first instance of community spread of the disease in Utah.

Community spread means spread of an illness for which the source of infection is unknown. In the Summit County case, the patient had no history of travel and no known contact with any person who has been confirmed to have COVID-19.

“This is the first case of community transmission in Utah, and it reinforces the importance of all the community mitigation efforts we’ve been talking about for the past several weeks,” said Dr. Angela Dunn, state epidemiologist for the UDOH. “Everyone needs to continue to do their part: Stay home if you are sick, keep your kids home if they are sick, and practice good hygiene to avoid sharing your germs to others.”

The patient is a male Summit County resident, he is between the ages of 18 and 60, and is currently home recovering from his illness. The patient is an employee at the Spur Bar and Grill, and did report to work while he was symptomatic. Public health officials have interviewed the patient and believe the biggest potential risk is to his co-workers. The man’s job at the bar did not require him to interact for extended periods of time with customers.

“The patient’s employer has been extremely cooperative, and willingly closed last night to conduct a thorough cleaning of the establishment,” said Dr. Rich Bullough, executive director of the SCHD. “We have identified the case’s co-workers and are working to contact and interview all of them. While we don’t believe there is a high risk to patrons of the bar, if you have visited the Spur Bar and Grill since March 6 you should monitor yourself for symptoms such as fever, cough, and shortness of breath.”

The UDOH and the SCHD are working to identify other individuals who may have come into close contact with the patient while he was symptomatic. These individuals will be monitored by public health for fever and respiratory symptoms.

“Residents of Summit County should be assured that we are doing everything within our means to protect their health,” said Thomas C. Fisher, Summit County Manager. “On Thursday, Dr. Bullough and I signed local emergency declarations in anticipation of the very situation we have announced this morning. These declarations were not made lightly and will allow us to utilize emergency resources to combat the spread of COVID-19. Summit County, our municipalities and our other community partners are prepared and ready.”

Public health officials are still asking the public to avoid going to hospitals and clinics for COVID-19 testing if symptoms aren't present. Instead, use telehealth or call your healthcare provider to find out if testing is necessary so that hospitals, clinics, and ERs are not overloaded. Health care facilities report the high volume of visits from healthy people is affecting their ability to provide care for those truly in need.

The symptoms of COVID-19 are similar to what someone may be experiencing as the result of seasonal influenza – namely a fever, cough, or shortness of breath. These symptoms on their own are not worrisome and should not cause alarm. But if someone exhibits these symptoms who has recently traveled to areas with ongoing transmission of COVID-19 or has been in close contact with a known positive case, that individual should notify their health care provider by telephone, who will coordinate the appropriate next steps.

There is currently no vaccine or antiviral treatment available for coronavirus and it is flu and respiratory disease season.

# Summit County Health Director Issues Public Health Orders on Gatherings and Additional Business Industries

## *Direction given to construction sites, salons, daycares, physical therapy clinics and more*

Summit County, Utah (March 23, 2020) — Summit County Health Director, Dr. Rich Bullough, and Summit County Attorney, Margaret Olson, issued further Public Health Orders necessitated by the continuing and immediate threat to public health from the COVID-19 virus. Effective immediately, the Order addresses the following:

- Gatherings of more than 10 individuals are prohibited. (Does not apply to critical government services or other necessary services such as shelters, residential care providers, grocery stores, convenience stores, or families living in the same household.)
- Restrictions and limitations for commercial and residential building and construction work sites.
- Restrictions and limitations to hair, nail and tanning salons, physical therapy clinics and services.
- Protocols for dental clinical services.

“Every Health Order we enact is to protect public health in Summit County,” Bullough said. “We are in the fight against COVID-19 for the long haul. Each proactive step we take today saves weeks and months of reactive measures down the road. Our efforts will be magnified by the cooperation of our communities.”

The Public Health Order will be re-evaluated in 14 calendar days but does not currently expire until April 22, 2020. At that point, the Order could be ended, extended or modified. This Order adds to a previous mandate on restaurant services that went into effect on March 15.

Violations of the most recent Public Health Order are punishable as a Class B Misdemeanor in Summit County. Businesses, employees and members of the general public who have questions or concerns about compliance are encouraged to call the Summit County Community Concerns Line at 435-333-0050.

“This pandemic will not cure itself overnight, or over the course of a month,” said Summit County Council Chair, Doug Clyde. “We ask the public to aid us in our fight against the spread of COVID-19 by complying with these Health Orders to their fullest extent. These efforts require diligence and patience from every group in every community in Summit County. One person who thinks the rules don’t apply to them can endanger our vulnerable population and drastically set back our efforts with their irresponsible actions.”

*See File “4-Health-Order-2020-03-23” for full Order*

# Health Department Announces Multiple Eastern Summit County COVID-19 Cases

March 24, 2022

*Summit County, Utah* (March 24, 2020) — To underline the severity of the COVID-19 pandemic to all county residents, the Summit County Health Department confirms multiple positive cases of the virus in both the North and South Summit areas of the county.

“There is a misconception that COVID-19 is only in the greater Park City area and this simply isn’t the case,” Dr. Rich Bullough, Summit County Health Director, said. “For days, we have encouraged residents across the county to assume the same level of caution. Not only are all areas of the county at the same level of risk, but every resident should assume that they have already been exposed to COVID-19. Now is not the time to let down your guard.”

Summit County’s first positive case of COVID-19 was on March 11. The first positive case of community spread was announced on March 14. Community spread means spread of an illness for which the source of infection is unknown. In the Summit County case, the patient had no history of travel and no known contact with any person who has been confirmed to have COVID-19. In the two weeks since the number of cases has continued to rise and was at 73 as of March 23. Dr. Bullough does not expect the case number growth to slow anytime in the near future.

“Due to insufficient tests available nation-wide, it is safe to assume that we have several times that number of cases in Summit County,” Bullough said. “We are in this for the long haul.”

In an effort to slow the spread of COVID-19, Summit County Government and its Health Department have enacted a series of emergency declarations and public health orders limiting food service, prohibiting gatherings of more than ten and other preventive measures.

