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6 Attorneys for Defendants County of Ventura
 (also erroneously sued as Ventura County Public
 7 Health Care Agency), Sheriff William Ayub
 (erroneously sued as "Bill Ayub"), Robert Levin
 8 and William T. Foley

9
 10 UNITED STATES DISTRICT COURT
 11 CENTRAL DISTRICT OF CALIFORNIA
 12

13 DONALD MCDUGALL, an	}	No. 2:20 cv-029927 CBM(ASX)
14 individual; JULIANA GARCIA, an		
15 individual; SECOND AMENDMENT		
FOUNDATION; CALIFORNIA		
16 GUN RIGHTS FOUNDATION; and		
INC.,	}	REQUEST FOR JUDICIAL NOTICE
		IN SUPPORT OF OPPOSITION TO
		PLAINTIFFS' MOTION FOR
		PRELIMINARY INJUNCTION
17 Plaintiffs,	}	Date: May 19, 2020
18 vs.		Time: 10:00 a.m.
		Ctrm: 8B
		Judge: Hon. Consuelo B.
		Marshall
19 COUNTY OF VENTURA,	}	
20 CALIFORNIA; BILL AYUB, in his		
official capacity; WILLIAM T.		
21 FOLEY, in his official capacity,		
ROBERT LEVIN, in his official		
22 capacity; and VENTURA COUNTY	}	Trial: Not Set
PUBLIC HEALTH CARE AGENCY,		Complaint Filed: March 28, 2020
23 Defendants.	}	

24 TO ALL PARTIES AND THEIR ATTORNEYS OF RECORD:

25 Defendants County of Ventura (sued in its own name and erroneously in the
 26 name of "Ventura County Public Health Care Agency"), Sheriff William Ayub
 27 (erroneously sued as "Bill Ayub"), Robert Levin and William T. Foley
 28 (collectively "Defendants"), pursuant to Federal Rules of Evidence, rule 201,

1 request that this court take judicial notice of the following official public
2 documents and newspaper articles, including:

3 **Exhibit 1:** Centers for Disease Control, Coronavirus Disease 2019
4 (COVID-19), Frequently Asked Questions, available at
5 <https://www.cdc.gov/coronavirus/2019-ncov/faq.html> (visited April 27, 2020).

6 **Exhibit 2:** *Gish v. Newsom* (C.D. Cal. April 23, 2020) Case No. 5:20-cv-
7 00755-JGB-KK, ECF 51, pg. ID 1021 (“*Gish*”).

8 **Exhibit 3:** World Health Organization, Coronavirus Disease 2019 Situation
9 Report (April 23, 2020), available at
10 [https://www.who.int/docs/default-source/coronaviruse/
11 situation-reports/20200423-sitrep-94-covid-19.pdf?sfvrsn=b8304bf0_4](https://www.who.int/docs/default-source/coronaviruse/situation-reports/20200423-sitrep-94-covid-19.pdf?sfvrsn=b8304bf0_4) (visited
12 April 27, 2020).

13 **Exhibit 4:** Executive Department of the State of California, Proclamation of
14 a Statewide Emergency, from the Executive Department, State of California,
15 signed by Governor Gavin Newsom (March 4, 2020).

16 **Exhibit 5:** World Health Organization, Declaration of Global Pandemic
17 (March 11, 2020), available at
18 [https://www.who.int/dg/speeches/detail/who-director-
19 general-s-opening-remarks-at-the-media-briefing-on-covid-19---11-march-2020](https://www.who.int/dg/speeches/detail/who-director-general-s-opening-remarks-at-the-media-briefing-on-covid-19---11-march-2020)
20 (visited April 26, 2020).

21 **Exhibit 6:** County of Ventura, Declaration of Local Emergency by County
22 Health Officer (March 12, 2020).

23 **Exhibit 7:** County of Ventura, Health Officer Order for the Control of
24 COVID-19 Directing Vulnerable Individuals Living in the County to Shelter at
25 Their Place of Residence, Restrictions of Certain Businesses, Among other Orders,
26 Date of Order: March 17, 2020 (March 17, 2020).

27 **Exhibit 8:** Executive Department of the State of California, Executive
28 Order No. N-33-20 (March 19, 2020).

1 **Exhibit 9:** United States Department of Homeland Security, Cybersecurity
2 and Infrastructure Security Agency (“CISA”), March 19, 2020, Memorandum on
3 Identification of Critical Infrastructure Workers During COVID-19 Response
4 (March 19, 2020) available at: [https://www.cisa.gov/sites/default/files/](https://www.cisa.gov/sites/default/files/publications/CISA-Guidance-on-Essential-Critical-Infrastructure-Workers-1-20-508c.pdf)
5 [publications/CISA-Guidance-on-Essential-Critical-Infrastructure-Workers-1-20-50](https://www.cisa.gov/sites/default/files/publications/CISA-Guidance-on-Essential-Critical-Infrastructure-Workers-1-20-508c.pdf)
6 [8c.pdf](https://www.cisa.gov/sites/default/files/publications/CISA-Guidance-on-Essential-Critical-Infrastructure-Workers-1-20-508c.pdf) (last visited April 1, 2020).

7 **Exhibit 10:** Public Health Officer of the State of California, Essential
8 Business List (March 22, 2020) available at
9 <https://covid19.ca.gov/img/EssentialCriticalInfrastructureWorkers.pdf> (visited
10 April 27, 2020).

11 **Exhibit 11:** Mercury News, Coronavirus: Are Gun Stores Essential?
12 Governor Newsom Sidesteps that Question, Leaves It to the Counties (March 25,
13 2020) available at [https://www.mercurynews.com/2020/03/25/coronavirus-are-](https://www.mercurynews.com/2020/03/25/coronavirus-are-gun-stores-essential-governor-sidesteps-that-question-leaves-it-to-the-counties)
14 [gun-stores-essential-governor-sidesteps-that-question-leaves-it-to-the-counties](https://www.mercurynews.com/2020/03/25/coronavirus-are-gun-stores-essential-governor-sidesteps-that-question-leaves-it-to-the-counties)
15 (visited April 26, 2020).

16 **Exhibit 12:** County of Ventura, Stay Well At Home Order of the Ventura
17 County Health Officer (March 20, 2020).

18 **Exhibit 13:** County of Ventura, Stay Well At Home Order of the Ventura
19 County Health Officer (March 31, 2020).

20 **Exhibit 14:** County of Ventura, Stay Well At Home Order of the Ventura
21 County Health Officer (April 9, 2020).

22 **Exhibit 15:** County of Ventura, Stay Well At Home Order of the Ventura
23 County Health Officer (April 20, 2020).

24 **Exhibit 16:** The Hill, Crime Rates Drop Across the Nation (April 3, 2020)
25 available at [https://thehill.com/homenews/state-watch/491055-crime-rates-drop](https://thehill.com/homenews/state-watch/491055-crime-rates-drop-across-the-nation-amid-coronavirus)
26 [-across-the-nation-amid-coronavirus](https://thehill.com/homenews/state-watch/491055-crime-rates-drop-across-the-nation-amid-coronavirus) (visited April 25, 2020).

27 **Exhibit 17:** U.S. News & World Report, New York State Surpasses 1,000
28 Coronavirus Deaths (March 29, 2020) available at <https://www.usnews.com>

1 /news/us/articles/2020-03-29/new-york-citys-poorer-neighborhoods-hit-hardest-by
2 -virus (visited April 25, 2020).

3 **Exhibit 18:** WGN9 Web Desk, WGN Investigates How the Stay At Home
4 Order Has Impacted Chicago's Crime Statistics (March 25, 2020) available at
5 <https://wgntv.com/news/wgn-investigates/how-the-stay-at-home-order-has-impacted-chicagos-crime-statistics/> (visited April 25, 2020).

7 **Exhibit 19:** Reason, Miami Has Recorded No Homicides in 6 Weeks
8 Despite Deliberate Decline in Police Enforcement (April 23, 2020), available at
9 <https://reason.com/2020/04/23/miami-has-recorded-no-homicides-in-6-weeks-despite-deliberate-decline-in-police-enforcement/> (visited April 25, 2020).

11 **Exhibit 20:** Ventura County Star, Coronavirus: Deputies Say Commercial
12 Thefts on the Rise, Ventura County Star (April 13, 2020) available at
13 <https://www.vcstar.com/story/news/crime/2020/04/13/coronavirus-sheriff-say-commercial-burglaries-vehicle-thefts-rise/2977993001/> (visited April 26, 2020).

15 **Exhibit 21:** California Department of Public Health, COVID-19 by the
16 Numbers (May 2, 2020) available at
17 https://www.cdph.ca.gov/Programs/CID/DCDC/PublishingImages/COVID-19/CA_COVID-19_May2.png (last visited May 5, 2020); see also
19 https://public.tableau.com/views/COVID-19PublicDashboard/Covid-19Public?:embed=y&:display_count=no&:showVizHome=no (last visited May 5, 2020).

21 **Exhibit 22:** United States Department of Homeland Security, Cybersecurity
22 and Infrastructure Security Agency ("CISA"), March 28, 2020, Revised
23 Memorandum on Identification of Critical Infrastructure Workers During COVID-
24 19 Response (March 28, 2020) available at:
25 https://www.cisa.gov/sites/default/files/publications/Version_3.0_CISA_Guidance_on_Essential_Critical_Infrastructure_Workers_1.pdf (last visited April 27, 2020).

27 Defendants respectfully submit that public documents and newspaper
28 articles (Exhibits 1-22) are proper for judicial notice as well as for consideration by

1 this court with defendants’ opposition to the motion for preliminary injunction
 2 filed by plaintiffs Donald McDougall, Juliana Garcia, Second Amendment
 3 Foundation, California Gun Rights Foundation and Firearms Policy Coalition
 4 (collectively “Plaintiffs”). Courts may take judicial notice of “a fact that is not
 5 subject to reasonable dispute because it . . . can be accurately and readily
 6 determined from sources whose accuracy cannot reasonably be questioned” and
 7 where such judicial notice “is requested by a party and supplied with the necessary
 8 information” “at any stage of the proceeding.” (Fed. Rules Evid., rules 201(b)(2),
 9 (d) and (f); *Hepting v. AT & T Corp.* (N.D. Cal. 2006) 439 F.Supp.2d 974, 987-989
 10 [taking judicial notice of official reports, newspaper articles, and press releases];
 11 *Pacific Gas & Elec. Co. v. Lynch* (C.D. Cal. May 2, 2001) No. CV
 12 01-1083RSWLSHX, 2001 WL 840611 at *6 [taking judicial notice of California
 13 Governor Gray Davis’s January 17, 2001, Proclamation of a State of Emergency];
 14 *U.S. ex rel. Modglin v. DJO Global Inc.* (C.D. Cal. 2014) 48 F.Supp.3d 1362,
 15 1381 [“Under Rule 201, the court can take judicial notice of ‘[p]ublic records and
 16 government documents available from reliable sources on the Internet,’ such as
 17 websites run by governmental agencies”]; *County of Santa Clara v. Trump* (N.D.
 18 Cal. 2017) 250 F.Supp.3d 497, 520 [taking judicial notice of proclamations made
 19 by U.S. Attorney General Jeff Sessions]; *Merced Irrigation Dist. v. County. of*
 20 *Mariposa* (E.D.Cal. 2013) 941 F.Supp.2d 1237, 1261–1262 [taking judicial notice
 21 of Board of Supervisors’ resolution as matter of public record]; *Catholic League*
 22 *for Religious & Civil Rights v. City & County of San Francisco* (9th Cir. 2009) 567
 23 F.3d 595, 606, on reh’g en banc (9th Cir. 2010) 624 F.3d 1043 [judicial notice of
 24 county board of supervisors’ actions according to its public resolution]; *Elena Selk*
 25 *v. Pioneers Mem’l Healthcare Dist.*, (S.D. Cal. Apr. 7, 2014) No. 13CV0244 DMS
 26 (BGS), 2014 WL 12729166 at *2 [taking judicial notice of date entity was
 27 established according to board of supervisors’ resolution].

28 ///

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By /s/
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Assistant County Counsel



Coronavirus Disease 2019

Frequently Asked Questions

Updated April 23, 2020

Other Frequently Asked Questions and Answers About:

[Travel](#)
[Pregnant Women and COVID-19](#)
[Water Transmission](#)
[Healthcare Professionals](#)
[Healthcare Infection](#)
[Laboratory Diagnostic Panels](#)
[Laboratory Biosafety](#)
[General Business](#)
[Personal Protective Equipment](#)
[K-12 Schools and Child Care Program Administrators](#)
[Community events: for administrators and individuals](#)
[Retirement Communities and Independent Living Facilities](#)
[Correctional and Detention Facilities](#)
[Event Organizers & Individuals](#)
[Cloth Face Coverings](#)

Help control the spread of rumors and be aware of fraud schemes.

- [Coronavirus Rumor Control](#) (FEMA)
- [COVID-19 Fraud Alert](#) (Office of the Inspector General)

Coronavirus Disease 2019 Basics

What is a novel coronavirus?

+

A novel coronavirus is a new coronavirus that has not been previously identified. The virus causing coronavirus disease 2019 (COVID-19), is not the same as the [coronaviruses that commonly circulate among humans](#) and cause mild illness, like the common cold.

A diagnosis with coronavirus 229E, NL63, OC43, or HKU1 is not the same as a COVID-19 diagnosis. Patients with COVID-19 will be evaluated and cared for differently than patients with common coronavirus diagnosis.

Why is the disease being called coronavirus disease 2019, COVID-19?

+

On February 11, 2020 the World Health Organization [announced](#) an official name for the disease that is causing the 2019 novel coronavirus outbreak, first identified in Wuhan China. The new name of this disease is coronavirus disease 2019, abbreviated as COVID-19. In COVID-19, 'CO' stands for 'corona,' 'VI' for 'virus,' and 'D' for disease. Formerly, this

disease was referred to as “2019 novel coronavirus” or “2019-nCoV”.

There are many types of human coronaviruses including some that commonly cause mild upper-respiratory tract illnesses. COVID-19 is a new disease, caused by a novel (or new) coronavirus that has not previously been seen in humans. The name of this disease was selected following the World Health Organization (WHO) [best practice](#) for naming of new human infectious diseases.

Why might someone blame or avoid individuals and groups (create stigma) because of COVID-19? +

People in the U.S. may be worried or anxious about friends and relatives who are living in or visiting areas where COVID-19 is spreading. Some people are worried about getting the disease from these people. Fear and anxiety can lead to social stigma, for example, toward people who live in certain parts of the world, people who have traveled internationally, people who were in quarantine, or healthcare professionals.

Stigma is discrimination against an identifiable group of people, a place, or a nation. Stigma is associated with a lack of knowledge about how COVID-19 spreads, a need to blame someone, fears about disease and death, and gossip that spreads rumors and myths.

Stigma hurts everyone by creating more fear or anger toward ordinary people instead of focusing on the disease that is causing the problem.

How can people help stop stigma related to COVID-19? +

People can fight stigma by providing social support in situations where you notice this is occurring. Stigma affects the emotional or [mental health](#) of stigmatized groups and the communities they live in. Stopping stigma is important to making communities and community members resilient. See [resources on mental health and coping during COVID-19](#). Everyone can help stop stigma related to COVID-19 by [knowing the facts](#) and sharing them with others in your community.

Why do some state's COVID-19 case numbers sometimes differ from what is posted on CDC's website? +

CDC's overall case numbers are validated through a confirmation process with jurisdictions. The process used for finding and confirming cases displayed by different places may differ.

How do CDC's COVID-19 case numbers compare with those provided by the World Health Organization (WHO) or Johns Hopkins? +

CDC's COVID-19 case numbers include many publicly reported numbers, including information from state, local, territorial, international and external partners.

Why do the number of cases for previous days increase? +

Delays in reporting can cause the number of COVID-19 cases reported on previous days to increase. (Sometimes this effect is described as “backfill.”) State, local, and territorial health departments report the number of cases that have been confirmed and share these data with CDC. Since it takes time to conduct laboratory testing, cases from a previous day may be added to the daily counts a few days late.

How COVID-19 Spreads

What is the source of the virus? +

COVID-19 is caused by a coronavirus called SARS-CoV-2. Coronaviruses are a large family of viruses that are common in people and many different species of animals, including camels, cattle, cats, and bats. Rarely, animal coronaviruses can infect people and then spread between people. This occurred with [MERS-CoV](#) and [SARS-CoV](#), and now with the

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virus that causes COVID-19. The SARS-CoV-2 virus is a betacoronavirus, like MERS-CoV and SARS-CoV. All three of these viruses have their origins in bats. The sequences from U.S. patients are similar to the one that China initially posted, suggesting a likely single, recent emergence of this virus from an animal reservoir. However, the exact source of this virus is unknown.

More information about the source and spread of COVID-19 is available on the [Situation Summary: Source and Spread of the Virus](#).

How does the virus spread? +

The virus that causes COVID-19 is thought to spread mainly from person to person, mainly through respiratory droplets produced when an infected person coughs or sneezes. These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs. Spread is more likely when people are in close contact with one another (within about 6 feet).

COVID-19 seems to be spreading easily and sustainably in the community ("community spread") in [many affected geographic areas](#). Community spread means people have been infected with the virus in an area, including some who are not sure how or where they became infected.

Learn what is known about the [spread of newly emerged coronaviruses](#).

Why are we seeing a rise in cases? +

The [number of cases of COVID-19](#) being reported in the United States is rising due to [increased laboratory testing](#) and reporting across the country. The growing number of cases in part reflects the rapid spread of COVID-19 as many U.S. states and territories experience community spread. More detailed and accurate data will allow us to better understand and track the size and scope of the outbreak and strengthen prevention and response efforts.

Can someone who has had COVID-19 spread the illness to others? +

The virus that causes COVID-19 is [spreading from person-to-person](#). People are thought to be most contagious when they are symptomatic (the sickest). That is why CDC recommends that these patients be isolated either in the hospital or at home (depending on how sick they are) until they are better and no longer pose a risk of infecting others. More recently the virus has also been detected in asymptomatic persons.

How long someone is actively sick can vary so the decision on when to release someone from isolation is made using a test-based or non-test-based strategy (i.e. time since illness started and time since recovery) in consultation with state and local public health officials. The decision involves considering the specifics of each situation, including disease severity, illness signs and symptoms, and the results of laboratory testing for that patient.

Learn more about [CDC's guidance on when to release someone from isolation](#) and discharge hospitalized patients with COVID-19. For information on when someone who has been sick with COVID-19 is able to stop home isolation see [Interim Guidance for Discontinuation of In-Home Isolation for Patients with COVID-19](#).

Someone who has been released from isolation is not considered to pose a risk of infection to others.

Can someone who has been quarantined for COVID-19 spread the illness to others? +

Quarantine means separating a person or group of people who have been exposed to a contagious disease but have not developed illness (symptoms) from others who have not been exposed, in order to prevent the possible spread of that disease. Quarantine is usually established for the incubation period of the communicable disease, which is the span of time during which people have developed illness after exposure. For COVID-19, the period of quarantine is 14 days from the last date of exposure because the incubation period for this virus is 2 to 14 days. Someone who has been released from COVID-19 quarantine is not considered a risk for spreading the virus to others because they have not developed illness during the incubation period.

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Can the virus that causes COVID-19 be spread through food, including restaurant take out, refrigerated or frozen packaged food? +

Coronaviruses are generally thought to be spread from person to person through respiratory droplets. Currently, there is no evidence to support transmission of COVID-19 associated with food. Before preparing or eating food it is important to always wash your hands with soap and water for at least 20 seconds for general food safety. Throughout the day use a tissue to cover your coughing or sneezing, and wash your hands after blowing your nose, coughing or sneezing, or going to the bathroom.

It may be possible that a person can get COVID-19 by touching a surface or object, like a packaging container, that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the main way the virus spreads.

In general, because of poor survivability of these coronaviruses on surfaces, there is likely very low risk of spread from food products or packaging.

Learn what is known about the [spread of COVID-19](#).

Can I get sick with COVID-19 if it is on food? +

Based on information about this novel coronavirus thus far, it seems unlikely that COVID-19 can be transmitted through food – additional investigation is needed.

Will warm weather stop the outbreak of COVID-19? +

It is not yet known whether weather and temperature affect the spread of COVID-19. Some other viruses, like those that cause the common cold and flu, spread more during cold weather months but that does not mean it is impossible to become sick with these viruses during other months. There is much more to learn about the transmissibility, severity, and other features associated with COVID-19 and investigations are ongoing.

What is community spread? +

Community spread means people have been infected with the virus in an area, including some who are not sure how or where they became infected.

What temperature kills the virus that causes COVID-19? +

Generally coronaviruses survive for shorter periods at higher temperatures and higher humidity than in cooler or dryer environments. However, we don't have direct data for this virus, nor do we have direct data for a temperature-based cutoff for inactivation at this point. The necessary temperature would also be based on the materials of the surface, the environment, etc. Regardless of temperature please follow [CDC's guidance for cleaning and disinfection](#).

Can mosquitoes or ticks spread the virus that causes COVID-19? +

At this time, CDC has no data to suggest that this new coronavirus or other similar coronaviruses are spread by mosquitoes or ticks. The main way that COVID-19 spreads is from person to person. See [How Coronavirus Spreads](#) for more information.

How to Protect Yourself

Am I at risk for COVID-19 in the United States? +

This is a rapidly evolving situation and the [risk assessment](#) may change daily. The latest updates are available on CDC's

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Coronavirus Disease 2019 (COVID-19) website.

How many cases have been reported in the United States? +

COVID-19 case counts for the United States are updated regularly online. See the [current U.S. case count of COVID-19](#).

How can I help protect myself? +

Visit the [COVID-19 Prevention and Treatment](#) page to learn about how to protect yourself from respiratory illnesses, like COVID-19.

What should I do if I have had close contact with someone who has COVID-19? +

There is information for [people who have had close contact](#) with a person confirmed to have, or being evaluated for, COVID-19 available online.

Does CDC recommend the use of facemask or face coverings to prevent COVID-19? +

In light of new data about how COVID-19 spreads, along with evidence of widespread COVID-19 illness in communities across the country, CDC recommends that people wear a [cloth face covering](#) to cover their nose and mouth in the community setting. This is an additional public health measure people should take to reduce the spread of COVID-19 in addition to (not instead of) social distancing, frequent hand cleaning and other everyday preventive actions. A cloth face covering is not intended to protect the wearer, but may prevent the spread of virus from the wearer to others. This would be especially important in the event that someone is infected but does not have symptoms. A cloth face covering should be worn whenever people must go into public settings (grocery stores, for example). Medical masks and N-95 respirators are reserved for healthcare workers and other first responders, as recommended by current CDC guidance.

Am I at risk for COVID-19 from mail, packages, or products? +

There is still a lot that is unknown about COVID-19 and how it spreads. Coronaviruses are thought to be spread most often by respiratory droplets. Although the virus can survive for a short period on some surfaces, it is unlikely to be spread from domestic or international mail, products or packaging. However, it may be possible that people can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the main way the virus spreads.

Learn more about [safe handling of deliveries and mail](#).

Is it okay for me to donate blood? +

In healthcare settings across the United States, donated blood is a lifesaving, essential part of caring for patients. The need for donated blood is constant, and blood centers are open and in urgent need of donations. CDC encourages people who are well to continue to donate blood if they are able, even if they are practicing social distancing because of COVID-19. CDC is supporting blood centers by providing recommendations that will keep donors and staff safe. Examples of these recommendations include spacing donor chairs 6 feet apart, thoroughly adhering to environmental cleaning practices, and encouraging donors to make donation appointments ahead of time.

Should contact lens wearers take special precautions to prevent COVID-19? +

- Currently there is no evidence to suggest contact lens wearers are more at risk for acquiring COVID-19 than eyeglass wearers.
- Contact lens wearers should continue to [practice safe contact lens wear and care hygiene habits](#) to help prevent against transmission of any contact lens-related infections, such as always washing hands with soap and water before handling lenses.
- People who are healthy can continue to wear and care for their contact lenses as prescribed by their eye care professional.

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Find more information about [how coronavirus spreads](#) and [how to protect yourself](#).

Visit [CDC's contact lens website](#) for more information on healthy contact lens wear and care.

Is contact lens disinfecting solution effective against COVID-19?

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- [Hydrogen peroxide-based systems](#) for cleaning, disinfecting, and storing contact lenses should be effective against the virus that causes COVID-19.
 - For other disinfection methods, such as multipurpose solution and ultrasonic cleaners, there is currently not enough scientific evidence to determine efficacy against the virus.
- [Always use solution](#) to disinfect your contact lenses and case to kill germs that may be present.
- Handle your lenses over a surface that has been cleaned and disinfected.

Find more information about [how coronavirus spreads](#) and [how to protect yourself](#).

Visit [CDC's contact lens website](#) for more information on healthy contact lens wear and care.

COVID-19 and Children

What is the risk of my child becoming sick with COVID-19?

+

Based on available evidence, children do not appear to be at higher risk for COVID-19 than adults. While some children and infants have been sick with COVID-19, adults make up most of the known cases to date. You can learn more about who is at higher risk for severe illness from COVID-19 at [People who are at higher risk for severe illness](#).

How can I protect my child from COVID-19 infection?

+

You can encourage your child to help stop the spread of COVID-19 by teaching them to do the same things everyone should do to stay healthy.

- Avoid close contact with people who are sick.
- Stay home when you are sick, except to get medical care.
- Cover your coughs and sneezes with a tissue and throw the tissue in the trash.
- Wash your hands often with soap and water for at least 20 seconds, especially after blowing your nose, coughing, or sneezing; going to the bathroom; and before eating or preparing food.
- If soap and water are not readily available, use an alcohol-based hand sanitizer with at least 60% alcohol. Always wash hands with soap and water if hands are visibly dirty.
- Clean and disinfect frequently touched surfaces and objects (e.g., tables, countertops, light switches, doorknobs, and cabinet handles).
- Launder items, including washable plush toys, as appropriate and in accordance with the manufacturer's instructions. If possible, launder items using the warmest appropriate water setting for the items and dry items completely. Dirty laundry from an ill person can be washed with other people's items.

You can find additional information on preventing COVID-19 at [Prevention for 2019 Novel Coronavirus](#) and at [Preventing COVID-19 Spread in Communities](#). Additional information on how COVID-19 is spread is available at [How COVID-19 Spreads](#).

More information on [Children and Coronavirus Disease 2019 \(COVID-19\)](#) is available online.

Are the symptoms of COVID-19 different in children than in adults?

+

No. The symptoms of COVID-19 are similar in children and adults. However, children with confirmed COVID-19 have generally presented with mild symptoms. Reported symptoms in children include cold-like symptoms, such as fever, runny nose, and cough. Vomiting and diarrhea have also been reported. It's not known yet whether some children may be at higher risk for severe illness, for example, children with underlying medical conditions and special healthcare needs. There is much more to be learned about how the disease impacts children.

Should children wear masks?

+

CDC recommends that everyone 2 years and older wear a cloth face covering that covers their nose and mouth when they are out in the community. Cloth face coverings should NOT be put on babies or children younger than 2 because of the danger of suffocation. Children younger than 2 years of age are listed as an exception as well as anyone who has trouble breathing or is unconscious, incapacitated, or otherwise unable to remove the face covering without assistance.

Wearing cloth face coverings is a public health measure people should take to reduce the spread of COVID-19 in addition to (not instead of) social distancing, frequent hand cleaning, and other everyday preventive actions. A cloth face covering is not intended to protect the wearer but may prevent the spread of virus from the wearer to others. This would be especially important if someone is infected but does not have symptoms. Medical face masks and N95 respirators are still reserved for healthcare personnel and other first responders, as recommended by current CDC guidance.

How do I prepare my children in case of COVID-19 outbreak in our community?

+

Outbreaks can be stressful for adults and children. Talk with your children about the outbreak, try to stay calm, and reassure them that they are safe. If appropriate, explain to them that most illness from COVID-19 seems to be mild. [Children respond differently to stressful situations than adults](#). CDC offers [resources](#) to help talk with children about COVID-19.

What steps should parents take to protect children during a community outbreak?

+

This is a new virus and we are still learning about it, but so far, there does not seem to be a lot of illness in children. Most illness, including serious illness, is happening in adults of working age and older adults. However, children do get the virus and become ill. Many schools across the country have announced dismissals for temporary periods. Keep track of school dismissals in your community. Read or watch local media sources that report school dismissals. If schools are dismissed temporarily, use alternative childcare arrangements, if needed.

If your child/children become sick with COVID-19, notify their childcare facility or school. Talk with teachers about classroom assignments and activities they can do from home to keep up with their schoolwork.

Discourage children and teens from gathering in other public places while school is dismissed to help slow the spread of COVID-19 in the community.

School Dismissals and Children

While school's out, can my child hang out with their friends?

+

- The key to slowing the spread of COVID-19 is to practice social distancing. While school is out, children should not have in-person playdates with children from other households. If children are playing outside their own homes, it is essential that they remain 6 feet from anyone who is not in their own household.
- To help children maintain social connections while social distancing, help your children have supervised phone calls or video chats with their friends.
- Make sure children practice [everyday preventive behaviors](#), such as washing their hands often with soap and water. Remember, if children meet outside of school in groups, it can put everyone at risk.

- Revise spring break plans if they included non-essential travel.
- Information about [COVID-19 in children](#) is somewhat limited, but current data suggest children with COVID-19 may have only mild symptoms. However, they can still pass this virus onto others who may be at higher risk, including [older adults and people who have serious underlying medical conditions](#).

While school's out, how can I help my child continue learning? +

- **Stay in touch with your child's school.**
 - Many schools are offering lessons online (virtual learning). Review assignments from the school, and help your child establish a reasonable pace for completing the work. You may need to assist your child with turning on devices, reading instructions, and typing answers.
 - Communicate challenges to your school. If you face technology or connectivity issues, or if your child is having a hard time completing assignments, let the school know.
- **Create a schedule and routine for learning at home, but remain flexible.**
 - Have consistent bedtimes, and get up at the same time, Monday through Friday.
 - Structure the day for learning, free time, healthy meals and snacks, and physical activity.
 - Allow flexibility in the schedule—it's okay to adapt based on your day.
- **Consider the needs and adjustment required for your child's age group.**
 - The transition to being at home will be different for preschoolers, K-5, middle school students, and high school students. Talk to your child about expectations and how they are adjusting to being at home versus at school.
 - Consider ways your child can stay connected with their friends without spending time in person.
- **Look for ways to make learning fun.**
 - Have hands-on activities, like puzzles, painting, drawing, and making things.
 - Independent play can also be used in place of structured learning. Encourage children to build a fort from sheets or practice counting by stacking blocks.
 - Practice handwriting and grammar by writing letters to family members. This is a great way to connect and limit face-to-face contact.
 - Start a journal with your child to document this time and discuss the shared experience.
 - Use audiobooks or see if your local library is hosting virtual or live-streamed reading events.

While school's out, will kids have access to meals? +

Check with your school on plans to continue meal services during the school dismissal. Many schools are keeping school facilities open to allow families to pick up meals or are providing grab-and-go meals at a central location.

While school's out, how can I keep my family healthy? +

- **Watch your child for any signs of illness.**
 - If you see any sign of illness consistent with [symptoms of COVID-19](#), particularly fever, cough, or shortness of breath, call your healthcare provider and keep your child at home and away from others as much as possible. Follow CDC's guidance on ["What to do if you are sick."](#)
- **Watch for signs of stress in your child.**
 - Some common changes to watch for include excessive worry or sadness, unhealthy eating or sleeping habits, and difficulty with attention and concentration. For more information, see the "For Parents" section on CDC's website, [Manage Anxiety and Stress](#).
 - Take time to talk with your child or teen about the COVID-19 outbreak. Answer questions and [share facts](#) about COVID-19 in a way that your child or teen can understand.
 - Go to CDC's [Helping Children Cope with Emergencies](#) or [Talking with Children About COVID-19](#) for more information.

- **Teach and reinforce [everyday preventive actions](#).**
 - Parents and caretakers play an important role in teaching children to wash their hands. Explain that hand washing can keep them healthy and stop the virus from spreading to others.
 - Be a good role model—if you wash your hands often, they're more likely to do the same.
 - Make [handwashing a family activity](#).
- **Help your child stay active.**
 - Encourage your child to play outdoors—it's great for physical and mental health. Take a walk with your child or go on a bike ride.
 - Use indoor activity breaks (stretch breaks, dance breaks) throughout the day to help your child stay healthy and focused.
- **Help your child stay socially connected.**
 - Reach out to friends and family via phone or video chats.
 - Write cards or letters to family members they may not be able to visit.
 - Some schools and non-profits, such as the [Collaborative for Academic, Social, and Emotional Learning](#) [↗](#) and [The Yale Center for Emotional Intelligence](#) [↗](#), have resources for social and emotional learning. Check to see if your school has tips and guidelines to help support social and emotional needs of your child.

While school's out, limit time with older adults, including relatives, and people with chronic medical conditions. +

[Older adults and people who have serious underlying medical conditions](#) are at highest risk of getting sick from COVID-19.