“This pandemic will not cure itself overnight, or over the course of a month,” said Summit County Council Chair, Doug Clyde. “We ask the public to aid us in our fight against the spread of COVID-19 by complying with these Health Orders to their fullest extent. These efforts require diligence and patience from every group in every community in Summit County. One person who thinks the rules don’t apply to them can endanger our vulnerable population and drastically set back our efforts with their irresponsible actions.”

# Summit County Issues Stay At Home Order to Residents

## *Summit County Issues Stay At Home Order to Residents*

Summit County, Utah (March 25, 2020) — The Summit County Council, County Manager, and Health Director, in collaboration with the Summit County Board of Health and Mayors of the Cities and Towns of Summit County issued an Order requiring all residents to stay at home and cease non-essential travel and operations until at least May 1. This Order goes into effect Friday, March 27 at 12:01 a.m. and applies to non-essential businesses, services, and visitors in addition to residents.

“This decision was not made lightly but is in the best interest of public health in Summit County,” Summit County Health Director, Dr. Rich Bullough, said. “When you look at the data, Summit County is a hotspot for COVID-19 statewide, nationally and globally. At this time, Summit County has 20-times the number of cases per capita as Salt Lake County. Our cases per capita rival those of the worst areas of New York City and many parts of Italy.”

As part of the Order, visitors in Summit County are asked to leave as safely and quickly as possible. Visitors planning future trips are asked not to visit Summit County for the duration of this Order. Secondary home-owners who are not currently residing in the county are also asked to avoid the county.

“The County Council asks all residents to comply with this order to the fullest,” Summit County Council Chair, Doug Clyde, said. “You are the front line in this fight against COVID-19. We expect our hospitals to reach capacity and need the cooperation of every resident to ensure we do not overwhelm our local healthcare system. The actions of individuals will determine the course of this virus in our community.”

Under the order, county residents will be able to visit grocery stores, convenience stores and pharmacies for essential items such as food and medication. Residents may also attend necessary or urgent medical appointments. Residents are not barred from going outside but must practice social-distancing when visiting trails or other outdoor recreation areas. If social-distancing is not possible in these areas, they should be avoided.

Essential services that will still be allowed to operate include the following:

- Essential healthcare facilities
- Banks
- Hardware stores
- Plumbers, electricians, auto repair and other essential utilities and services.
- Farming
- Post offices
- Grocery and convenience stores
- Restaurants whose services are allowed under existing Health Orders

- Essential transportation services

“Our county government is working to support essential services and the COVID-19 response in our community while complying with these Orders,” County Manager, Tom Fisher, said. “These Orders are a necessary step to protect our population now and in the future.”

This Order is enacted until May 1 but will be reviewed after 14 days. At that point, the Order could be ended, extended or modified. This Order adds to previous mandates that went into effect on March 15 and March 23. Violations are punishable as a Class B Misdemeanor in Summit County. Businesses, employees and members of the general public who have questions or concerns about compliance are encouraged to call the Summit County Community Concerns Line at 435-333-0050.

*See file “5-Health-Order-2020-03-25” for full Order*



# Summit County Aligns Expiration Dates of Existing Health Orders, Extends Declaration of Public Health Emergency Order

Summit County, Utah (April 7, 2020) — Last night in public meeting, the Summit County Board of Health supported aligning the expiration date of all three existing Health Orders related to COVID-19 with the expiration date of May 1, which was established in the Joint Public Health Order 2020-03 (the “Stay-at-Home Order”). The Public Health Emergency Order signed on March 12 was also extended to May 1. Aside from the expiration date, no changes were made to any Order.

“This decision was made to eliminate confusion and provide a consistent, congruent expiration date for these Orders,” Summit County Health Director Dr. Rich Bullough said. “We are doing all we can in coordination with our healthcare system to aggressively fight COVID-19 in Summit County and we are making progress. We will continue to look at when and how we can resume regular business operations and day-to-day life as the outlook allows. If we do this too soon, however, we’ll be right back where we started.”

Prior to this alignment, Orders 2020-1 and 2020-2 were to expire on April 14 and April 22, respectively. The Public Health Emergency Order was previously in effect until April 11. The following is a summary of each order. The full orders can be viewed under the “Declarations and Orders” section at <https://summitcountyhealth.org/coronavirus>.

- 2020-1: Order prohibiting dine-in food service and the closure of resorts, restaurants, taverns, bars, entertainment venues, fitness and exercise facilities, spas, churches, and other businesses in which people tend to gather.
- 2020-2: Order prohibiting gatherings of more than 10 people, restrictions and limitations for commercial and residential building and construction work sites, restrictions and limitations to hair, nail and tanning salons, physical therapy clinics and services.
- 2020-3: Stay At Home Order requiring all businesses and residents to stay at home and cease non-essential travel and operations, prohibiting visitor travel to Summit County.

All three Public Health Orders will be reviewed prior to May 1. At that point, the Orders could be extended or modified. Businesses, employees and members of the general public who have questions or concerns about compliance are encouraged to call the Summit County Community Concerns Line at 435-333-0050.

*See file “7-Emergency-Extension-2020-04-07” for full Order*

# Summit County Health Department Announces In-House Delivery for Restaurants

**Summit County, Utah** (April 21, 2020) — Starting today, all permitted restaurants in Summit County can begin offering in-house delivery service. This announcement is the result of an appeal to Public Health Order 2020-01 that prohibited restaurants from initiating a new delivery service during the early stages of the COVID-19 pandemic. The health department has agreed to a series of safe and practical guidelines for permitted restaurants in Summit County to deliver food to the doorsteps of individuals throughout the County, including those who are unable to leave their place of residence due to health, transportation or other limitations.

“It has always been our goal to restore service as soon as it was safely possible to do so,” Summit County Health Deputy Director, Dr. Phil Bondurant said. “We anticipate this announcement to be the first of several in the coming weeks that will open additional operations in the county. It is vital that the community continues to practice social distancing and other measures to allow for these openings to stand.”