- If others in your home are at particularly [high risk for severe illness from COVID-19](#), consider extra precautions to separate your child from those people.
- If you are unable to stay home with your child during school dismissals, carefully consider who might be best positioned to provide childcare. If someone at higher risk for COVID-19 will be providing care (older adult, such as a grandparent or someone with a serious underlying medical condition), limit your children's contact with other people.
- Consider postponing visits or trip to see older family members and grandparents. Connect virtually or by writing letters and sending via mail.

Children and Youth with Special Healthcare Needs

Is my child with an underlying medical condition or special healthcare need at higher risk for severe illness from COVID-19? +

Children with complex, chronic medical conditions, including children with physical, developmental, behavioral, or emotional differences, can have special healthcare needs. It's not known yet whether all of these children are at higher risk for severe illness from COVID-19.

Although most COVID-19 cases in children are not severe, serious illness that needs to be treated at the hospital still happens. Some data on children reported that the majority who needed hospitalization for COVID-19 had at least one underlying medical condition. The most common underlying conditions reported among children with COVID-19 include chronic lung disease (including asthma), heart disease, and conditions that weaken the immune system. This information suggests that children with these underlying medical conditions may be at risk for more severe illness from COVID-19.

More data are needed to learn which underlying or complex medical conditions may put children at increased risk. CDC is monitoring new information as it becomes available and will provide updates as needed.

Learn more about caring for [children with special health care needs during a disaster](#) and [people who are at higher risk for severe illness from COVID-19](#).

What additional steps should families that have a child with an underlying medical condition or special health care need take? +

In addition to following the recommendations to [prevent getting sick](#) and [running essential errands](#), families should take extra steps recommended for persons with [higher risk of severe COVID-19 illness](#) and steps outlined for those with [potential COVID-19 exposure or confirmed illness](#).

- Identify potential alternative caregivers, if you or other regular caregivers become sick and are unable to care for your child. If possible, these alternative caregivers would not be at [higher risk of severe illness from COVID-19](#) themselves.
- Try to have at least one month of medication and medical supplies on hand. Some health plans allow for a 90-day supply of prescription medications. Consider discussing this option with your child's healthcare provider.
- Review any care plans for your child, such as an asthma action plan, and make sure caregivers and backup caregivers are familiar with these plans.
- If you do not have [care plans or an emergency notebook](#), try to make them. They typically include important information about your child's medical conditions, how to manage those conditions, how to get in touch with your child's doctors, allergies, information on medications (names, dosages, and administration instructions), preferences (food and other) or special needs, daily routines and activities, friends, and details about routines that are important to support behavioral and emotional health.
- Learn if your child's healthcare providers, including doctors and therapists, have new ways to be contacted or new ways of providing appointments. If they offer telemedicine visits, find out how those are arranged and any additional information you need.
- If your child receives any support care services in the home that need to be continued, make plans for what you will do if those direct care providers get sick, or if persons in your household are sick.
- Discuss with the support care agencies and the providers ways to minimize risk for exposure to the virus that causes COVID-19.
 - If your child or other persons in your household are sick with COVID-19 and are able to recover at home, inform your direct care providers and consider postponing or rescheduling services until the criteria for [discontinuing home isolation](#) have been met.
 - Ask service providers if they are experiencing any [symptoms of COVID-19](#), or if they have been in contact with someone who has COVID-19.
 - Tell the service provider to:
 - Wear a [cloth face covering](#) if they will be close (less than 6 feet) to you or persons in your household. Their cloth face covering helps protect you if they are infected but do not have symptoms.
 - Ask them to wash their hands with soap and water or, if unavailable, use hand sanitizer with at least 60% alcohol when they enter your home, before and after helping your child (dressing, bathing/showering, transferring, toileting and/or diapering, feeding), after handling tissues, and after changing linens or doing laundry. [Learn more about proper handwashing](#).
 - Service providers and families should:
 - Routinely clean and disinfect frequently touched objects and surfaces (counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, bedside tables), and equipment such as wheelchairs, scooters, walkers, oxygen tanks and tubing, communication boards, and other assistive devices. Refer to CDC's recommendations for [Cleaning and Disinfecting Your Home](#).

What can I do if my child has difficulties adjusting to new routines and following recommendations? +

Helping children understand and follow recommendations, like social distancing and [wearing cloth face coverings](#), can be challenging if your child has intellectual disabilities, sensory issues, or other special healthcare needs.

- Keeping children at home and sheltering in place can lower stress created by social distancing and cloth face covering recommendations. Reach out to others for help in running essential errands.

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- Behavioral techniques can be used to address behavioral challenges and to develop new routines. These include social stories, video modeling, picture schedules, and visual cues. Try rewarding your child in small ways with his or her favorite non-food treat or activities to help switch routines and to follow recommendations.
 - Many of the organizations you turn to for information and support around your child's complex, chronic medical condition may have information on their websites to help families address issues related to COVID-19.
 - Your child's therapist(s) and/or teachers may also have resources to help successfully introduce new routines to your child.

Additional information on [caring for children](#) and on [child development specific conditions](#) are available.

How can my family cope with the added stress?

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Supporting children with special healthcare needs can put additional demands and stress on families, especially during emergency situations. You have likely found ways to manage the stress and challenges unique to your family's situation. It is important to continue your family's coping methods, including reaching out to other family members, friends, support groups, and organizations that have been helpful in the past.

See information on ways to cope with stress (such as [visiting parks, trails, or open spaces](#)) and [making your family stronger](#).

If you, or someone you care about, are feeling overwhelmed with emotions like sadness, depression, or anxiety, or feel like you want to harm yourself or others:

- Call 911
- Visit the [Disaster Distress Helpline](#) [🔗](#), call 1-800-985-5990, or text TalkWithUs to 66746
- Visit the [National Domestic Violence Hotline](#) [🔗](#) or call 1-800-799-7233 and TTY 1-800-787-3224

What if my child or someone else in the home is sick with symptoms of COVID-19?

+

If your child with special healthcare needs becomes sick with [symptoms of COVID-19](#), contact your child's healthcare provider. If your child has new or worsening [emergency warning signs](#), such as trouble breathing, pain or pressure in the chest, confusion or inability to wake them up, or bluish lips or face, call 911. If you think your child may have COVID-19, notify the operator so that first responders may be appropriately prepared to protect themselves and others.

Notify your child's healthcare provider if someone else in your house becomes sick with COVID-19, so they can provide any advice specific for your child.

See additional information if [someone in the home is sick with COVID-19](#) or suspected of having COVID-19.

What if my child's symptoms of their underlying medical condition or complex, chronic medical condition get worse?

+

- Call your child's healthcare provider if you have any concerns about your child's medical conditions. If you need emergency help, call 911.
- Emergency departments have infection prevention plans to protect you and your child from getting COVID-19 if your child needs care for medical conditions not related to COVID-19. Do not delay getting emergency care for your child's underlying condition or complex medical condition because you are afraid of getting exposed to COVID-19 when visiting the healthcare setting.

What if my child needs to go to the hospital?

+

If your child's healthcare provider tells you to go to the hospital for any health problem, including COVID-19:

- Ask the healthcare provider to let the hospital know you are coming and to share the important information the hospital will need to know to care for your child.
- Visiting policies may have changed due to COVID-19. If your child's hospital policy does not allow an adult to stay with a child, ask your child's healthcare provider for a statement explaining your child's need for a familiar adult to be present.
- Bring your care plans/emergency notebook with you along with paper and pen to write down questions you have during your time at the hospital.

Preparing Your Home and Family for COVID-19

How can my family and I prepare for COVID-19?



Create a household plan of action to help protect your health and the health of those you care about in the event of an outbreak of COVID-19 in your community:

- Talk with the people who need to be included in your plan, and discuss [what to do if a COVID-19 outbreak occurs in your community](#).
- Plan ways to care for those who might be at greater risk for serious complications, particularly [older adults and those with severe chronic medical](#) conditions like heart, lung or kidney disease.
 - Make sure they have access to several weeks of medications and supplies in case you need to stay home for prolonged periods of time.
- Get to know your neighbors and find out if your neighborhood has a website or social media page to stay connected.
- Create a list of local organizations that you and your household can contact in the event you need access to information, healthcare services, support, and resources.
- Create an emergency contact list of family, friends, neighbors, carpool drivers, health care providers, teachers, employers, the local public health department, and other community resources.

What steps can my family take to reduce our risk of getting COVID-19?



Practice everyday preventive actions to help reduce your risk of getting sick and remind everyone in your home to do the same. These actions are especially important for older adults and people who have severe chronic medical conditions:

- Avoid close contact with people who are sick.
- Stay home when you are sick, except to get medical care.
- Cover your coughs and sneezes with a tissue and throw the tissue in the trash.
- Wash your hands often with soap and water for at least 20 seconds, especially after blowing your nose, coughing, or sneezing; going to the bathroom; and before eating or preparing food.
- If soap and water are not readily available, use an alcohol-based hand sanitizer with at least 60% alcohol. Always wash hands with soap and water if hands are visibly dirty.
- Clean and disinfect frequently touched surfaces and objects (e.g., tables, countertops, light switches, doorknobs, and cabinet handles).
- Launder items, including washable plush toys, as appropriate and in accordance with the manufacturer's instructions. If possible, launder items using the warmest appropriate water setting for the items and dry items completely. Dirty laundry from an ill person can be washed with other people's items.

What should I do if someone in my house gets sick with COVID-19? +

Most people who get COVID-19 will be able to recover at home. [CDC has directions](#) for people who are recovering at home and their caregivers, including:

- Stay home when you are sick, except to get medical care.

When to Seek Medical Attention

If you develop any of these **emergency warning signs*** for COVID-19 get **medical attention immediately**:

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion or inability to arouse
- Bluish lips or face

*This list is not all inclusive. Please consult your medical provider for any other symptoms that are severe or concerning to you.

Call 911 if you have a medical emergency: Notify the operator that you have, or think you might have, COVID-19. If possible, put on a cloth face covering before medical help arrives.

- Use a separate room and bathroom for sick household members (if possible).
- Wash your hands often with soap and water for at least 20 seconds, especially after blowing your nose, coughing, or sneezing; going to the bathroom; and before eating or preparing food.
- If soap and water are not readily available, use an alcohol-based hand sanitizer with at least 60% alcohol. Always wash hands with soap and water if hands are visibly dirty.
- Provide your sick household member with clean disposable facemasks to wear at home, if available, to help prevent spreading COVID-19 to others.
- [Clean the sick room and bathroom](#), as needed, to avoid unnecessary contact with the sick person.
- Avoid sharing personal items like utensils, food, and drinks.

How can I prepare in case my child's school, child care facility, or university is dismissed? +

Talk to the [school or facility](#) about their emergency operations plan. Understand the plan for continuing education and social services (such as student meal programs) during school dismissals. If your child attends a [college or university](#), encourage them to learn about the school's plan for a COVID-19 outbreak.

How can I prepare for COVID-19 at work? +

Plan for potential changes at your workplace. Talk to your employer about their emergency operations plan, including sick-leave policies and telework options. [Learn how businesses and employers can plan for and respond to COVID-19.](#)

Should I use soap and water or a hand sanitizer to protect against COVID-19? +

Handwashing is one of the best ways to protect yourself and your family from getting sick. Wash your hands often with soap and water for at least 20 seconds, especially after blowing your nose, coughing, or sneezing; going to the bathroom; and before eating or preparing food. If soap and water are not readily available, use an alcohol-based hand sanitizer with at least 60% alcohol.

What cleaning products should I use to protect against COVID-19? +

Clean and disinfect frequently touched surfaces such as tables, doorknobs, light switches, countertops, handles, desks,

phones, keyboards, toilets, faucets, and sinks. If surfaces are dirty, clean them using detergent or soap and water prior to disinfection. To disinfect, most common EPA-registered household disinfectants will work. See CDC's recommendations [for household cleaning and disinfection](#).

Should I make my own hand sanitizer if I can't find it in the stores?

+

CDC recommends handwashing with soap and water for at least 20 seconds or, using alcohol-based hand sanitizer with at least 60% alcohol when soap and water are not available. These actions are part of [everyday preventive actions](#) individuals can take to slow the spread of respiratory diseases like COVID-19.

- When washing hands, you can use plain soap or antibacterial soap. Plain soap is as effective as antibacterial soap at removing germs.
- If soap and water are not readily available, you can use an FDA-approved alcohol-based [hand sanitizer](#) that contains at least 60% alcohol. You can tell if the sanitizer contains at least 60% alcohol by looking at the product label.

CDC does not encourage the production and use of homemade hand sanitizer [products because of concerns over the correct use of the ingredients](#) [↗](#) and the need to work under sterile conditions to make the product. Local industries that are looking into producing hand sanitizer to fill in for commercial shortages can refer to the [World Health Organization guidance](#) [📄](#) [↗](#). Organizations should revert to the use of commercially produced, FDA-approved product once such supplies again become available.

- To be effective against killing some types of germs, [hand sanitizers](#) need to have a strength of at least 60% alcohol and be used when hands are not visibly dirty or greasy.
- Do not rely on "Do It Yourself" or "DIY" recipes based solely on essential oils or formulated without correct compounding practices.
- Do not use hand sanitizer to disinfect frequently touched surfaces and objects. [See CDC's information for cleaning and sanitizing your home](#).

[See FAQs about hand hygiene for healthcare personnel responding to COVID-2019.](#)

In Case of an Outbreak in Your Community

What should I do if there is an outbreak in my community?

+

During an outbreak, stay calm and put your preparedness plan to work. Follow the steps below:

[Protect yourself and others.](#)

- Stay home if you are sick. Keep away from people who are sick. Limit close contact with others as much as possible (about 6 feet).

Put your household plan into action.

- **Stay informed about the local COVID-19 situation.** Be aware of temporary school dismissals in your area, as this may affect your household's daily routine.
- **Continue practicing everyday preventive actions.** Cover coughs and sneezes with a tissue and wash your hands often with soap and water for at least 20 seconds. If soap and water are not available, use a hand sanitizer that contains 60% alcohol. Clean frequently touched surfaces and objects daily using a regular household detergent and water.
- **Notify your workplace as soon as possible if your regular work schedule changes.** Ask to work from home or take leave if you or someone in your household gets sick with [COVID-19 symptoms](#), or if your child's school is dismissed.

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leave if you or someone in your household gets sick with [COVID-19 symptoms](#), or if your child's school is dismissed temporarily. [Learn how businesses and employers can plan for and respond to COVID-19.](#)

- **Stay in touch with others by phone or email.** If you have a chronic medical condition and live alone, ask family, friends, and health care providers to check on you during an outbreak. Stay in touch with family and friends, especially those at increased risk of developing severe illness, such as older adults and people with severe chronic medical conditions.

Will schools be dismissed if there is an outbreak in my community? +

Depending on the situation, public health officials may recommend community actions to reduce exposures to COVID-19, such as school dismissals. Read or watch local media sources that report school dismissals or and watch for communication from your child's school. If schools are dismissed temporarily, discourage students and staff from gathering or socializing anywhere, like at a friend's house, a favorite restaurant, or the local shopping mall.

Should I go to work if there is an outbreak in my community? +

Follow the advice of your local health officials. Stay home if you can. Talk to your employer to discuss working from home, taking leave if you or someone in your household gets sick with [COVID-19 symptoms](#), or if your child's school is dismissed temporarily. Employers should be aware that more employees may need to stay at home to care for sick children or other sick family members than is usual in case of a community outbreak.

Will businesses and schools close or stay closed in my community and for how long? Will there be a "stay at home" or "shelter in place" order in my community? +

CDC makes recommendations, shares information, and provides guidance to help slow down the spread of COVID-19 in the U.S. including guidance for schools and businesses. CDC regularly shares information and provides assistance to state, local, territorial, and tribal health authorities. These local authorities are responsible for making decisions including "stay at home" or "shelter in place." What is included in these orders and how they are implemented are also decided by local authorities. These decisions may also depend on many factors such as how the virus is spreading in a certain community.

Please [contact your local health department](#) to find out more.

Can CDC tell me or my employer when it is safe for me to go back to work/school after recovering from or being exposed to COVID-19? +

CDC cannot address the policies of any business or organization. CDC shares recommendations based on the best available science to help people make decisions that improve their health and safety. Employers, schools, and organizations may decide to visibly screen for symptoms or perform on-site symptom checks.

If your employer, school, or organization requires you to present documentation regarding COVID-19 before returning to work or school (for example, proof of a negative COVID-19 lab test, if a test was performed, contact your healthcare provider to ask if he or she would be able to provide a form of documentation for you. Documentation of self-isolation and self-quarantine may not be possible.

CDC has guidance for when and how people with COVID-19 can discontinue home isolation: <https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html>.

CDC also has guidance for what people should do if they think they have been exposed or feel sick: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/social-distancing.html>.

In all cases, **follow the guidance of your healthcare provider and local health department.** Local decisions depend on local circumstances.

Symptoms & Testing

What are the symptoms and complications that COVID-19 can cause? +

Current symptoms reported for patients with COVID-19 have included mild to severe respiratory illness with fever¹, cough, and difficulty breathing. Read about [COVID-19 Symptoms](#).

Should I be tested for COVID-19? +

Not everyone needs to be tested for COVID-19. For information about testing, see [Testing for COVID-19](#).

Where can I get tested for COVID-19? +

The process and locations for testing vary from place to place. Contact your state, local, tribal, or territorial department for more information, or reach out to a medical provider. State and local public health departments have received tests from CDC while medical providers are getting tests developed by commercial manufacturers. While supplies of these tests are increasing, it may still be difficult to find someplace to get tested. See [Testing for COVID-19](#) for more information.

Can a person test negative and later test positive for COVID-19? +

Using the CDC-developed diagnostic test, a negative result means that the virus that causes COVID-19 was not found in the person's sample. In the early stages of infection, it is possible the virus will not be detected.

For COVID-19, a negative test result for a sample collected while a person has symptoms likely means that the COVID-19 virus is not causing their current illness.

What kind of test is being used to diagnose if I have COVID-19? +

There are actually many tests being used to diagnose COVID-19 that the U.S. Food & Drug Administration (FDA) has authorized for use during the current emergency. All of these diagnostic tests identify the virus in samples from the respiratory system, such as from nasal or nasopharyngeal swabs. Some tests are conducted at the testing site you visit, and results are available to you within minutes. Other tests must be sent to a laboratory to analyze, a process that takes 1-2 days once the lab receives your samples.

Locations and types of testing sites vary depending on where you live (see question: Where can I get tested). Check with your testing site to learn which test it uses. You can find a [patient information sheet about each test on the FDA website](#) [↗](#).

In the coming weeks, healthcare providers in most states will begin offering home collection kits, which the U.S. Food and Drug Administration (FDA) has authorized for use during the current emergency. A healthcare provider will need to give you the approved kit – the Pixel by LabCorp COVID-19 test home collection kit. You will be able to collect your sample (a nasal swab) at home and then send your sample to a laboratory for analysis.

For more information please see [FDA's most recent press release](#) [↗](#).

What is serology testing? And can I be tested using this method? +

Serology testing checks a sample of a person's blood to look for antibodies to SARS-CoV-2, the virus that causes COVID-19. These antibodies are produced when someone has been infected, so a positive result from this test indicates that person was previously infected with the virus.

CDC is working with other federal agencies to evaluate the performance of commercially manufactured serology tests that are becoming increasingly available from healthcare providers. This evaluation is expected to be completed in late April.

We do not know yet if the antibodies that result from infection with SARS-CoV-2 can protect someone from reinfection with this virus or how long antibodies to the virus will protect someone. Scientists are conducting research to answer those questions.

Serology tests may not be able to tell you if you are currently infected because it typically takes 1 to 2 weeks to develop antibodies to SARS-CoV-2. To tell if you are currently infected, you would need a test that identifies the virus in samples from your upper respiratory system, such as a nasopharyngeal swab.

If I have recovered from COVID-19, will I be immune to it? +

CDC and partners are investigating to determine if you can get sick with COVID-19 more than once. At this time, we are not sure if you can become re-infected. Until we know more, continue to take steps to protect yourself and others.

Higher Risk

Who is at higher risk for serious illness from COVID-19? +

COVID-19 is a new disease and there is limited information regarding risk factors for severe disease. Based on currently available information and clinical expertise, **older adults** and **people of any age who have serious underlying medical conditions** might be at higher risk for severe illness from COVID-19.

Based on what we know now, those at high-risk for severe illness from COVID-19 are:

- [People aged 65 years and older](#)
- People who live in a nursing home or long-term care facility

People of all ages with underlying medical conditions, particularly if not well controlled, including:

- People with chronic lung disease or moderate to severe asthma
- People who have serious heart conditions
- People who are immunocompromised
 - Many conditions can cause a person to be immunocompromised, including cancer treatment, smoking, bone marrow or organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, and prolonged use of corticosteroids and other immune weakening medications
- People with severe obesity (body mass index [BMI] ≥ 40)
- People with diabetes
- People with chronic kidney disease undergoing dialysis
- People with liver disease

What should people at higher risk of serious illness with COVID-19 do? +

If you are at higher risk of getting very sick from COVID-19, you should:

- Stock up on supplies
- Take everyday precautions to keep space between yourself and others
- When you go out in public, keep away from others who are sick
- Limit close contact and wash your hands often
- Avoid crowds, cruise travel, and non-essential travel

If there is an outbreak in your community, stay home as much as possible. Watch for symptoms and emergency signs. If you get sick, stay home and call your doctor. More information on how to prepare, what to do if you get sick, and how communities and caregivers can support those at higher risk is available on [People at Risk for Serious Illness from COVID-19](#).

How were the underlying conditions for people considered higher risk of serious illness with COVID-19 selected? +

This list is based on:

- What we are learning from the outbreak in other countries and in the United States.
- What we know about risk from other respiratory infections, like flu.

As CDC gets more information about COVID-19 cases here in the United States, we will update this list as needed.

Are there any medications I should avoid taking if I have COVID-19? +

Currently, there is no evidence to show that taking ibuprofen or naproxen can lead to a more severe infection of COVID-19.

People with high blood pressure should take their blood pressure medications, as directed, and work with their healthcare provider to make sure that their blood pressure is as well controlled as possible. Any changes to your medications should only be made by your healthcare provider.

What about underlying medical conditions that are not included on this list? +

Based on available information, adults aged 65 years and older and people of any age with underlying medical conditions included on this list are at higher risk for severe illness and poorer outcomes from COVID-19. CDC is collecting and analyzing data regularly and will update the list when we learn more. People with underlying medical conditions not on the list might also be at higher risk and should consult with their healthcare provider if they are concerned.

We encourage all people, regardless of risk, to:

- Take [steps](#) to protect yourself and others.
- **Call** your healthcare provider if you are [sick](#) with a fever, cough, or shortness of breath.
- Follow CDC [travel](#) guidelines and the recommendations of your state and local health officials.

What does a well-controlled health condition mean? +

Generally, well-controlled means that your condition is stable, not life-threatening, and laboratory assessments and other findings are as similar as possible to those without the health condition. You should talk with your healthcare provider if you have a question about your health or how your health condition is being managed.

What does more severe illness mean? +

Severity typically means how much impact the illness or condition has on your body's function. You should talk with your healthcare provider if you have a question about your health or how your health condition is being managed.

Are people with disabilities at higher risk? +

Most people with disabilities are not inherently at higher risk for becoming infected with or having severe illness from

COVID-19. Some people with physical limitations or other disabilities might be at a higher risk of infection because of their underlying medical condition.

- People with certain disabilities might experience higher rates of chronic health conditions that put them at higher risk of serious illness and poorer outcomes from COVID-19. Adults with disabilities are three times more likely to have heart disease, stroke, diabetes, or cancer than adults without disabilities.

You should talk with your healthcare provider if you have a question about your health or how your health condition is being managed.

Healthcare Professionals and Health Departments

What should healthcare professionals and health departments do? +

For recommendations and guidance on persons under investigation; infection control, including personal protective equipment guidance; home care and isolation; and case investigation, see [Information for Healthcare Professionals](#). For information on specimen collection and shipment, see [Information for Laboratories](#). For information for public health professional on COVID-19, see [Information for Public Health Professionals](#).

See also: [FAQs for Healthcare Professionals](#)

COVID-19 and Funerals

Am I at risk if I go to a funeral or visitation service for someone who died of COVID-19? +



There is currently no known risk associated with being in the same room at a funeral or visitation service with the body of someone who died of COVID-19.

Am I at risk if I touch someone who died of COVID-19 after they have passed away? +



COVID-19 is a new disease and **we are still learning how it spreads**. The virus that causes COVID-19 is thought to mainly spread from close contact (i.e., within about 6 feet) with a person who is currently sick with COVID-19. The virus likely spreads primarily through respiratory droplets produced when an infected person coughs or sneezes, similar to how influenza and other respiratory infections spread. These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs. This type of spread is not a concern after death.



It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the main way the virus spreads.

People should consider not touching the body of someone who has died of COVID-19. Older people and people of all ages with severe underlying health conditions are at higher risk of developing serious COVID-19 illness. There may be less of a chance of the virus spreading from certain types of touching, such as holding the hand or hugging after the body has been prepared for viewing. Other activities, such as kissing, washing, and shrouding should be avoided before, during, and after the body has been prepared, if possible. If washing the body or shrouding are important religious or cultural practices, families are encouraged to work with their community's cultural and religious leaders and funeral home staff on how to reduce their exposure as much as possible. At a minimum, people conducting these activities should wear disposable gloves. If splashing of fluids is expected, additional personal protective equipment (PPE) may be required (such as disposable gown, faceshield or goggles and N-95 respirator).

Cleaning should be conducted in accordance with manufacturer's instructions for all cleaning and disinfection products (e.g., concentration, application method and contact time). [Products with EPA-approved emerging viral pathogens claims](#)   are expected to be effective against COVID-19 based on data for harder to kill viruses. After removal of PPE, perform [hand hygiene](#) by washing hands with soap and water for at least 20 seconds or using an alcohol-based hand sanitizer that contains at least 60% alcohol if soap and water are not available. Soap and water should be used if the hands are visibly soiled.

What do funeral home workers need to know about handling decedents who had COVID-19? +


A funeral or visitation service can be held for a person who has died of COVID-19. Funeral home workers should follow their routine infection prevention and control precautions when handling a decedent who died of COVID-19. If it is necessary to transfer a body to a bag, follow [Standard Precautions](#), including additional personal protective equipment (PPE) if splashing of fluids is expected. For transporting a body after the body has been bagged, disinfect the outside of the bag with a [product with EPA-approved emerging viral pathogens claims](#)   expected to be effective against COVID-19 based on data for harder to kill viruses. Follow the manufacturer's instructions for all cleaning and disinfection products (e.g., concentration, application method and contact time, etc.). Wear disposable nitrile gloves when handling the body bag.

Embalming can be conducted. During embalming, follow Standard Precautions including the use of additional PPE if splashing is expected (e.g. disposable gown, faceshield or goggles and N95 respirator). Wear appropriate respiratory protection if any procedures will generate aerosols or if required for chemicals used in accordance with the manufacturer's label. Wear heavy-duty gloves over nitrile disposable gloves if there is a risk of cuts, puncture wounds, or other injuries that break the skin. Additional information on how to safely conduct aerosol-generating procedures is in the [CDC's Postmortem Guidance](#). Cleaning should be conducted in accordance with manufacturer's instructions. [Products with EPA-approved emerging viral pathogens claims](#)   are expected to be effective against COVID-19 based on data for harder to kill viruses. Follow the manufacturer's instructions for all cleaning and disinfection products (e.g., concentration, application method and contact time).

After cleaning and removal of PPE, perform [hand hygiene](#) by washing hands with soap and water for at least 20 seconds or using an alcohol-based hand sanitizer that contains at least 60% alcohol if soap and water is not available. Soap and water should be used if the hands are visibly soiled.

Decedents with COVID-19 can be buried or cremated, but check for any additional state and local requirements that may dictate the handling and disposition of the remains of individuals who have died of certain infectious diseases.

What should I do if my family member died from COVID-19 while overseas? +

When a US citizen dies outside the United States, the deceased person's next of kin or legal representative should notify US consular officials at the Department of State. Consular personnel are available 24 hours a day, 7 days a week, to provide assistance to US citizens for overseas emergencies. If a family member, domestic partner, or legal representative is in a different country from the deceased person, he or she should call the Department of State's Office of Overseas Citizens Services in Washington, DC, from 8 am to 5 pm Eastern time, Monday through Friday, at 888-407-4747 (toll-free) or 202-501-4444. For emergency assistance after working hours or on weekends and holidays, call the Department of State switchboard at 202-647-4000 and ask to speak with the Overseas Citizens Services duty officer. In addition, the [US embassy](#)  closest to or in the country where the US citizen died can provide assistance.

My family member died from COVID-19 while overseas. What are the requirements for returning the body to the United States? +

CDC does not require an autopsy before the remains of a person who died overseas are returned to the United States. Depending on the circumstances surrounding the death, some countries may require an autopsy. Sources of support to the family include the local consulate or embassy, travel insurance provider, tour operator, faith-based and aid organizations, and the deceased's employer. There likely will need to be an official identification of the body and official documents issued by the consular office.

CDC requirements for importing human remains depend upon if the body has been embalmed, cremated, or if the person died from a [quarantinable communicable disease](#).

At this time, COVID-19 is a quarantinable communicable disease in the United States and the remains must meet the standards for importation found in 42 Code of Federal Regulations Part 71.55 and may be cleared, released, and authorized for entry into the United States only under the following conditions:

- The remains are cremated; OR
- The remains are properly embalmed and placed in a hermetically sealed casket; OR
- The remains are accompanied by a permit issued by the CDC Director. The CDC permit (if applicable) must accompany the human remains at all times during shipment.
 - Permits for the importation of the remains of a person known or suspected to have died from a quarantinable communicable disease may be obtained through the CDC Division of Global Migration and Quarantine by calling the CDC Emergency Operations Center at 770-488-7100 or emailing dgmqpolicyoffice@cdc.gov.

Please see [CDC's evidence](#) for additional information.

What CDC is Doing

What is CDC doing about COVID-19? +

CDC is working with other federal partners in a whole-of-government response. This is an emerging, rapidly evolving situation and CDC will continue to provide updated information as it becomes available. CDC works 24/7 to protect people's health. More information about [CDC's response to COVID-19](#) is available online.

COVID-19 and Animals

Can I get COVID-19 from my pets or other animals? +

At this time, there is no evidence that animals play a significant role in spreading the virus that causes COVID-19. Based on the limited information available to date, the risk of animals spreading COVID-19 to people is considered to be low. A small number of pets have been reported to be infected with the virus that causes COVID-19, mostly after contact with people with COVID-19.

Pets have other types of coronaviruses that can make them sick, like canine and feline coronaviruses. These other coronaviruses cannot infect people and are not related to the current COVID-19 outbreak.

However, since animals can spread other diseases to people, it's always a good idea to practice [healthy habits](#) around pets and other animals, such as washing your hands and maintaining good hygiene. For more information on the many benefits of pet ownership, as well as staying safe and healthy around animals including pets, livestock, and wildlife, visit CDC's [Healthy Pets, Healthy People website](#).

Do I need to get my pet tested for COVID-19? +

No. At this time, routine testing of animals for COVID-19 is not recommended.

Can animals carry the virus that causes COVID-19 on their skin or fur? +

Although we know certain bacteria and fungi can be carried on fur and hair, there is no evidence that viruses, including the virus that causes COVID-19, can spread to people from the skin, fur, or hair of pets.

However, because animals can sometimes carry other germs that can make people sick, it's always a good idea to practice [healthy habits](#) around pets and other animals, including washing hands before and after interacting with them.

Should I avoid contact with pets or other animals if I am sick with COVID-19?



We are still learning about this virus, but it appears that it can spread from people to animals in some situations. Until we learn more about this new coronavirus, you should restrict contact with pets and other animals while you are sick with COVID-19, just like you would with people. When possible, have another member of your household care for your animals while you are sick. If you are sick with COVID-19, avoid contact with your pet, including

- Petting
- Snuggling
- Being kissed or licked
- Sharing food or bedding

If you must care for your pet or be around animals while you are sick, wash your hands before and after you interact with pets and wear a cloth face covering.

What animals can get COVID-19?



We don't know for sure which animals can be infected with the virus that causes COVID-19. CDC is aware of a small number of pets, including dogs and cats, reported to be infected with the virus that causes COVID-19, mostly after close contact with people with COVID-19. A tiger at a zoo in New York has also tested positive for the virus.

Recent research shows that ferrets, cats, and golden Syrian hamsters can be experimentally infected with the virus and can spread the infection to other animals of the same species in laboratory settings. Pigs, chickens, and ducks did not become infected or spread the infection based on results from these studies. Data from one study suggested dogs are not as likely to become infected with the virus as cats and ferrets. These findings were based on a small number of animals, and do not show whether animals can spread infection to people.

At this time, there is no evidence that animals play a significant role in spreading the virus that causes COVID-19. Based on the limited information available to date, the risk of animals spreading COVID-19 to people is considered to be low. Further studies are needed to understand if and how different animals could be affected by the virus that causes COVID-19 and the role animals may play in the spread of COVID-19.

Should I worry about my pet cat?



We are still learning about this virus and how it spreads, but it appears it can spread from humans to animals in some situations. CDC is aware of a small number of pets, including cats, reported to be infected with the virus that causes COVID-19, mostly after close contact with people with COVID-19. Most of these animals had contact with a person with COVID-19. A tiger at a New York zoo has also tested positive for the virus that causes COVID-19.