With this announcement, trained and certified restaurant staff are expected to adhere to the Summit County Health Code’s delivery protocols and standards while complying with the social distancing orders outlined in Joint Public Health Order 2020-03. At this time, all third-party delivery services for food items remain prohibited within Summit County. The Summit County, Environmental Health Division will provide registration information and operating guidelines to all permitted restaurants in Summit County starting today. Restaurant owners and managers who wish to register or have questions can contact the Environmental Health Division at 435-333-1502.

# Summit County Releases Stabilization Phase Business Contacts, FAQ

Summit County, Utah (April 24, 2020) — As part of Summit County's Stabilization Phase response to the COVID-19 pandemic, Summit County's Stabilization Work Group recently completed a review of nominations and applications for various business sector representatives. These representatives will collaborate with the Health Department to further refine industry and business-specific protocols, building on work already compiled at the State, regional and local levels, which will be due by April 27.

Before the April 27 deadline, individuals who own or manage businesses in Summit County can participate by viewing the roster of Business Sector Representatives and Staff Liaisons and reach out to the appointed contacts within their industry with questions, concerns, or input regarding business protocol and modified business operation due to COVID-19. This roster can be viewed or downloaded as a PDF at <https://www.summitcounty.org/1155/11562/Stabilization-Phase-Planning>.

Business owners, employees, and members of the public are encouraged to view the county's FAQ document regarding the Stabilization Phase, available at <https://www.summitcounty.org/1155/11562/Stabilization-Phase-Planning>. The Summit County Concerns Line (435-333-0050) is operated by trained staff who are also able to answer questions and receive public feedback in both English and Spanish. This line is open Monday-Friday, 9 am – 5 pm.

# Summit County Issues New Joint Public Health Order, Lifts Stay At Home Order

**Summit County, Utah** (April 30, 2020) — Effective at 12:01 a.m. Friday, May 1, Summit County officials will lift the current Stay At Home Order and the new Joint Public Health Order, 2020-05 (the Order), will go into effect. This new Order transitions Summit County to the Stabilization Phase of the COVID-19 response and lowers the current risk level in the county to Moderate.

“Due to the support and cooperation of our communities and the hard work of our healthcare services, we are ready to move to the next phase of our fight against COVID-19,” Summit County Health Director Dr. Rich Bullough said. “The public’s sacrifices made all the difference in flattening the curve, allowing us to lift the Stay At Home Order. As surges of the virus occur in surrounding areas, we continue to stress the importance of personal protection and continue to discourage unnecessary travel from outside the area.”

Summit County’s Joint Public Health Order 2020-05 provides business-specific protocols for 32 different local business sectors developed in partnership with business and public representatives, municipalities, and county leadership through an extensive outreach effort. The Order, an expanded and refined version of Governor Gary Herbert’s Utah Leads Together Plan, was approved by Governor Gary Herbert and the Utah Coronavirus Task Force, details the gradual re-opening of business and commerce while preventing the spread of COVID-19 through social distancing and sanitization protocols, and restrictions on specific business activities. It is recommended that all residents wear a non-surgical mask or face covering that completely covers the nose and mouth whenever possible in public settings where other social distancing measures are difficult to maintain.

“This Order represents an exceptional effort by community members in coordination with staff of the municipalities and the county,” Summit County Council Chair Doug Clyde, said. “While the virus will remain with us for the foreseeable future, we can now take a step forward by cautiously reopening businesses. However, if we are to be successful in this effort, we will need the continued and full cooperation of the citizens of the County and the public that visits our businesses, in order to succeed.”

In the Order, public and private gatherings are limited to no more than 20 people, with certain exemptions for emergency response, grocery stores, gas stations and other essential industries. All hot tubs, spas, saunas, steam rooms, locker rooms, bike share, dog parks, and leisure swimming pools will remain closed to members, guests, patrons, and the general public.

“It has always been the goal of our response to lift the Stay At Home Order as soon as it was safe to do so,” County Manager Tom Fisher said. “We look forward to businesses getting back to work under the new protocols outlined in this health order. Summit County is committed to supporting our communities through this transition.”

This Order is in effect until July 1 but will be reviewed in 14 days. At that point, the Order could be ended, extended, or modified. The Health Department will continue to monitor the County’s

epidemiological data very closely throughout this new phase of the COVID-19 emergency. Should the data indicate new transmission of the COVID-19 virus or that the spread of the virus in Summit County has substantially increased, the County may be required to reinstate the Stay-at-Home Order.

Businesses, employees and members of the general public who have questions or concerns about compliance with the new Order are encouraged to call the Summit County Community Concerns Line at 435-333-0050. In addition to regular business hours (Monday-Friday, 9 a.m. – 5 p.m.), this line will be staffed from 9 a.m. – 3 p.m. on Saturday, May 2, and Sunday, May 3.

*See File “9-Health-Order-2020-04-30” for full Order*

# Summit County Health Department Announces Business Stabilization Protocols

**Summit County, Utah** (5/1/20) — As Summit County enters the Moderate Risk (orange) level of the COVID-19 response, businesses are required to adopt the Social Distancing Protocol, the Mandatory Business Practices, and each industry's Business Specific Protocols outlined in Joint Public Health Order 2020-05.

All businesses intending to operate at this time are required to register with the Health Department. Once a business receives notification that the Health Department has approved their registration, you may begin to operate. As part of this notification, businesses will receive a certification from the Health Department and will be required to display that certification where it is easily visible to the public and health inspectors.

Salons, food establishments, bars, and nightclubs will receive an inspection to ensure that they have implemented the Social Distancing Protocol, Mandatory Business Practices, and Industry Specific Protocol properly. Child care facilities, accommodations and lodging, gyms, resorts, retail trades, and waste management operations may receive an inspection resulting from complaints of non-compliance. Businesses may operate prior to this inspection.

# Summit County to Remain in Moderate/Orange Phase

**Summit County, Utah** (May 14, 2020) — On Thursday, May 14, Summit County Council adopted Joint Public Health Order 2020-06, leaving Summit County at the Moderate or “Orange” Risk Level as other parts of Utah move to the “Yellow” Risk Level. This Order will be reviewed in one week by the Governor’s Office.