At this time, there is no evidence that animals play a significant role in spreading the virus that causes COVID-19. Based on the limited data available, the risk of animals spreading COVID-19 to people is considered to be low. The virus that causes COVID-19 spreads mainly from person to person, typically through respiratory droplets from coughing, sneezing, or talking.

People sick with COVID-19 should isolate themselves from other people and animals, including pets, during their illness until we know more about how this virus affects animals. If you must care for your pet or be around animals while you are sick, wear a cloth face covering and wash your hands before and after you interact with pets.

Can I walk my dog?



Walking a dog is important for both animal and human health and well-being. Walk dogs on a leash, maintaining at least 6 feet (2 meters) from other people and animals, do not gather in groups, and stay out of crowded places and avoid mass gatherings. Do not go to dog parks or public places where a large number of people and dogs gather. To help maintain social distancing, do not let other people pet your dog when you are out for a walk.

What should I do if my pet gets sick and I think it's COVID-19?



There is a small number of animals around the world reported to be infected with the virus that causes COVID-19, mostly after having contact with a person with COVID-19. Talk to your veterinarian about any health concerns you have about your pets.

If your pet gets sick after contact with a person with COVID-19, **do not take your pet to the veterinary clinic yourself.** Call your veterinarian and let them know the pet was around a person with COVID-19. Some veterinarians may offer telemedicine consultations or other plans for seeing sick pets. Your veterinarian can evaluate your pet and determine the next steps for your pet's treatment and care.

Why are animals being tested when many people can't get tested?

+

Animals are only being tested in very rare circumstances. Routine testing of animals is not recommended at this time, and any tests done on animals are done on a case by case basis. For example, if the pet of a COVID-19 patient has a new, concerning illness with symptoms similar to those of COVID-19, the animal's veterinarian might consult with public health and animal health officials to determine if testing is needed.

Are pets from a shelter safe to adopt?



+

Based on the limited information available to date, the risk of animals spreading COVID-19 to people is considered to be low. There is no reason to think that any animals, including shelter pets, play a significant role in spreading the virus that causes COVID-19.

What about imported animals or animal products?

+

CDC does not have any evidence to suggest that imported animals or animal products pose a risk for spreading COVID-19 in the United States. This is a rapidly evolving situation and information will be updated as it becomes available. CDC, the U. S. Department of Agriculture (USDA), and the U.S. Fish and Wildlife Service (FWS) play distinct but complementary roles in regulating the importation of live animals and animal products into the United States.

- [CDC regulates](#) animals and animal products that pose a threat to human health,
- [USDA regulate](#)  animals and animal products that pose a threat to agriculture; and
- [FWS regulates](#)  importation of endangered species and wildlife that can harm the health and welfare of humans, the interests of agriculture, horticulture, or forestry, and the welfare and survival of wildlife resources.


Can I travel to the United States with dogs or import dogs into the United States during the COVID-19 outbreak?

+

Please refer to [CDC's requirements for bringing a dog to the United States](#). The current [requirements for rabies vaccination](#) apply to dogs imported from high-risk countries for rabies.

What precautions should be taken for animals that have recently been imported from outside the United States (for example, by shelters, rescues, or as personal pets)?

+

Imported animals will need to meet [CDC](#) and [USDA](#)  requirements for entering the United States. At this time, there is no evidence that companion animals, including pets and service animals, can spread the virus that causes COVID-19. As with any animal introduced to a new environment, animals recently imported should be observed daily for signs of illness. If an animal becomes ill, the animal should be examined by a veterinarian. Call your local veterinary clinic **before** bringing the animal into the clinic and let them know that the animal was recently imported from another country.

This is a rapidly evolving situation and information will be updated as it becomes available.

Can wild animals spread the virus that causes COVID-19 to people or pets?

+

Currently, there is no evidence to suggest the virus that causes COVID-19 is circulating in free-living wildlife in the

United States, or that wildlife might be a source of infection for people in the United States. The first case of a wild animal testing positive for the virus in the United States was a tiger with a respiratory illness at a zoo in New York City. However, this tiger was in a captive zoo environment, and public health officials believe the tiger became sick after being exposed to a zoo employee who was infected and spreading the virus.

If a wild animal were to become infected with the virus, we don't know whether the infection could then spread among wildlife or if it could spread to other animals, including pets. Further studies are needed to understand if and how different animals, including wildlife, could be affected by COVID-19. Because wildlife can carry other diseases, even without looking sick, it is always important to enjoy wildlife from a distance.

Take steps to prevent getting sick from wildlife in the United States:

- Keep your family, including pets, a safe distance away from wildlife.
- Do not feed wildlife or touch wildlife droppings.
- Always wash your hands and supervise children washing their hands after working or playing outside.
- Leave orphaned animals alone. Often, the parents are close by and will return for their young.
- Consult your state wildlife agency's guidance if you are preparing or consuming legally harvested game meat.
- Do not approach or touch a sick or dead animal – contact your state wildlife agency instead.

Can bats in United States get the virus that causes COVID-19, and can they spread it back to people? +

Other coronaviruses have been found in North American bats in the past, but there is currently no evidence that the virus that causes COVID-19 is present in any free-living wildlife in the United States, including bats. In general, coronaviruses do not cause illness or death in bats, but we don't yet know if this new coronavirus would make North American species of bats sick. Bats are an important part of natural ecosystems, and their populations are already declining in the United States. Bat populations could be further threatened by the disease itself or by harm inflicted on bats resulting from a misconception that bats are spreading COVID-19. However, there is no evidence that bats in the United States are a source of the virus that causes COVID-19 for people. Further studies are needed to understand if and how bats could be affected by COVID-19.

See also: [Animals and COVID-19](#)

Footnotes

¹Fever may be subjective or confirmed

²Close contact is defined as—

a) being within approximately 6 feet (2 meters) of a COVID-19 case for a prolonged period of time; close contact can occur while caring for, living with, visiting, or sharing a health care waiting area or room with a COVID-19 case

– or –

b) having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on)

If such contact occurs while not wearing recommended personal protective equipment or PPE (e.g., gowns, gloves, NIOSH-certified disposable N95 respirator, eye protection), criteria for PUI consideration are met"

See CDC's updated [Interim Healthcare Infection Prevention and Control Recommendations for Persons Under Investigation for 2019 Novel Coronavirus](#).

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Data to inform the definition of close contact are limited. Considerations when assessing close contact include the duration of exposure (e.g., longer exposure time likely increases exposure risk) and the clinical symptoms of the person with COVID-19 (e.g., coughing likely increases exposure risk as does exposure to a severely ill patient). Special consideration should be given to those exposed in health care settings.

Page last reviewed: April 22, 2020

UNITED STATES DISTRICT COURT
CENTRAL DISTRICT OF CALIFORNIA
CIVIL MINUTES—GENERAL

Case No. **EDCV 20-755 JGB (KKx)** Date April 23, 2020

Title ***Wendy Gish, et al. v. Gavin Newsom, et al.***

Present: The Honorable **JESUS G. BERNAL, UNITED STATES DISTRICT JUDGE**

MAYNOR GALVEZ

Deputy Clerk

Not Reported

Court Reporter

Attorney(s) Present for Plaintiff(s):

None Present

Attorney(s) Present for Defendant(s):

None Present

Proceedings: Order DENYING Plaintiffs' Emergency Request for Temporary Restraining Order (Dkt. No. 8) (IN CHAMBERS)

Before the Court is an Emergency Request for Temporary Restraining Order filed by Plaintiffs Patrick Scales, Wendy Gish, James Dean Moffatt, and Brenda Wood. ("Request," Dkt. No. 8.) The Court held a hearing on the Request on April 22, 2020. After considering the papers filed in support of and in opposition to the Request and argument presented at the hearing, the Court DENIES the Request.

I. BACKGROUND

On April 13, 2020, Plaintiffs filed their complaint against Defendants Xavier Becerra and Gavin Newsom (collectively, "State Defendants"); Chad Bianco, Jeff Hewitt, Kevin Jeffries, George Johnson, Cameron Kaiser, V. Manuel Perez, Karen Spiegel, and Chuck Washington (collectively, "Riverside Defendants"); Erin Gustafson, John McMahon, Robert A. Lovingood, Janice Rutherford, Dawn Rowe, Curt Hagman, and Josie Gonzales (collectively, "San Bernardino Defendants"). ("Complaint," Dkt. No. 1.) The Complaint alleges eleven causes of action: (1) Violation of Free Exercise Clause of First Amendment to U.S. Constitution; (2) Violation of Establishment Clause of First Amendment to U.S. Constitution; (3) Violation of Free Speech Clause of First Amendment to U.S. Constitution; (4) Violation of First Amendment Freedom of Assembly Clause; (5) Violation of Due Process Clause of Fourteenth Amendment to U.S. Constitution; (6) Violation of Due Process Clause of Fourteenth Amendment to U.S. Constitution; (7) Violation of Equal Protection Clause of Fourteenth Amendment to U.S. Constitution; (8) Right to Liberty (Cal. Const. Art. 1, § 1); (9) Freedom of Speech (Cal. Const.

Art. 1, § 2); (10) Freedom of Assembly (Cal. Const. Art. 1, § 3); and (11) Free Exercise and Enjoyment of Religion (Cal. Const. Art. 1, § 4).

Plaintiffs filed the Request on April 13, 2020, the same day they filed the Complaint. (Request.) In support of the Request, Plaintiffs filed:

- Declaration of Mark Meuser (“Meuser Declaration,” Dkt. No. 8-2);
- Declaration of Wendy Gish (“Gish Declaration,” Dkt. No. 8-3);
- Declaration of James Moffatt (“Moffatt Declaration,” Dkt. No. 8-4);
- Declaration of Patrick Scales (“Scales Declaration,” Dkt. No. 8-5);
- Declaration of Brenda Wood (“Wood Declaration,” Dkt. No. 8-6);

Defendants opposed the Request on April 17, 2020. (“State Opposition,” Dkt. No. 13; “Riverside Opposition,” Dkt. No. 15; “San Bernardino Opposition,” Dkt. No. 18.) In support of the State Opposition, State Defendants filed the Declaration of Todd Grabarsky. (Grabarsky Declaration,” Dkt. No. 13-1.) In support of the Riverside Opposition, Riverside Defendants filed:

- Request for Judicial Notice (“Riverside RJN,” Dkt. No. 15-1);
- Jason Anderson (“Anderson Declaration,” Dkt. No. 15-2);
- Declaration of Kelly A. Moran, (“Moran Declaration,” Dkt. No. 15-3);
- Declaration of Dr. Cameron Kaiser (“Kaiser Declaration,” Dkt. No. 15-4.)

In support of the San Bernardino Opposition, San Bernardino Defendants filed a request for judicial notice. (“San Bernardino RJN,” Dkt. No. 18-1.) The Court held a telephonic hearing on April 22, 2020.

II. REQUESTS FOR JUDICIAL NOTICE

Riverside Defendants and San Bernardino Defendants separately submit unopposed requests for judicial notice. (See Riverside RJN; San Bernardino RJN.) A court may take judicial notice of an adjudicative fact not subject to “reasonable dispute,” either because it is “generally known within the territorial jurisdiction of the trial court,” or it is capable of accurate and ready determination by resort to sources whose “accuracy cannot reasonably be questioned.” Fed. R. Evid. 201. Under Federal Rule of Evidence 201, “[a] court must take judicial notice if a party requests it and the court is supplied with the necessary information.” Fed. R. Evid. 201(c)(2).

Judicial notice is appropriate here. The documents at issue are publicly available and not subject to reasonable dispute. Moreover, Defendants request only that the Court take judicial notice of the contents of the documents, not of the truth of those contents. Accordingly, the Court GRANTS the Riverside RJN and the San Bernardino RJN.

III. FACTS

On December 31, 2019, China reported incidents of a pneumonia of unknown cause

to the World Health Organization. Since then, that infectious disease, which came to be known as coronavirus disease 2019 (COVID-19), has swept the globe, infecting millions and killing nearly two hundred thousand people.¹

Defendant Newsom, the Governor of California, declared a State of Emergency in California on March 4, 2020. (Complaint ¶ 30; Grabarsky Declaration, Exhibit 1.) On March 19, 2020, the Defendant Newsom issued Executive Order N-33-20, which directed all California residents to heed the State’s public health directives relating to COVID-19, including the March 19, 2020 Order of the State Public Health Officer (“State Order”). (Complaint ¶ 31; Grabarsky Declaration, Exhibit 3.) The State Order requires “all individuals living in the State of California to stay home or at their place of residence except as needed to maintain continuity of operations of the federal critical infrastructure sectors.” (Grabarsky Declaration, Exhibit 3.) On March 22, 2020, the Public Health Officer designated a list of “Essential Critical Infrastructure Workers,” including “[f]aith based services that are provided through streaming or other technology.” (Grabarsky Declaration, Exhibit 4.)

Defendant Kaiser, Riverside County’s Public Health Officer, issued a Declaration of Local Health Emergency in Riverside County on March 8, 2020. (Kaiser Declaration ¶ 10.) On April 6, 2020, Defendants Kaiser and Johnson issued an Amended Order of the Health Officer for the County of Riverside and of the County Executive Officer as Director of Emergency Services (“Riverside Order”). (Complaint ¶ 62; Kaiser Declaration ¶ 10, Exhibit I.) The Riverside Order prohibits “[a]ll public or private gatherings . . . including, but not limited to an auditorium, . . . church, . . . or any other indoor or outdoor space used for any non-essential purpose including, but not limited to . . . church” (Complaint ¶ 63; Kaiser Declaration, Exhibit I.) Consistent with the State Order, the Riverside Order exempts essential business, including “courts of law, medical providers . . . daycare and child care . . . [and] necessary shopping at fuel stations, stores or malls,” provided that a “state and federal guidelines for infection control” are observed. (Complaint ¶ 64; Kaiser Declaration Exhibit I.)

The County of San Bernardino Board of Supervisors declared a Local Health Emergency in San Bernardino County on March 10, 2020. (San Bernardino RJN, Exhibits F and G.) On April 7, 2020, Defendant Gustafson, the San Bernardino Health Officer, signed the Order of the Health Officer of the County of San Bernardino for the Control of COVID-19 (“San Bernardino Order”). (Complaint ¶ 36; San Bernardino RJN, Exhibit I.) The San Bernardino Order “allow[s] faith based services that are provided through streaming or other technology, while individuals remain in their homes, but does not allow individuals to leave their home for driving parades or drive-up services, or for picking up non-essential items.” (Complaint ¶ 37; San Bernardino RJN, Exhibit I.)

¹ World Health Organization, Coronavirus Disease 2019 Situation Report, April 23, 2020 https://www.who.int/docs/default-source/coronaviruse/situation-reports/20200423-sitrep-94-covid-19.pdf?sfvrsn=b8304bf0_4

IV. LEGAL STANDARD

The purpose of a temporary restraining order is to preserve the status quo and prevent irreparable harm until a hearing may be held on the propriety of a preliminary injunction. See Reno Air Racing Ass’n, Inc. v. McCord, 452 F.3d 1126, 1131 (9th Cir. 2006). The standard for issuing a temporary restraining order is identical to the standard for issuing a preliminary injunction. Lockheed Missile & Space Co. v. Hughes Aircraft Co., 887 F. Supp. 1320, 1323 (N.D. Cal. 1995); see Stuhlbarg Intern. Sales Co., Inc. v. John D. Brushy and Co., Inc., 240 F.3d 832, 839 n.7 (9th Cir. 2011).

“A plaintiff seeking a preliminary injunction must establish that he is likely to succeed on the merits, that he is likely to suffer irreparable harm in the absence of preliminary relief, that the balance of equities tips in his favor, and that an injunction is in the public interest.” Winter v. Natural Res. Def. Council, Inc., 555 U.S. 7, 20 (2008). The Ninth Circuit employs the “serious questions” test, which states “‘serious questions going to the merits’ and a balance of hardships that tips sharply towards the plaintiff can support issuance of a preliminary injunction, so long as the plaintiff also shows that there is a likelihood of irreparable injury and that the injunction is in the public interest.” Alliance for Wild Rockies v. Cottrell, 632 F.3d 1127, 1135 (9th Cir. 2011). “A preliminary injunction is an ‘extraordinary and drastic remedy.’ It should never be awarded as of right.” Munaf v. Geren, 553 U.S. 674, 690 (2008) (citation omitted). When seeking a temporary restraining order through an *ex parte* application, a plaintiff must further show that he is without fault in creating the crisis necessitating the bypass of regular motion procedures. See Mission Power Eng’g Co. v. Cont’l Gas Co., 883 F. Supp. 488, 492–93 (C.D. Cal. 1995). The propriety of a temporary restraining order, in particular, hinges on a significant threat of irreparable injury, Simula, Inc. Autoliv, Inc., 175 F.3d 716, 725 (9th Cir. 1999), that must be imminent in nature, Caribbean Marine Serv. Co. v. Baldridge, 844 F.2d 668, 674 (9th Cir. 1988).