“The data we have seen over the past two weeks is encouraging,” Summit County Deputy Health Director Dr. Phil Bondurant said. “Our strategy for remaining at the Moderate Risk Level is to fully understand the results of lifting the Stay At Home Order and gather information that will guide our response as we move into the summer months. We are actively working with other Moderate Risk Level areas such as Wasatch County and Salt Lake City to understand the transmission of COVID-19 among our shared workforces.”

Joint Public Health Order 2020-06 simplifies Order 2020-05, reducing the document to 16 pages from 54. It is aligned with the Governor’s Moderate Risk Level Order, aside from 4 areas deemed to be at increased risk in Summit County: Indoor Recreation, Arts & Entertainment, Lodging and Restaurants.

“Our collaboration with the Governor’s Office to remain at the Moderate Risk Level provides critical time to truly evaluate the impact of moving from High to Moderate Risk,” Summit County Council Chair Doug Clyde said. “We are a global tourism destination and our workforce is closely linked to Salt Lake City and Wasatch County. These unique factors call for a different response than many other areas of the state. We have made tremendous progress against COVID-19 due to the actions of our residents and the response of our local healthcare system. Our goal is to preserve that progress as we move forward.”

Factors influencing this decision include:

- Providing critical time to truly evaluate the impacts of moving from High Risk to Moderate Risk.
- Wasatch County and Salt Lake City, two areas where Summit County residents and workforce commute to and from, also remain at the Moderate Risk Level.
- Travelers and tourists visiting Summit County continue to be a potential transmission risk.
- Summit County has the second-highest positive rate per 100K population in Utah and an  $R_0^*$  (r-naught) below 1 that appears to be increasing.

*\* $R_0$  is a metric that defines how contagious a virus is.  $R_0$  predicts the average number of individuals who will catch COVID-19 from one infected person. For example, if the  $R_0$  was 2, then one person with COVID-19 would likely spread the virus to two individuals.*

In the Order, public and private gatherings remain limited to no more than 20 people, with certain exemptions for emergency response, grocery stores, gas stations and other essential

industries. All hot tubs, spas, saunas, steam rooms, locker rooms, bike share, dog parks, and leisure swimming pools will remain closed to members, guests, patrons, and the general public.

Businesses, employees and members of the general public who have questions or concerns about the current Order are encouraged to call the Summit County Community Concerns Line (staffed Monday-Friday, 9 a.m. – 5 p.m.) at 435-333-0050.

*See file "10-Health-Order-2020-05-14" for full Order*



# PPE Resources for Local Businesses

(May 14, 2020)

## Summit County PPE Distribution for Businesses

If you are a medical provider, please contact [eoc@summitcounty.org](mailto:eoc@summitcounty.org) for PPE.

### Phase 1 Continued: Alpine Distilling Hand Sanitizer

Friday, May 8, 2020; 1:00 to 5:00 p.m. Miners Hospital – 1354 Park Avenue, Park City

- Sanitizer comes in a 1 gallon increment. For smaller amounts, bring your own container.
- Cost is \$.28/oz. (\$35.84/gallon). Payment will not be taken on site. Businesses will be invoiced.
- As a courtesy to other businesses, do not request more than a one-month supply.

## PPE Resources from the State

The state maintains a spreadsheet that lists Utah vendors for personal protective equipment (PPE) like masks, sanitizer and disinfectant. If you're a Utah organization in need of PPE for your workforce or on-site visitors, we encourage you to reach out to other Utah companies that can provide those products. View the spreadsheet [here](#).

If you're a Utah company that has made or can make PPE, please submit your information [here](#).

If you have PPE to donate to help support Utah small businesses, please submit your information [here](#).

## PPE Push Pack

If you're a Utah small business with fewer than 50 employees, you may be eligible for a PPE Push Pack. The state is providing free startup PPE to help small businesses get back to work in May. PPE Push Packs may include protective face masks, hand sanitizer, gloves and other items. The Summit County Emergency Operations Center will receive the PPE Push Packs and provide additional information on distribution at the time of arrival. Contents may vary depending on state inventory. Please register below to sign up for a PPE Push Pack.

**This form will be active until Monday, May 11, at 12:00 am MST.**

# Summit County to move to Yellow Risk Level of COVID-19 response

**Summit County, Utah** (May 21, 2020) — On Thursday, May 21, Summit County Council adopted Joint Public Health Order 2020-07, to move Summit County to a Yellow Risk Level as part of the ongoing COVID-19 response. This Order is effective at 12:01 am on Friday, May 22.

“The data show that the actions of our residents and businesses in March and April paid off,” Summit County Health Director Dr. Rich Bullough said. “These results are positive but not permanent. Until the time effective vaccinations for COVID-19 are widely available, only responsible personal behaviors will help keep this disease in check.”

Joint Public Health Order 2020-07 fully aligns with the Governor’s Phased Guidelines from the Utah Leads Together 4.4 plan. At the Yellow Risk Level, private social gatherings are limited to no more than 50 people. Public showers, steam rooms, dry saunas, hot tubs, locker rooms, facials in spas/salons and high school and club sports are also allowed. With the exception of mass gatherings (more than 999 people) and large-scale special events, all businesses may choose to open and operate at the Yellow Risk Level while following the guidelines outlined for businesses and employees.

“Until today, we have remained in Orange, along with our neighbors, Wasatch County and Salt Lake City, due to our high per capita infection rate,” Summit County Council Chair Doug Clyde said. “Over the last week our infection rate has continued to decline which has justified our move to Yellow. It must be emphasized that the only reason we have made this enormous progress is due to the high level of compliance by our residents, which everyone should be extremely proud of. Going forward, we are completely reliant on this continued vigilance by our residents, visitors and businesses to keep our economy open.”

Businesses, employees and members of the general public who have questions or concerns about the current Order are encouraged to call the Summit County Community Concerns Line (staffed Monday-Friday, 9 a.m. – 5 p.m.) at 435-333-0050.

*See file “11-Health-Order-2020-05-21” for full Order*

# Summit County requires masks in community gatherings and publicly accessed indoor spaces

Summit County, Utah (June 26, 2020) — On Friday, June 26, Summit County Council adopted Joint Public Health Order 2020-08, requiring “all individuals currently living within or visiting Summit County, Utah, to wear a face covering that completely covers the nose and mouth” under certain conditions. This exemption was approved by Governor Gary Herbert based on a request sent by Summit County Council Chair, Doug Clyde, Summit County Manager, Tom Fisher, and Summit County Health Director, Dr. Rich Bullough. This Order will go into effect at 12:01 am on Saturday, June 27, 2020.

In the letter requesting an exemption, Summit County leadership stated the following reasons for the mask ordinance:

“While the COVID-19 data in Summit County have been favorable as recently as three weeks ago, our more recent trends are of great concern and strongly suggest we are heading the wrong direction since moving to Yellow. Our Proxy Transmission Rate is at 2.5, and has been above the State goal of 1.5 continuously since June 10. The proportion of our positive cases related to travel has steadily increased from 0% on Memorial Day to 13% today. We have had nine (9) consecutive days of increased new (incidence) cases, based on the CDC 3-day average methodology. Additionally, we have experienced an increase in Positivity Test Rates from 2.5% on June 12 to 4% on June 21, exceeding the state target of 3%.”

Joint Public Health Order 2020-08 requires mandatory face coverings in any indoor spaces that allow the general public as well as any community gathering locations, indoors or outdoors. Employees will be required to wear a mask indoors and outdoors when interacting with the public, with the exception being in employee-only areas or employees working on assembly lines.

Other exemptions include:

- Individuals age two years or under.
- Individuals with a medical condition, mental health condition, or disability that prevents wearing a face covering.
- Individuals who are hearing impaired, or communicating with an individual who is hearing impaired, where the ability to see the mouth is essential for communication.
- Individuals for whom wearing a face covering would create a risk to the individual related to their work, as determined by local, state or federal regulators or workplace safety
- Individuals who are obtaining a service involving the nose or face for which temporary removal of the face covering is necessary to perform the

- Individuals who are seated at a restaurant or other establishment that offers food or beverage service, while they are eating or
- Individuals who are purchasing a product or receiving a service that requires identification may briefly remove a face covering, as necessary, so that the retailer or service provider can verify

Numerous “face coverings” qualify under the Order, included cloth masks, disposable masks, bandannas and neck gaiters. Violations of the Order are punishable as an infraction; however the purpose of the Order is to protect individuals’ health and not to hold them criminally liable. Discretion will be used in the citing and prosecution of violations of the Order. Educating and supplying a mask to those in violation will be a priority of law enforcement.

“While these data may not be as dire at this moment as some surrounding jurisdictions, all the trends are unfavorable,” said Summit County leadership in the letter. “Summit County is a location to which people travel for work and recreation, often from areas experiencing rapid disease spread. Based on our current adverse data trends, and the surging cases in surrounding counties, we strongly believe our primary hope in averting a future business shutdown is through this proposed mandatory mask measure.”

Businesses, employees and members of the general public who have questions or concerns about the current Order are encouraged to call the Summit County Community Concerns Line (staffed Monday-Friday, 9 a.m. – 5 p.m.) at 435-333-0050.

*See file “12-Health-Order-2020-06-26” for full Order*

# First COVID-19 Death Reported in Summit County

Summit County, Utah (July 2, 2020) – Today, Summit County learned of the death of a resident who tested positive for COVID-19. The deceased individual, a male over the age of 65, passed away on Thursday, July 2 and had been hospitalized due to COVID-19. This is the first death attributed to the virus in Summit County.

“This is a tragic loss of life and we wish to extend our condolences to the family,” Summit County Council Chair, Doug Clyde, said. “The passing of a member of our community is a sobering reminder of the seriousness of the COVID-19 Pandemic. It illustrates the need for all of us to do our part and double down on efforts to sanitize regularly, wear masks and social distance. We are fortunate to have one of the best public health departments in the state leading our community and will continue doing all we can to mitigate the current and future impacts of this virus.”

As of July 2, nearly 500 cases of COVID-19 had been confirmed in Summit County. That number continues to grow daily.

“We are deeply saddened by this news,” Summit County Health Director, Dr. Rich Bullough, said. “Our dedicated staff are working tirelessly to reduce greater spread and loss of life. I am also grateful for the support and expertise of our local healthcare professionals who have been a vital part of this response. Now, more than ever, we ask for the support of the community in fighting the spread of COVID-19 in Summit County.”

Symptoms of COVID-19 include fever, cough, shortness of breath, loss of the sense of taste or smell, runny nose, sore throat, muscle aches, fatigue and diarrhea. Many positive cases, especially among younger adults, report experiencing mild cold symptoms. If someone exhibits these symptoms or has been in close contact with a known positive COVID-19 case, that individual should immediately isolate themselves and call their health care provider, who will coordinate with the patient to determine the appropriate next steps.

There is currently no vaccine or treatment available for COVID-19. The Utah Department of Health recommends taking preventive actions to stop the spread of germs including regular hand washing, wearing a mask while in public and self-isolating at home while sick. Effective June 27, Summit County’s Joint Public Health Order 2020-08 requires face coverings to be worn at indoor and outdoor community gatherings and indoor public places.

# Health Department Reports Significant Reduction in New COVID-19 Cases Due to Face Covering Order

**Summit County, Utah** (July 29, 2020) — Data collected by the Utah Department of Health and the Summit County Health Department indicate a recent downward trend in COVID-19 cases. This decline correlates with the adoption of Summit County’s mandatory face-covering order on June 26.

Statistical analyses were conducted to determine if the decline in new COVID-19 cases, beginning on July 10 and continuing through July 27, was significantly different than the decline observed state-wide during the same period. Findings indicate that the rate and magnitude of decline in new cases was significantly greater in Summit County than was observed state-wide ( $p=0.0002$ ).