V. DISCUSSION

Plaintiffs request that the Court enjoin enforcement of the State Order, Riverside Order, and San Bernardino Order (collectively, “Orders”) to “Plaintiffs’ engagement in religious services, practices, or activities at which the Center for Disease Control’s social distancing guidelines are followed.” (Request at 24.) To succeed, Plaintiffs must demonstrate that they are likely to succeed on their claims that the Orders violate their constitutional rights and demonstrate that the other factors weigh in favor of granting the temporary restraining order.

A. Success on the Merits or Serious Questions

Plaintiffs assert that the Orders violate their constitutionally protected rights, including their right to the free exercise of religion. (Request at 9–21.) In response, Defendants argue that Plaintiffs will not succeed on their constitutional claims for two reasons: First, as acts of the executive in response to a national emergency, the Orders are subject to only minimal scrutiny,

which they easily survive.² (State Opposition at 7–14.) Second, even absent consideration of greater leeway afforded to executive acts during a state of emergency, the Orders do not violate Plaintiffs’ rights under traditional constitutional analysis. (State Opposition at 14–19; Riverside Opposition at 16–34; San Bernardino Opposition at 11–17.)

1. Exercise of Executive Powers During State of Emergency

State Defendants argue that because the Orders are temporary executive actions taken in response to a national emergency, they are entitled to substantial judicial deference and not subject to traditional constitutional scrutiny. (State Opposition at 7–14.) The Court agrees: Defendants have a right to protect California residents from the spread of COVID-19—even if those protections temporarily burden constitutional rights to a greater degree than normally permissible.

The Supreme Court held over a century ago that “a community has the right to protect itself against an epidemic of disease which threatens the safety of its members.” Jacobson v. Commonwealth of Massachusetts, 197 U.S. 11, 27 (1905). The COVID-19 pandemic threatens the lives of all Californians: indeed, nearly 1,500 have already died.³ The virus has proven to be extremely contagious—it is airborne and can linger on surfaces for days.⁴ Because asymptomatic and pre-symptomatic carriers of the virus can infect others, a belief that one “has never had or contracted the coronavirus . . . been at any time exposed to the danger of contracting it . . . and has never been in close proximity to any locality where said coronavirus has or have existed” is largely meaningless. (See Complaint ¶¶ 58, 79.) Anyone could be an unknowing, undetectable vector for the virus at any time. For these reasons, government and health officials have struggled to contain the virus. Without a vaccine, measures limiting physical contact between citizens, such as the Orders, are widely recognized as the only way to effectively slow the spread of the virus.

Undoubtedly, the Orders—and the similar orders in effect around the country—restrict the rights and freedoms normally enjoyed by citizens. The residents of California are confined to their homes, unable to gather with friends and family, unable to attend political rallies, unable to enjoy art and recreation, and largely unable to work or go to school. The Orders also prevent Plaintiffs (and all other California residents) from gathering for in-person worship or laying hands upon each other. Because Plaintiffs’ religious beliefs compel them to do these things, the Orders

² Although only the State Defendants advance this argument, the Court will apply it to all three orders.

³ *Tracking Coronavirus in California*, Los Angeles Times
<https://www.latimes.com/projects/california-coronavirus-cases-tracking-outbreak/> (last accessed April 23, 2020.)

⁴ Neeltje van Doremalen, Ph.D., et al., *Aerosol and Surface Stability of SARS-CoV-2 as Compared with SARS-CoV-1*, N. England J. Med. 2020; 382:1564-1567
<https://www.nejm.org/doi/full/10.1056/NEJMc2004973> (last accessed April 23, 2020.)

do burden Plaintiffs' unrestrained exercise of their religion. But the Constitution does not guarantee "an absolute right in each person to be, at all times and in all circumstances, wholly freed from restraint." Jacobson, 197 U.S. at 26. Indeed, "[t]he right to practice religion freely does not include liberty to expose the community . . . to communicable disease." Prince v. Massachusetts, 321 U.S. 158, 166–67 (1944).

Recognizing that the need to protect the public may trump individual rights during a crisis, the Supreme Court has held that states and municipalities have greater leeway to burden constitutionally protected rights during public emergencies:

In every well-ordered society charged with the duty of conserving the safety of its members the rights of the individual in respect of his liberty may at times, under the pressure of great dangers, be subjected to such restraint, to be enforced by reasonable regulations, as the safety of the general public may demand.

Jacobson, 197 U.S. at 29; see also United States v. Caltex, 344 U.S. 149 (1952) (acknowledging that "in times of imminent peril—such as when fire threatened a whole community—the sovereign could, with immunity, destroy the property of a few that the property of many and the lives of many more could be saved"). When responding to the COVID-19 pandemic, therefore, Defendants "may implement emergency measures that curtail constitutional rights so long as the measures have at least some 'real or substantial relation' to the public health crisis and are not 'beyond all question, a plain, palpable invasion of rights secured by the fundamental law.'" In re Abbott, 2020 WL 1685929, at *7 (5th Cir. Apr. 7, 2020) (quoting Jacobson, 197 U.S. at 31). In other words, during an emergency, traditional constitutional scrutiny does not apply. Instead, any measures that limit or suspend constitutional rights (1) must have a "real or substantial relation" to the crisis and (2) must not represent "plain, palpable" invasions of clearly protected rights. Jacobson, 197 U.S. at 31.

The Orders easily meet that test. First, they have a substantial relation to the COVID-19 crisis: they require the physical distancing that is needed to slow the spread of the virus. Second, there is no "plain, palpable invasion" of Plaintiffs' free exercise of religion. While Plaintiffs are unable to gather together in-person, they are free to gather virtually or over the phone. They are also free to gather in-person with the members of their household. They remain free to practice their religion in whatever way they see fit so long as they remain within the confines of their own homes. Although physical contact with others is curtailed, a wide swath of religious expression remains untouched by the Orders. The Orders, therefore, do not represent a plain or palpable invasion of the general right to free exercise of religion. Accordingly, the Orders are likely a permissible exercise of executive authority during a national emergency.

2. Traditional Constitutional Analysis

Because the Orders survive the minimal scrutiny required where executive action taken in response to an emergency, the Court need not determine whether the Orders likewise survive traditional constitutional analysis. But they do: the Request must also be denied because the

Orders likely do not impermissibly infringe on Plaintiffs' constitutional rights even when applying the traditional constitutional scrutiny.

a. Free Exercise of Religion

Plaintiffs argue that the Orders target religion and must therefore be subjected to a strict scrutiny analysis. (Request at 9–11.) Defendants respond that the Orders are neutral and generally applicable and therefore only rational basis review applies. (State Opposition 15–16; Riverside Opposition at 16–19; San Bernardino Opposition at 11–13.) “In assessing neutrality and general applicability, courts evaluate both ‘the text of the challenged law as well as the effect . . . in its real operation.’” Parents for Privacy v. Barr, 949 F.3d 1210, 1234 (9th Cir. 2020).

The Orders are neutral on their faces: they “make no reference to any religious practice, conduct, belief, or motivation.” Stormans, Inc. v. Wiesman, 794 F.3d 1064, 1076 (9th Cir. 2015). While they do list faith-based gatherings as a type of in-person gathering that is prohibited, faith-based gatherings are referenced as an example—they are not the target of the Orders. (See e.g., Kaiser Declaration Exhibit I (prohibiting all gatherings including those for “church”).) Facial neutrality does not require freedom from any mention of religion, instead “the minimum requirement of neutrality is that a law not *discriminate* on its face.” Church of the Lukumi Babalu Aye, Inc. v. City of Hialeah, 508 U.S. 520, 533 (1993) (emphasis added). Because the orders apply to both religious and secular gatherings, they do not discriminate, and are therefore facially neutral.

The Orders are also neutral in operation: they apply to both religious and secular conduct and do not “substantially underinclude nonreligiously motivated conduct that might endanger the same governmental interest that the law is designed to protect.” See Stormans, 794 F.3d at 1079. The Supreme Court has long recognized that “[o]fficial action that targets religious conduct for distinctive treatment cannot be shielded by mere compliance with the requirement of facial neutrality.” Church of the Lukumi Babalu Aye, 508 U.S. at 534. Plaintiffs have presented no evidence that the Orders target religious conduct over secular conduct. And a review of the Orders demonstrates that both secular and religious conduct are prohibited equally. The majority of the prohibited conduct is secular: schools are closed, restaurants are shuttered, concerts and sporting events are canceled; citizens cannot visit public recreation spaces or gather with friends who live outside of their household; non-essential workers fortunate enough to still have jobs must work from home. Far from singling out religious conduct for additional restrictions, the State Order identifies workers preparing religious videoconferences as essential workers—an exception that facilitates religious conduct. Similar exceptions have not been made for sports, concerts, or non-essential work events. The Orders, therefore, are not restrictions against religion in disguise. They are generally applicable restrictions on gatherings of all kinds.

Plaintiffs argue that the Orders are underinclusive of secular activities that may also contribute to the spread of COVID-19 because they allow grocery stores, fast food restaurants, and marijuana dispensaries to remain open. (Request at 10.) But these are all essential services: without access to the food and medicines sold at these locations, more citizens would become ill or die. And despite social distancing the virus is spreading at these locations—grocery store

employees are falling ill and dying.⁵ If the state applies the same rules to in-person religious gatherings as it does to grocery stores, people will get sick and die from attending religious gatherings just as they are dying from working in grocery stores.

Moreover, because the risk of transmission increases with every out-of-home contact, it is necessary to suspend non-essential activities so that essential functions can be less dangerous. Many older and immunocompromised people must leave their homes to purchase food and medicine. Grocery store employees, food preparers, delivery drivers, pharmacists, and other essential workers must go to work to ensure that California residents have what they need to survive. These individuals risk contracting the virus when performing these essential tasks. If those that they encounter engage in non-essential contacts, the risk of transmission increases. But if everyone limits their out-of-home contacts to only essential tasks, the risk decreases. When we all reduce our contacts to the minimum possible level, the rates of transmission go down. In sum, Californians need to stay home whenever possible to protect those who cannot.

Finally, as Defendants argued at the hearing, constitutional analysis only requires that the Court compare the prohibited religious conduct with analogous secular conduct when assessing underinclusivity. See *Stormans, Inc. v. Wiesman*, 794 F.3d 1064, 1079 (9th Cir. 2015) (holding that a law is only fatally underinclusive if it prohibits religious conduct but not “comparable secular conduct”). An in-person religious gathering is not analogous to picking up groceries, food, or medicine, where people enter a building quickly, do not engage directly with others except at points of sale, and leave once the task is complete. Instead, it is more analogous to attending school or a concert—activities where people sit together in an enclosed space to share a communal experience. Those activities are prohibited under the Orders. Because the Orders treat in-person religious gatherings the same as they treat secular in-person communal activities, they are generally applicable.

Because the Orders are facially neutral and generally applicable, they are subject to rational basis review. *Stormans, Inc.*, 794 F.3d at 1075–76. And they easily survive rational basis: the social distancing measures implemented by the Order are rationally related to slowing the spread of COVID-19—a state interest that is not only legitimate but compelling. Accordingly, the Orders likely do not violate the Free Exercise Clause.

b. Establishment of Religion

A government action violates the Establishment Clause if it lacks a “secular legislative purpose” or endorses religion. *Lemon v. Kurtzman*, 403 U.S. 602, 612–13 (1971); see also *Trunk v. City of San Diego*, 629 F.3d 1099, 1106 (9th Cir. 2011) (noting that “the Supreme Court

⁵ Dalvin Brown, *COVID-19 Claims Lives of 30 Grocery Store Workers, Thousands More May Have It, Union Says*, USA Today, <https://www.usatoday.com/story/money/2020/04/14/coronavirus-claims-lives-30-grocery-store-workers-union-says/2987754001/> (last accessed April 23, 2020.)

(continued . . .)

essentially has collapsed the[] last two prongs [of the test articulated in Lemon] to ask whether the challenged governmental practice has the effect of endorsing religion.”) The Orders do neither. First, they serve the important secular purpose of slowing the spread of COVID-19. Second, they do not endorse any religion: the order bans gatherings for all religions along with secular gatherings.⁶ Accordingly, the Orders likely do not violate the Establishment Clause.

c. Other Alleged Constitutional Violations

Plaintiffs make several other claims for violations of their rights under the U.S. and California Constitutions. (Request at 12–20.) Each of these, however, is premised on Plaintiffs’ argument that the Orders impermissibly restrict their religious exercise. (See, e.g., Request at 13 (arguing that the Orders are an unconstitutional prior restraint on speech because religious worship is protected speech).) Because the Court concludes that the Orders do not impermissibly restrict Plaintiffs’ free exercise of religion, Plaintiffs’ other claims likely fail as well.

B. Remaining TRO Factors

Defendants have shown that because the Orders are likely a proper exercise of executive authority in a state of emergency they are entitled to enhanced deference, even where they infringe on typically protected rights. Moreover, even applying a traditional constitutional analysis, Plaintiffs’ claims are unlikely to succeed. Accordingly, Plaintiffs are not likely to succeed on the merits of their claims, and the Court need not consider the remaining factors.

VI. CONCLUSION

For the reasons above, the Court DENIES Plaintiffs’ Request.

IT IS SO ORDERED.

⁶ Plaintiffs argue that special accommodations were made by the Riverside Defendants and the San Bernardino Defendants for Christians celebrating Easter. (Request at 2.) However, they do not seek to enjoin enforcement of any Easter exception. And they could not: Easter has passed. Accordingly, the Court need not determine whether the Easter exceptions violated the Establishment Clause.

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Data as received by WHO from national authorities by 10:00 CEST, 23 April 2020

HIGHLIGHTS

- The Global Outbreak Alert and Response Network (GOARN) has launched a [GOARN COVID-19 Knowledge hub](#). The hub is designed as a central repository of quality public health information, guidance, tools and webinars which can be accessed freely at any point.
- WHO Director-General Dr. Tedros, in his regular media briefing yesterday, cautioned that “we have a long way to go. This virus will be with us for a long time”. He added that “the world cannot go back to the way things were. There must be a “new normal” – a world that is healthier, safer and better prepared”. His speech can be found [here](#).
- WHO has published guidance ‘[Addressing Human Rights as Key to the COVID-19 Response](#)’. The guidance document highlights the importance of integrating a human rights-based approach into the COVID-19 response and highlights key considerations in relation to addressing stigma and discrimination, prevention of violence against women, support for vulnerable populations, quarantine and restrictive measures, and shortages of supplies and equipment.
- All available evidence for COVID-19 suggests that SARS-CoV-2 has a zoonotic source. Many researchers have been able to look at the genomic features of SARS-CoV-2 and have found that evidence does not support that SARS-CoV-2 is a laboratory construct. A constructed virus would show a mix of known elements within genomic sequences – this is not the case. For more details, please see ‘subject in focus’.

SITUATION IN NUMBERS total (new cases in last 24 hours)

Globally

2 544 792 confirmed (73 657)
175 694 deaths (6689)

European Region

1 251 458 confirmed (31 972)
113 336 deaths (3384)

Region of the Americas

957 402 confirmed (32 111)
47 812 deaths (3038)

Eastern Mediterranean Region

144 450 confirmed (5101)
6469 deaths (143)

Western Pacific Region

137 902 confirmed (1632)
5818 deaths (25)

South-East Asia Region

36 039 confirmed (2127)
1498 deaths (71)

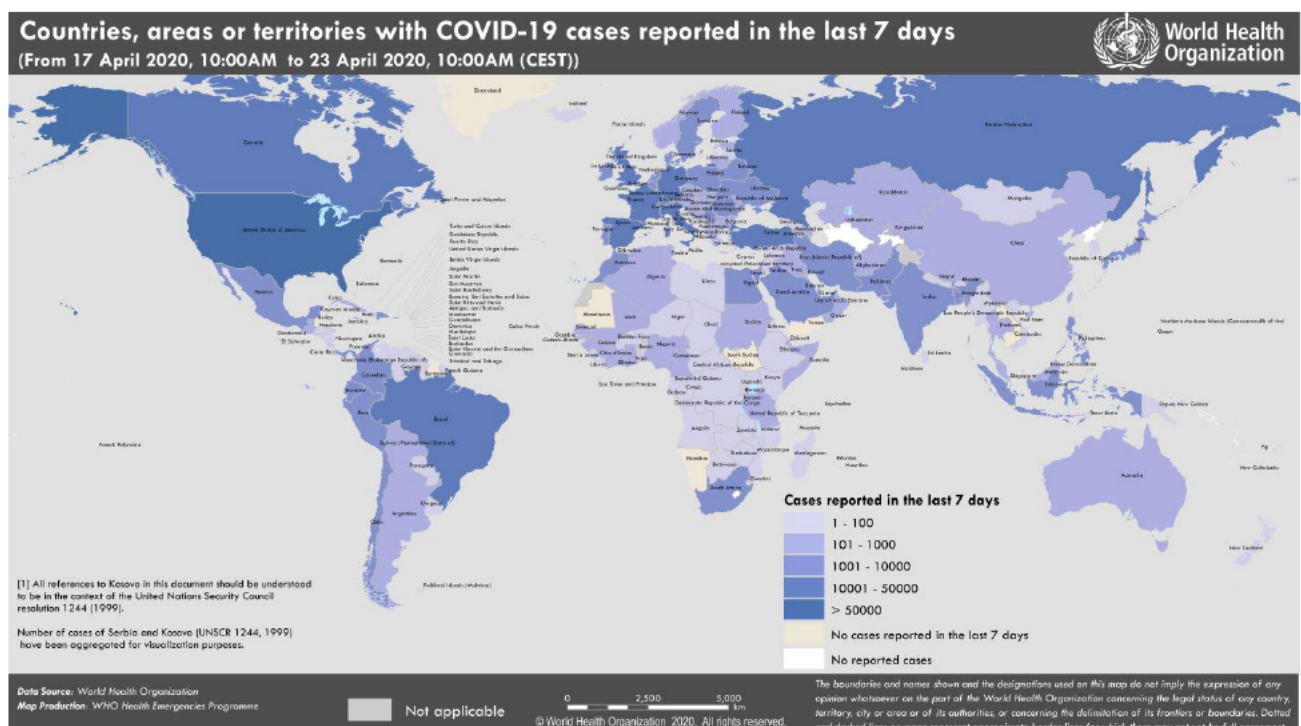
African Region

16 829 confirmed (714)
748 deaths (28)

WHO RISK ASSESSMENT

Global Level Very High

Figure 1. Countries, territories or areas with reported confirmed cases of COVID-19, 23 April 2020



SUBJECT IN FOCUS: Origin of the severe acute respiratory syndrome coronavirus-2 (SARS-CoV-2), the virus causing COVID-19

The first human cases of COVID-19, the disease caused by the novel coronavirus causing COVID-19, subsequently named SARS-CoV-2 were first reported by officials in Wuhan City, China, in December 2019. Retrospective investigations by Chinese authorities have identified human cases with onset of symptoms in early December 2019. While some of the earliest known cases had a link to a wholesale food market in Wuhan, some did not. Many of the initial patients were either stall owners, market employees, or regular visitors to this market. Environmental samples taken from this market in December 2019 tested positive for SARS-CoV-2, further suggesting that the market in Wuhan City was the source of this outbreak or played a role in the initial amplification of the outbreak. The market was closed on 1 January 2020.

SARS-CoV-2 was identified in early January and its genetic sequence shared publicly on 11-12 January. The full genetic sequence of SARS-CoV-2 from the early human cases and the sequences of many other virus isolated from human cases from China and all over the world since then show that SARS-CoV-2 has an ecological origin in bat populations. All available evidence to date suggests that the virus has a natural animal origin and is not a manipulated or constructed virus. Many researchers have been able to look at the genomic features of SARS-CoV-2 and have found that evidence does not support that SARS-CoV-2 is a laboratory construct. If it were a constructed virus, its genomic sequence would show a mix of known elements. This is not the case.

Another coronavirus, SARS-CoV-1, the cause of the Severe Acute Respiratory Syndrome (SARS) outbreak in 2003, was also closely related to other coronaviruses isolated from bats. These close genetic relations of SARS-CoV-1, SARS-CoV-2 and other coronaviruses, suggest that they all have their ecological origin in bat populations. Many of these coronaviruses can also infect several animal species. For example, SARS-CoV-1 infected civet cats and then humans, while the virus causing the Middle East Respiratory Syndrome (MERS-CoV) is found in dromedary camels, and has continued to infect humans since 2012.

All available evidence for COVID-19 suggests that SARS-CoV-2 has a zoonotic source. Since there is usually limited close contact between humans and bats, it is more likely that transmission of the virus to humans happened through another animal species, one that is more likely to be handled by humans. This intermediate animal host or zoonotic source could be a domestic animal, a wild animal, or a domesticated wild animal and, as of yet, has not been identified.

All the published genetic sequences of SARS-CoV-2 isolated from human cases are very similar. This suggests that the start of the outbreak resulted from a single point introduction in the human population around the time that the virus was first reported in humans in Wuhan, China in December 2019.

A number of investigations to better understand the source of the outbreak in China are currently underway or planned, including investigations of human cases with symptom onset in and around Wuhan in late 2019, environmental sampling from markets and farms in areas where the first human cases were identified, and detailed records on the source and type of wildlife species and farmed animals sold in these markets.

Results from these studies are essential to preventing further zoonotic introductions of SARS-CoV-2 into the human population. WHO continues to collaborate with animal health and human health experts, Member States, and other partners to identify gaps and research priorities for the control of COVID-19, including the eventual identification of the source of the virus in China.

SURVEILLANCE

Table 1. Countries, territories or areas with reported laboratory-confirmed COVID-19 cases and deaths. Data as of 23 April 2020*

Reporting Country/ Territory/Area [†]	Total confirmed ‡ cases	Total confirmed new cases	Total deaths	Total new deaths	Transmission classification [§]	Days since last reported case
Western Pacific Region						
China	84302	15	4642	0	Clusters of cases	0
Japan	11919	423	287	10	Clusters of cases	0
Republic of Korea	10702	8	240	2	Clusters of cases	0
Singapore	10141	1016	12	1	Clusters of cases	0
Philippines	6710	111	446	9	Clusters of cases	0
Australia	6654	7	74	0	Clusters of cases	0
Malaysia	5532	50	93	1	Clusters of cases	0
New Zealand	1112	0	16	2	Clusters of cases	1
Viet Nam	268	0	0	0	Clusters of cases	6
Brunei Darussalam	138	0	1	0	Sporadic cases	3
Cambodia	122	0	0	0	Sporadic cases	11
Mongolia	35	1	0	0	Sporadic cases	0
Lao People's Democratic Republic	19	0	0	0	Sporadic cases	10
Fiji	18	0	0	0	Sporadic cases	2
Papua New Guinea	8	1	0	0	Sporadic cases	0
Territories**						
Guam	133	0	5	0	Clusters of cases	11
French Polynesia	57	0	0	0	Sporadic cases	1
New Caledonia	18	0	0	0	Sporadic cases	20
Northern Mariana Islands (Commonwealth of the)	14	0	2	0	Pending	5
European Region						
Spain	208389	4211	21717	435	Pending	0
Italy	187327	3370	25085	437	Community transmission	0
Germany	148046	2352	5094	215	Community transmission	0
The United Kingdom	133499	4451	18100	763	Community transmission	0
France	117961	1810	21307	544	Community transmission	0
Turkey	98674	3083	2376	117	Community transmission	0
Russian Federation	62773	4774	555	42	Clusters of cases	0
Belgium	41889	933	6262	264	Community transmission	0

Netherlands	34842	708	4054	138	Community transmission	0
Switzerland	28186	205	1216	30	Community transmission	0
Portugal	21982	603	785	23	Pending	0
Ireland	16671	631	769	39	Pending	0
Sweden	16004	682	1937	172	Pending	0
Austria	14924	91	494	31	Pending	0
Israel	14498	556	189	5	Pending	0
Poland	10169	313	426	25	Pending	0
Romania	9710	468	508	25	Community transmission	0
Denmark	7912	217	384	14	Pending	0
Belarus	7281	558	60	5	Community transmission	0
Norway	7250	84	169	6	Pending	0
Ukraine	7170	578	187	13	Community transmission	0
Czechia	7136	95	210	9	Community transmission	0
Serbia	7114	224	134	4	Pending	0
Finland	4129	115	149	8	Pending	0
Luxembourg	3654	36	80	2	Pending	0
Republic of Moldova	2778	137	76	3	Pending	0
Greece	2408	7	121	0	Pending	0
Hungary	2284	116	225	0	Clusters of cases	0
Kazakhstan	2025	30	19	0	Pending	0
Croatia	1950	42	48	0	Pending	0
Iceland	1785	7	10	0	Community transmission	0
Uzbekistan	1716	59	7	1	Clusters of cases	0
Estonia	1559	7	44	1	Pending	0
Azerbaijan	1518	38	20	0	Clusters of cases	0
Armenia	1473	96	24	0	Clusters of cases	0
Lithuania	1398	28	38	0	Pending	0
Bosnia and Herzegovina	1367	27	52	2	Community transmission	0
Slovenia	1353	13	79	2	Community transmission	0
North Macedonia	1259	28	56	1	Clusters of cases	0
Slovakia	1244	45	14	0	Clusters of cases	0
Bulgaria	1024	49	49	4	Pending	0
Cyprus	790	6	17	0	Clusters of cases	0
Latvia	761	13	11	2	Pending	0
Andorra	724	1	37	0	Community transmission	0
Albania	634	0	27	1	Clusters of cases	1
Kyrgyzstan	631	19	8	1	Pending	0
San Marino	488	12	40	0	Community transmission	0
Malta	444	1	3	0	Pending	0

Georgia	420	9	5	0	Community transmission	0
Montenegro	314	1	5	0	Clusters of cases	0
Liechtenstein	82	0	1	0	Pending	4
Monaco	68	0	1	0	Sporadic cases	9
Holy See	9	0	0	0	Sporadic cases	2
Territories**						
Kosovo ^[1]	630	26	18	0	Community transmission	0
Isle of Man	307	0	10	0	Pending	1
Jersey	255	5	14	0	Pending	0
Guernsey	241	2	10	0	Community transmission	0
Faroe Islands	185	0	0	0	Pending	3
Gibraltar	133	0	0	0	Clusters of cases	5
Greenland	11	0	0	0	Pending	17
South-East Asia Region						
India	21393	1409	681	41	Clusters of cases	0
Indonesia	7418	283	635	19	Community transmission	0
Bangladesh	3772	390	120	10	Pending	0
Thailand	2839	13	50	1	Pending	0
Sri Lanka	330	20	7	0	Clusters of cases	0
Myanmar	127	6	5	0	Clusters of cases	0
Maldives	85	2	0	0	Clusters of cases	0
Nepal	45	3	0	0	Sporadic cases	0
Timor-Leste	23	0	0	0	Clusters of cases	2
Bhutan	7	1	0	0	Sporadic cases	0
Eastern Mediterranean Region						
Iran (Islamic Republic of)	85996	1194	5391	94	Community transmission	0
Saudi Arabia	12772	1141	114	5	Clusters of cases	0
Pakistan	10513	764	224	15	Clusters of cases	0
United Arab Emirates	8238	483	52	6	Pending	0
Qatar	7141	608	10	1	Pending	0
Egypt	3659	169	276	12	Clusters of cases	0
Morocco	3446	237	149	4	Clusters of cases	0
Kuwait	2248	168	13	2	Clusters of cases	0
Bahrain	2027	54	7	0	Clusters of cases	0
Oman	1716	102	8	0	Clusters of cases	0
Iraq	1631	29	83	0	Clusters of cases	0
Afghanistan	1176	84	40	4	Clusters of cases	0
Djibouti	974	29	2	0	Clusters of cases	0
Tunisia	909	8	38	0	Community transmission	0
Lebanon	682	0	22	0	Clusters of cases	1
Jordan	435	7	7	0	Clusters of cases	0
Somalia	286	0	14	0	Sporadic cases	1
Sudan	162	22	13	0	Sporadic cases	0
Libya	60	1	1	0	Clusters of cases	0

Syrian Arab Republic	42	0	3	0	Community transmission	1
Yemen	1	0	0	0	Pending	12
Territories**						
occupied Palestinian territory	336	1	2	0	Clusters of cases	0
Region of the Americas						
United States of America	800926	24019	40073	2471	Community transmission	0
Brazil	43079	2498	2741	166	Community transmission	0
Canada	38923	1549	1871	143	Community transmission	0
Peru	17837	1512	484	39	Community transmission	0
Chile	11296	464	160	13	Community transmission	0
Ecuador	10850	452	537	17	Community transmission	0
Mexico	9501	729	857	145	Community transmission	0
Dominican Republic	5300	256	260	15	Community transmission	0
Panama	4821	163	141	5	Community transmission	0
Colombia	4149	172	196	7	Community transmission	0
Argentina	3197	124	152	7	Community transmission	0
Cuba	1189	52	40	2	Clusters of cases	0
Costa Rica	669	7	6	0	Clusters of cases	0
Bolivia (Plurinational State of)	609	11	37	3	Clusters of cases	0
Uruguay	543	8	12	2	Clusters of cases	0
Honduras	510	16	46	0	Clusters of cases	0
Guatemala	316	22	8	0	Clusters of cases	0
Venezuela (Bolivarian Republic of)	288	3	10	0	Clusters of cases	0
El Salvador	237	12	7	0	Clusters of cases	0
Jamaica	233	10	6	0	Clusters of cases	0
Paraguay	213	5	9	1	Community transmission	0
Trinidad and Tobago	115	1	8	0	Sporadic cases	0
Barbados	75	0	5	0	Clusters of cases	6
Guyana	67	1	7	0	Clusters of cases	0
Bahamas	65	1	9	0	Clusters of cases	0
Haiti	58	1	4	1	Clusters of cases	0
Antigua and Barbuda	24	1	3	0	Clusters of cases	0
Belize	18	0	2	0	Sporadic cases	8
Dominica	16	0	0	0	Clusters of cases	12
Saint Kitts and Nevis	15	0	0	0	Sporadic cases	2
Saint Lucia	15	0	0	0	Sporadic cases	11
Grenada	14	0	0	0	Clusters of cases	1

Saint Vincent and the Grenadines	13	1	0	0	Sporadic cases	0
Nicaragua	10	0	2	0	Pending	1
Suriname	10	0	1	0	Sporadic cases	19
Territories**						
Puerto Rico	1298	0	64	0	Clusters of cases	1
Martinique	164	1	14	0	Clusters of cases	0
Guadeloupe	148	0	12	0	Clusters of cases	3
Aruba	100	3	2	0	Clusters of cases	0
Bermuda	98	12	5	0	Clusters of cases	0
French Guiana	97	0	1	0	Clusters of cases	2
Sint Maarten	71	3	11	1	Clusters of cases	0
Cayman Islands	66	0	1	0	Clusters of cases	1
United States Virgin Islands	54	0	3	0	Clusters of cases	1
Saint Martin	38	1	2	0	Sporadic cases	0
Curaçao	14	0	1	0	Sporadic cases	14
Falkland Islands (Malvinas)	12	1	0	0	Clusters of cases	0
Montserrat	11	0	0	0	Sporadic cases	9
Turks and Caicos Islands	11	0	1	0	Sporadic cases	6
Saint Barthelemy	6	0	0	0	Sporadic cases	23
Bonaire, Sint Eustatius and Saba	5	0	0	0	Sporadic cases	5
British Virgin Islands	4	0	1	0	Sporadic cases	3
Anguilla	3	0	0	0	Sporadic cases	19
Saint Pierre and Miquelon	1	0	0	0	Sporadic cases	15
African Region						
South Africa	3635	170	65	7	Community transmission	0
Algeria	2910	99	402	10	Community transmission	0
Cameroon	1163	0	43	0	Clusters of cases	2
Ghana	1154	112	9	0	Clusters of cases	0
Côte d'Ivoire	952	36	14	1	Clusters of cases	0
Guinea	761	73	6	0	Community transmission	0
Niger	662	5	22	2	Clusters of cases	0
Burkina Faso	600	19	38	0	Community transmission	0
Nigeria	541	0	19	0	Community transmission	3
Senegal	442	30	6	1	Clusters of cases	0
Democratic Republic of the Congo	359	0	25	0	Clusters of cases	1
Mauritius	329	1	9	0	Community transmission	0
Kenya	303	7	14	0	Clusters of cases	0
Mali	293	35	17	3	Clusters of cases	0

United Republic of Tanzania	285	30	10	0	Clusters of cases	0
Congo	186	21	6	0	Clusters of cases	0
Gabon	166	10	1	0	Clusters of cases	0
Rwanda	153	3	0	0	Clusters of cases	0
Madagascar	121	0	0	0	Clusters of cases	3
Ethiopia	116	2	3	0	Clusters of cases	0
Liberia	101	0	8	0	Clusters of cases	1
Togo	88	2	6	0	Clusters of cases	0
Equatorial Guinea	84	5	1	1	Clusters of cases	0
Zambia	74	4	3	0	Sporadic cases	0
Cabo Verde	67	0	1	0	Sporadic cases	1
Sierra Leone	61	11	1	1	Clusters of cases	0
Uganda	61	5	0	0	Sporadic cases	0
Benin	54	0	1	0	Sporadic cases	2
Guinea-Bissau	50	0	0	0	Sporadic cases	5
Mozambique	41	2	0	0	Sporadic cases	0
Eritrea	39	0	0	0	Sporadic cases	4
Chad	34	0	0	0	Sporadic cases	1
Eswatini	31	7	1	0	Sporadic cases	0
Zimbabwe	28	0	4	1	Sporadic cases	1
Angola	24	0	2	0	Sporadic cases	2
Malawi	23	5	3	1	Sporadic cases	0
Botswana	22	2	1	0	Sporadic cases	0
Namibia	16	0	0	0	Sporadic cases	17
Central African Republic	14	0	0	0	Sporadic cases	1
Burundi	11	0	1	0	Sporadic cases	1
Seychelles	11	0	0	0	Sporadic cases	16
Gambia	10	0	1	0	Sporadic cases	2
Mauritania	7	0	1	0	Sporadic cases	12
São Tomé and Príncipe	7	3	0	0	Sporadic cases	0
South Sudan	4	0	0	0	Sporadic cases	11
Territories**						
Réunion	410	0	0	0	Clusters of cases	1
Mayotte	326	15	4	0	Clusters of cases	0
Subtotal for all Regions	2544080	73657	175681	6689		
International conveyance (Diamond Princess)	712	0	13	0	Not Applicable ^{††}	38
Grand total	2544792	73657	175694	6689		

*Numbers include both domestic and repatriated cases

†The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of WHO concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

‡Case classifications are based on [WHO case definitions](#) for COVID-19.