“We are encouraged by the results we’ve seen in the last ten days,” Summit County Council Chair Doug Clyde said. “Our situation at the end of June was extremely troubling but thanks to our residents and businesses, we have turned the corner. We hope to hold this course by continuing to properly wear masks and only gathering when and where it is safe and smart to do so.”

As illustrated in the accompanying graphics, daily cases increased in the two-week period of June 27 – July 11 and then began to plateau. Following the two-week incubation period after July 4, a consistent decline in new cases began, aside from a single-day spike.

“The data are clear: wearing a face covering decreases the spread of COVID-19 in our communities,” Summit County Health Director Dr. Rich Bullough said. “Our economic and health outlook for the fall and winter is much more favorable if we can maintain this trend through community effort. We are hopeful these data encourage our residents and visitors to remain vigilant in wearing face coverings. Their efforts are clearly paying off.”

For current information on Summit County’s COVID-19 outlook, visit <https://summitcountyhealth.org/coronavirus/>. At this website, the public can find a data dashboard, local information and community resources updated regularly as the pandemic situation evolves.

# County Council, Board of Health, Superintendents and Health Director Release Joint School Opening Statement

**August 13, 2020**

As schools reopen in Summit County and across the State, there is understandable concern about the safety of that return. Also, there is confusion about authorities related to the plans guiding the return of students, teachers, staff, and faculty.

In Summit County, the Health Department and County officials have been proactive in issuing public health orders to help slow the spread of COVID-19. We were able to take these actions because state law allows us to do so.

With respect to the operation of schools in the state of Utah, Local Health Departments do not hold authority to develop or approve school operational plans. This holds true with re-opening plans during the current COVID-19 pandemic.

The re-opening plans for the three school districts in Summit County were all developed by the Districts. Approval authority for these plans is held by the Local School Governing Boards. The Summit County Health Department has provided input and recommendations to these plans, but it has not approved, endorsed, or formally supported any of the plans, as it does not have statutory authority to do so.

The plans have all been guided by, and meet, the requirements established by the Utah State Board of Education, and they all include the mandatory face covering requirements established by the Utah Department of Health and Summit County. They were developed, and will be adjusted, to comply with Utah and Summit County Health Orders.

The Summit County Health Department will work closely with the schools to lead disease investigation efforts, and will establish, maintain, and enforce isolation and quarantine related to these cases, if outbreaks of COVID-19 do occur. The School Districts and Summit County Health Department will continue to work closely together to make data-informed decisions. While the entities have different authorities, our focus is united in trying to help provide a safe learning environment for students and a safe workplace for teachers and employees.

Signed,

Doug Clyde, *Summit County Council Chair*

Dr. Ilyssa Golding, *Summit County Board of Health Chair*

Dr. Rich Bullough, *Summit County Health Director*

Jerre Holmes, *North Summit School District Superintendent*

Dr. Shad Sorenson, *South Summit School District Superintendent*

Dr. Jill Gildea, *Park City School District Superintendent*

# Public Health Order 2020-09: Summit County extends Emergency Declarations, Face Covering Order

On August 26, 2020, County Council approved the following extensions and modifications in public session:

1. Summit County's Emergency Declaration and Public Health Emergency Declaration are extended to Jan. 8, 2021.
2. [Public Health Order 2020-09](#) (The Face Covering Order) is extended to Jan. 8, 2021 with the following refinements:
  - *Single-layer* face coverings that can be seen through (such as neck gaiters) and face coverings with two-way valves are not approved. N-95 or KN-95 masks with valves are approved for medical use only. N-95 and KN-95 masks with valves should not be used by the general public.
  - Both of these face covering types have been found to provide inadequate COVID-19 prevention in national studies.
  - (Duke University Mask Study: <https://advances.sciencemag.org/content/early/2020/08/07/sciadv.abd3083>)
  - Board of Health findings regarding face coverings in Child Care & Exercise facilities appeals are included.

Summit County has adopted the current State of Utah Phased Guidelines regarding all other Health Orders. These Orders may be extended, modified, or rescinded as the local pandemic situation evolves.

*See file "14-Health-Order-2020-08-26" for full Order*



# Summit County moves to High Transmission Risk Level

Based on metrics established by the statewide COVID-19 Transmission Index, Summit County moved to the High Risk Level designation today, October 22, 2020. The announcement was made during a press conference with the Utah Department of Health and Governor Gary Herbert.

## Key points during High Risk Transmission:

- Social gatherings of 10 or fewer are permitted.
- Masks are required under the existing Face-Covering Ordinance in Summit County
- Restaurants & Bars: 6 feet between parties at all times (including waiting areas and when seated)
- Any establishment that allows public gathering, such as live events, movie theatres, sporting events, weddings, recreation and entertainment.
  - 6 feet physical distancing between household groups
  - Exception to 6 feet physical distancing between household groups can be requested through county executives in consultation with the local health officer. Exceptions may be reviewed every 14 days. Due to the high risk of transmission in this level, exceptions will be rare and are strongly discouraged.
- When does a county change levels?
  - Changes from a higher transmission level to a lower transmission level may occur every 14 days at minimum, when thresholds are met.

# Summit County releases statement regarding the end of the statewide mask mandate

**Summit County, Utah** (April 8, 2021) — After carefully reviewing metrics on hospital utilization, vaccination rates, and recent cases of COVID-19 among our most vulnerable populations, Summit County will not extend a mask mandate following the expiration of the statewide mandate at 11:59 PM on April 9. We thank the public for their commitment to getting vaccinated and for following health guidelines to reduce the spread of COVID-19 in Summit County. Our current outlook is a result of your diligent efforts and sacrifices.

Many private businesses in Summit County may continue to require masks for patrons. County officials ask that residents and visitors respect and comply with these requirements. Please show courtesy and compassion to your neighbors, whether they choose to wear a mask or not. The public is encouraged to continue health measures that prevent the spread of COVID-19 in our communities: frequently sanitizing hands and high-touch surfaces and social distancing in public areas, especially indoors.

We recognize the tremendous impacts of COVID-19 on our residents, families, children, businesses, and employees. We mourn for those who lost loved ones to this cruel virus. Over the past year, we have been challenged as a community and individually; mentally, physically, and financially. The pandemic may not be over, but we are in a better place. There is no doubt the actions of our residents saved lives and reduced the long-term suffering many more would experience if they had contracted the virus. Please help us to continue moving forward and sustain the success we have achieved as a community.

# Statement from Summit County Health Department on Updated Mask Recommendations

**Summit County, Utah** (July 30, 2021) — The Centers for Disease Control (CDC) has released [new recommendations](#) regarding masks given recent data on the increased transmission of the B.1.617.2 (Delta) COVID-19 variant, which is the predominant COVID strain globally. The CDC recommends people, even those who are fully vaccinated, wear masks in public indoor settings.

**The Summit County Health Department supports the use of face coverings to reduce the risk of COVID-19 spread. Individuals and families are encouraged to evaluate their individual situations and determine their best course of action moving forward.**

While case counts and positivity rates remain relatively low in Summit County, we are continually monitoring data and considering all potential measures to mitigate COVID-19 spread as allowed by current legislation. Current legislation severely limits the ability of the Summit County Health Department to issue COVID-19-related health orders, including those regarding face coverings.

We are proud of Summit County's high vaccination rate. To date, 87% of persons in Summit County who are eligible to receive the vaccine have completed one dose and 78% have been fully vaccinated. COVID-19 is now almost exclusively a pandemic among the unvaccinated. Therefore, we urge those who have not been vaccinated to do so.

The Summit County Health Department offers vaccines at their department offices located in Park City, Coalville and Kamas. Vaccines are also available at most local pharmacies and at Wasatch Pediatrics, located at 750 Round Valley Dr #102, Park City, UT.

# Summit County Issues Public Health Order for Elementary Schools

August 21, 2021

Summit County Health Director Dr. Phil Bondurant has issued a Public Health Order outlining metrics for requiring face-coverings in Summit County elementary schools. Under the order, face-coverings would be required if any individual elementary school campus reaches a two-percent 14-day COVID-19 positivity rate among the total number of students, staff and faculty. The order goes into effect at 12:01 a.m. on Wednesday, August 25.

“We recognize there are very strong opinions on both sides of the mask discussion,” Summit County Health Director, Dr. Phil Bondurant said. “Ultimately, I want to provide the safest, healthiest learning environment in Summit County schools for the upcoming school year while allowing for parental choice. Masks are not a failproof solution to eliminate COVID-19. However, it is well documented that masks are an effective strategy to minimize illness. This approach allows us to actively monitor the situation and provide interventions before an outbreak occurs. In the end, our goal is to help keep kids in school and mitigate the risk of COVID-19 transmission until vaccines become available for children.”

Each of the county’s seven elementary schools (four in the Park City School District, one in North Summit, and two in South Summit) will be evaluated as separate campuses. The order will not apply to middle or high schools. These metrics were determined using the “Test to Stay” program outlined in Utah Senate Bill 107, which would require Summit County schools with 30 active COVID-19 cases over 14 days to implement COVID-19 testing among students for them to return to campus. Summit County’s Public Health Order was created as an intermediary measure to keep children in classrooms and prevent significant outbreaks of COVID-19.

“The Summit County Council is committed to taking any necessary action available to us within the confines of the law to proactively protect students this school year,” Summit County Council Chair Glenn Wright said. “We support Dr. Bondurant’s approach and do not currently intend to consider termination of this Public Health Order. This course of action was taken after careful consideration of the county’s legal authorities and recent public input.”

The order comes after the Summit County Council, the County Manager, and the County Health Director consulted with the State Board of Education over the past week to determine legal power and authority. The Summit County Attorney’s Office approved the order of constraint as to form which is its certification that it is a lawful and legally enforceable document.

“Throughout the COVID-19 pandemic, Summit County has sought to work in concert with our local and state partners,” Summit County Manager Tom Fisher said. “The Manager’s Office supports the Health Director’s efforts to enact these measures.”

As school resumes, parents and students of all ages are strongly encouraged to follow CDC and state guidelines regarding mask usage, proper sanitization practices and social interactions both in and out of school. These can be found at <https://coronavirus.utah.gov/education>.

Per Utah legislation, this Order will be reviewed in thirty days.

*See file "16-Health-Order-2021-08-21" for full Order*

# Summit County Issues Public Health Order for Junior High and Middle Schools

**Summit County, Utah** (Sept. 23, 2021) — Summit County Health Director Dr. Phil Bondurant has issued a Public Health Order outlining metrics for requiring face-coverings for all public and private middle schools and junior high campuses in Summit County. Under the order, face-coverings would be required if any individual campus reaches a two-percent 14-day COVID-19 positivity rate among the total number of students, staff and faculty. The order goes into effect at 12:01 a.m. on Monday, September 27, and will remain in effect until the termination of the Local Public Health Emergency on December 31, 2021.

“The threshold-based mask mandate in elementary schools can only be successful with community buy-in. Based on the low number of school-associated cases, the data provide evidence this approach is working due to the efforts of students, parents, faculty, and staff. However, as we watch what has occurred in other middle schools and junior high schools in the state, there is a credible threat of increased COVID-19 transmission in schools where there is an overlap of vaccine eligible and ineligible students,” Summit County Health Director, Dr. Phil Bondurant said. “This order provides another mitigation strategy intended to keep our schools open, limit the impact of potential outbreaks, and avoid Test-to-Stay protocols until vaccines are available later this fall.”

All of the county’s middle school and junior high campuses will be evaluated as separate campuses. The order will not apply to high schools. These metrics are identical to those put in place at the beginning of the school year for Summit County elementary schools as an intermediary measure to keep children in classrooms and prevent significant outbreaks of COVID-19. This approach is based on the “Test to Stay” program outlined in Utah Senate Bill 107. The bill requires all Summit County schools with 30 active COVID-19 cases over 14 days to implement COVID-19 testing among students for them to return to campus.

“The Summit County Council is encouraged by recent case counts in our schools but felt additional measures were needed as we await vaccines for five through 11-year-olds,” Summit County Council Chair Glenn Wright said. “Our response remains focused on protecting our county’s vulnerable populations, especially those who cannot yet protect themselves through vaccination.”

To date, no Summit County elementary schools have reached a threshold requiring masks. Summit County Health Department leadership anticipates vaccines will be approved for students age 5-11 before Thanksgiving and is currently planning vaccine clinic operations for students and booster doses for individuals 65 and older.

As cold and flu season arrives, parents and students of all ages are strongly encouraged to follow CDC and state guidelines regarding mask usage, proper sanitization practices and social interactions both in and out of school. These can be found at <https://coronavirus.utah.gov/education>.

*See file “16-Health-Order-2021-08-21” for full Order*

## **(12/15/21) Summit County middle, junior and elementary school mask mandates ending in 2022**

**Summit County, Utah** (December 15, 2021) — Summit County Health Director Dr. Phil Bondurant and County Manager Tom Fisher will terminate Public Health Orders 2021- 1 & 2 on January 1, 2022. Both public health orders require face-coverings for Summit County’s middle, junior high and elementary schools when certain COVID-19 case thresholds are met. The decision to terminate these orders was made after careful consideration of the county’s vaccination rates, vaccine availability and COVID-19 case trends.

“The COVID vaccination rates of eligible Summit County residents is amazing. Our priority has always been to implement strategies proven to reduce risk and transmission. With vaccines readily available to anyone 5 years of age or older, we now have to manage this pandemic with a new perspective.” Dr. Bondurant said. “We are encouraged by recent COVID-19 rates which are a direct result of vaccines. The health department looks forward transitioning out of the pandemic response when the time is right. This is the first step in that process. Additionally, I encourage those who are eligible to be vaccinated and receive a booster dose after six months.”

To date, six face-covering mandates were enacted since the orders went into effect at the beginning of the 2021 school year. In the December 15 County Council meeting, Summit County’s Declaration of Local Public Health Emergency was extended until June 30, 2022.

## (1/6/22) Summit County implements face-covering order in response to Omicron surge

**Summit County, Utah** (January 6, 2022) — Beginning January 7, 2022, all individuals living within or visiting Summit County, Utah, regardless of vaccination status, must wear face-coverings while inside public indoor facilities or waiting in lines. Public Health Order 2022-01 was enacted by Summit County Manager Tom Fisher and Summit County Health Officer Dr. Phil Bondurant in response to the record-breaking surge of the Omicron COVID-19 variant both in Summit County and across the state. This Order begins at 12:01 a.m. on Friday, January 7, 2022 and is currently in effect until 5 p.m. on February 21, 2022.

“This was not an easy decision and certainly not an action we wanted to take at this stage of the pandemic,” Dr. Bondurant said. “I am especially concerned for our frontline workers, our children and staff in schools and the current strain on our healthcare system. Masks combined with vaccines are critical tools to help us weather this surge and protect our critical services.”

Exemptions include:

- Individuals under two years of age, those with medical conditions, impairments, or disabilities that prevent wearing a face-covering.
- Individuals engaging in work where they are alone in an indoor establishment or facility, individuals for whom wearing a face-covering would create a risk to the individual related to their work as determined by local, state, or federal regulators or workplace safety guidelines.
- Individuals seated at a restaurant or other food/beverage establishment while they are eating or drinking.
- The complete Order and a full list of exemptions can be found at <https://bit.ly/2022-01>.

“Along with the health of our residents, workers and visitors, preserving and maintaining critical infrastructure services in our county is of the highest priority,” County Manager Tom Fisher said. “As it stands, the omicron surge poses a significant threat to our ability to provide critical services, such as emergency response, snow removal, solid waste collection, medical services, and others. This health order helps protect those front-line workers and the important services they provide this community.”

Violations of the Order are punishable as infractions; however, the purpose of the Order is to protect individuals' health and not to hold them criminally liable. Discretion will be used in the citing and prosecution of violations of the Order. Educating and supplying a mask to those in violation will be a priority of enforcement.



## (1-4-22) Summit County Health Department Issues Public Health Advisory

*Health Officer Dr. Phil Bondurant strongly advises community to wear masks and engage in other precautions due to spread of Omicron variant*

**Summit County, Utah** (January 4, 2022) — The Summit County Health Department issued a formal public health advisory regarding the record-breaking transmission of the COVID-19 Omicron variant. The advisory, which is in effect through January 31, 2022, strongly encourages people who live and work in Summit County to engage in several precautions known to be effective in preventing the spread of COVID:

- Wear a face mask, regardless of vaccination status, whenever indoors in public. Masks should always cover the nose and mouth, and the advisory notes that higher-quality masks, such as KN95s or KF94s, may offer additional protection.
- Stay home if they are exhibiting any symptoms of illness—regardless of vaccination status or past infection—and get tested for COVID.
- [Follow current guidance on isolation and quarantine.](#)
- Get vaccinated and (if eligible) boosted.
- Avoid all large gatherings if they are not vaccinated and (if applicable) boosted.

[The full advisory can be read here.](#)

The COVID vaccines are extremely effective at preventing serious illness and death. Because vaccine efficacy can wane over time, a booster dose is important to maintain protection.

Due to the CDC's new, shorter 5-day quarantine and isolation recommendation, masking is also now more important than ever.

“This surge is one of the most critical times we’ve faced in Summit County over the course of the COVID-19 pandemic,” Dr. Bondurant said. “We are seeing record high case numbers. While hospitalizations still remain the number one indicator, I implore our residents and visitors to take action to reduce transmission and the impacts of the Omicron variant. The winter season is important to Summit County for many reasons and we should all commit to doing what we can to protect those who live in, work and visit Summit County. We will continue to evaluate current trends as we look at the best options to get past this surge.”