§Transmission classification is based on a process of country/territory/area self-reporting. Classifications are reviewed on a weekly basis and may be upgraded or downgraded as new information becomes available. Not all locations within a given country/territory/area are equally affected; countries/territories/areas experiencing multiple types of transmission are classified in the highest category reported. Within a given transmission category, different countries/territories/areas may have differing degrees of transmission as indicated by the differing numbers of cases, recency of cases, and other factors.

Terms:

- **No cases:** Countries/territories/areas with no confirmed cases (not shown in table)
- **Sporadic cases:** Countries/territories/areas with one or more cases, imported or locally detected
- **Clusters of cases:** Countries/territories/areas experiencing cases, clustered in time, geographic location and/or by common exposures
- **Community transmission:** Countries/area/territories experiencing larger outbreaks of local transmission defined through an assessment of factors including, but not limited to:
 - Large numbers of cases not linkable to transmission chains
 - Large numbers of cases from sentinel lab surveillance
 - Multiple unrelated clusters in several areas of the country/territory/area

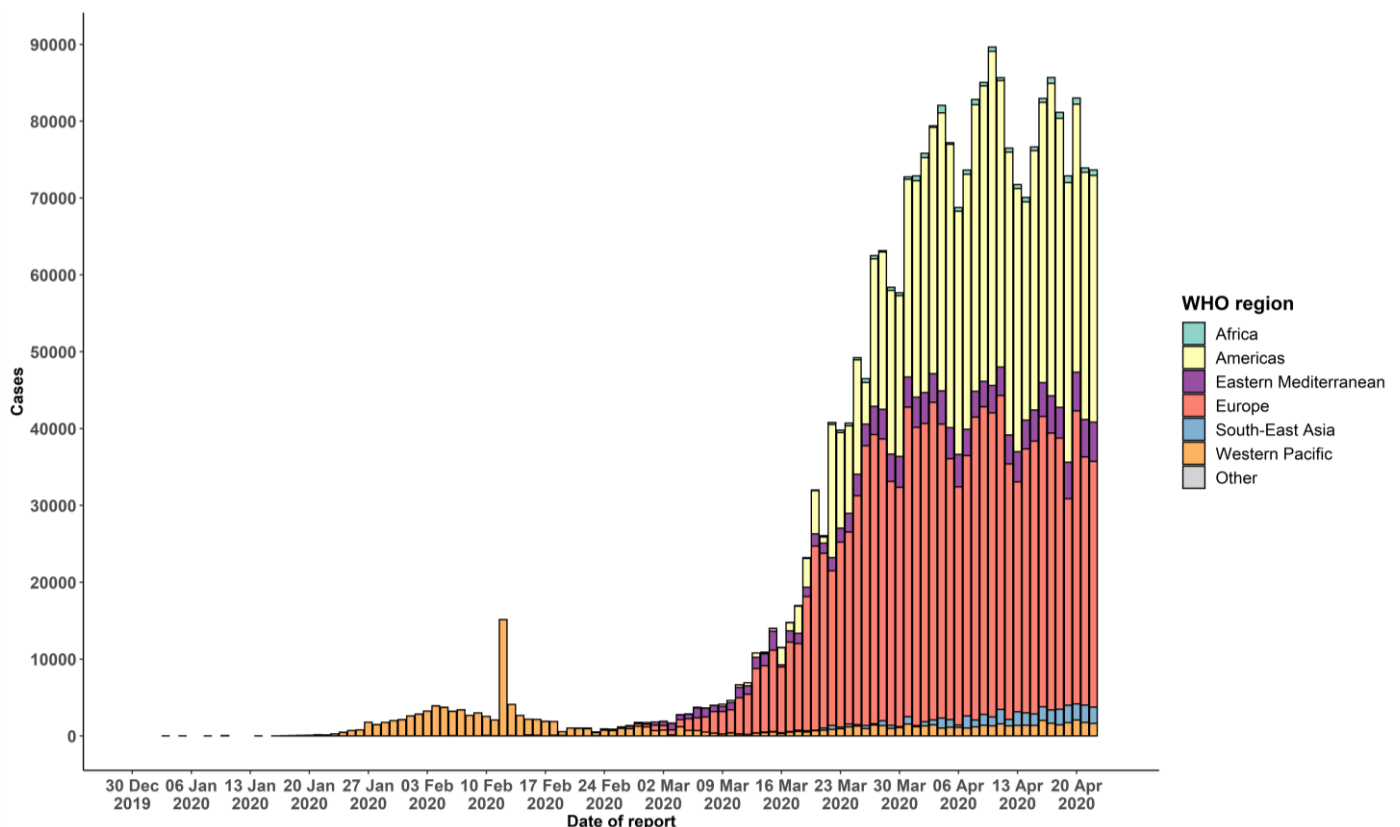
** "Territories" include territories, areas, overseas dependencies and other jurisdictions of similar status

[1] All references to Kosovo should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

†† As the international conveyance (Diamond Princess) is no longer occupied, transmission classification cannot be applied.

Due to differences in reporting methods, retrospective data consolidation, and reporting delays, the number of new cases may not always reflect the exact difference between yesterday's and today's totals. WHO COVID-19 Situation Reports present official counts of confirmed COVID-19 cases, thus differences between WHO reports and other sources of COVID-19 data using different inclusion criteria and different data cutoff times are to be expected.

Figure 4. Epidemic curve of confirmed COVID-19, by date of report and WHO region through 23 April 2020



STRATEGIC OBJECTIVES

WHO's strategic objectives for this response are to:

- Interrupt human-to-human transmission including reducing secondary infections among close contacts and health care workers, preventing transmission amplification events, and preventing further international spread*;
- Identify, isolate and care for patients early, including providing optimized care for infected patients;
- Identify and reduce transmission from the animal source;
- Address crucial unknowns regarding clinical severity, extent of transmission and infection, treatment options, and accelerate the development of diagnostics, therapeutics and vaccines;
- Communicate critical risk and event information to all communities and counter misinformation;
- Minimize social and economic impact through multisectoral partnerships.

*This can be achieved through a combination of public health measures, such as rapid identification, diagnosis and management of the cases, identification and follow up of the contacts, infection prevention and control in health care settings, implementation of health measures for travelers, awareness-raising in the population and risk communication.

PREPAREDNESS AND RESPONSE

- To view all technical guidance documents regarding COVID-19, please go to [this webpage](#).
- WHO has developed interim guidance for laboratory diagnosis, advice on the use of masks during home care and in health care settings in the context of COVID-19 outbreak, clinical management, infection prevention and control in health care settings, home care for patients with suspected novel coronavirus, risk communication and community engagement and Global Surveillance for human infection with COVID-19.
- WHO is working closely with International Air Transport Association (IATA) and have jointly developed a guidance document to provide advice to cabin crew and airport workers, based on country queries. The guidance can be found on the [IATA webpage](#).
- WHO has been in regular and direct contact with Member States where cases have been reported. WHO is also informing other countries about the situation and providing support as requested.
- WHO is working with its networks of researchers and other experts to coordinate global work on surveillance, epidemiology, mathematical modelling, diagnostics and virology, clinical care and treatment, infection prevention and control, and risk communication. WHO has issued interim guidance for countries, which are updated regularly.
- WHO has prepared a [disease commodity package](#) that includes an essential list of biomedical equipment, medicines and supplies necessary to care for patients with COVID-19.
- WHO has provided recommendations to reduce risk of [transmission from animals to humans](#).
- WHO has published an [updated recommendations for international traffic in relation to COVID-19 outbreak](#).
- WHO has activated the R&D blueprint to accelerate diagnostics, vaccines, and therapeutics.
- OpenWHO is an interactive, web-based, knowledge-transfer platform offering online courses to improve the response to health emergencies. [COVID-19 courses can be found here](#) and courses in [additional national languages here](#). Specifically, WHO has developed online courses on the following topics:
 - Introduction to Go.Data – Field data collection, chains of transmission and contact follow-up. The Go.Data tool is available globally to WHO staff, member states and partners to support outbreak investigation, focusing on field data collection, contact tracing and visualisation of chains of transmission.

- A general introduction to emerging respiratory viruses, including novel coronaviruses (available in Arabic, Chinese, English, French, Russian, Spanish, Hindi, Indian Sign Language, Persian, Portuguese, Serbian and Turkish);
 - Clinical care for Severe Acute Respiratory Infections (available in English, French, Russian, Indonesian and Vietnamese);
 - Health and safety briefing for respiratory diseases - ePROTECT (available in Chinese, English, French, Russian, Spanish, Indonesian and Portuguese);
 - Infection Prevention and Control for Novel Coronavirus (COVID-19) (available in Chinese, English, French, Russian, Spanish, Indonesian, Italian, Japanese, Portuguese and Serbian); and
 - COVID-19 Operational Planning Guidelines and COVID-19 Partners Platform to support country preparedness and response (available in English and coming soon in additional languages).
- WHO is providing guidance on early investigations, which are critical in an outbreak of a new virus. The data collected from the protocols can be used to refine recommendations for surveillance and case definitions, to characterize the key epidemiological transmission features of COVID-19, help understand spread, severity, spectrum of disease, impact on the community and to inform operational models for implementation of countermeasures such as case isolation, contact tracing and isolation. Several protocols are available [here](#). One such protocol is for the investigation of early COVID-19 cases and contacts (the “[First Few X \(FFX\) Cases and contact investigation protocol for 2019-novel coronavirus \(2019-nCoV\) infection](#)”). The protocol is designed to gain an early understanding of the key clinical, epidemiological and virological characteristics of the first cases of COVID-19 infection detected in any individual country, to inform the development and updating of public health guidance to manage cases and reduce the potential spread and impact of infection.

RECOMMENDATIONS AND ADVICE FOR THE PUBLIC

If you are not in an area where COVID-19 is spreading or have not travelled from an area where COVID-19 is spreading or have not been in contact with an infected patient, your risk of infection is low. It is understandable that you may feel anxious about the outbreak. Get the facts from reliable sources to help you accurately determine your risks so that you can take reasonable precautions (see [Frequently Asked Questions](#)). Seek guidance from WHO, your healthcare provider, your national public health authority or your employer for accurate information on COVID-19 and whether COVID-19 is circulating where you live. It is important to be informed of the situation and take appropriate measures to protect yourself and your family (see [Protection measures for everyone](#)).

If you are in an area where there are cases of COVID-19 you need to take the risk of infection seriously. Follow the advice of WHO and guidance issued by national and local health authorities. For most people, COVID-19 infection will cause mild illness however, it can make some people very ill and, in some people, it can be fatal. Older people, and those with pre-existing medical conditions (such as cardiovascular disease, chronic respiratory disease or diabetes) are at risk for severe disease (See [Protection measures for persons who are in or have recently visited \(past 14 days\) areas where COVID-19 is spreading](#)).

CASE DEFINITIONS

WHO periodically updates the [Global Surveillance for human infection with coronavirus disease \(COVID-19\)](#) document which includes case definitions.

For easy reference, case definitions are included below.

Suspect case

- A. A patient with acute respiratory illness (fever and at least one sign/symptom of respiratory disease, e.g., cough, shortness of breath), AND a history of travel to or residence in a location reporting community transmission of

COVID-19 disease during the 14 days prior to symptom onset.

OR

- B. A patient with any acute respiratory illness AND having been in contact with a confirmed or probable COVID-19 case (see definition of contact) in the last 14 days prior to symptom onset;

OR

- C. A patient with severe acute respiratory illness (fever and at least one sign/symptom of respiratory disease, e.g., cough, shortness of breath; AND requiring hospitalization) AND in the absence of an alternative diagnosis that fully explains the clinical presentation.

Probable case

- A. A suspect case for whom testing for the COVID-19 virus is inconclusive.
a. Inconclusive being the result of the test reported by the laboratory.

OR

- B. A suspect case for whom testing could not be performed for any reason.

Confirmed case

A person with laboratory confirmation of COVID-19 infection, irrespective of clinical signs and symptoms.

- Technical guidance for laboratory testing can be found [here](#).

Definition of contact

A contact is a person who experienced any one of the following exposures during the 2 days before and the 14 days after the onset of symptoms of a probable or confirmed case:

1. Face-to-face contact with a probable or confirmed case within 1 meter and for more than 15 minutes;
2. Direct physical contact with a probable or confirmed case;
3. Direct care for a patient with probable or confirmed COVID-19 disease without using proper personal protective equipment¹; OR
4. Other situations as indicated by local risk assessments.

Note: for confirmed asymptomatic cases, the period of contact is measured as the 2 days before through the 14 days *after the date on which the sample was taken* which led to confirmation.

Definition of COVID-19 death

COVID-19 death is defined for surveillance purposes as a death resulting from a clinically compatible illness in a probable or confirmed COVID-19 case, unless there is a clear alternative cause of death that cannot be related to COVID disease (e.g. trauma). There should be no period of complete recovery between the illness and death.

Further guidance for certification and classification (coding) of COVID-19 as cause of death is available [here](#).

¹ World Health Organization. Infection prevention and control during health care when COVID-19 is suspected [https://www.who.int/publications-detail/infection-prevention-and-control-during-health-care-when-novel-coronavirus-\(ncov\)-infection-is-suspected-20200125](https://www.who.int/publications-detail/infection-prevention-and-control-during-health-care-when-novel-coronavirus-(ncov)-infection-is-suspected-20200125)

EXECUTIVE DEPARTMENT
STATE OF CALIFORNIA

PROCLAMATION OF A STATE OF EMERGENCY

WHEREAS in December 2019, an outbreak of respiratory illness due to a novel coronavirus (a disease now known as COVID-19), was first identified in Wuhan City, Hubei Province, China, and has spread outside of China, impacting more than 75 countries, including the United States; and

WHEREAS the State of California has been working in close collaboration with the national Centers for Disease Control and Prevention (CDC), with the United States Health and Human Services Agency, and with local health departments since December 2019 to monitor and plan for the potential spread of COVID-19 to the United States; and

WHEREAS on January 23, 2020, the CDC activated its Emergency Response System to provide ongoing support for the response to COVID-19 across the country; and

WHEREAS on January 24, 2020, the California Department of Public Health activated its Medical and Health Coordination Center and on March 2, 2020, the Office of Emergency Services activated the State Operations Center to support and guide state and local actions to preserve public health; and

WHEREAS the California Department of Public Health has been in regular communication with hospitals, clinics and other health providers and has provided guidance to health facilities and providers regarding COVID-19; and

WHEREAS as of March 4, 2020, across the globe, there are more than 94,000 confirmed cases of COVID-19, tragically resulting in more than 3,000 deaths worldwide; and

WHEREAS as of March 4, 2020, there are 129 confirmed cases of COVID-19 in the United States, including 53 in California, and more than 9,400 Californians across 49 counties are in home monitoring based on possible travel-based exposure to the virus, and officials expect the number of cases in California, the United States, and worldwide to increase; and

WHEREAS for more than a decade California has had a robust pandemic influenza plan, supported local governments in the development of local plans, and required that state and local plans be regularly updated and exercised; and

WHEREAS California has a strong federal, state and local public health and health care delivery system that has effectively responded to prior events including the H1N1 influenza virus in 2009, and most recently Ebola; and



WHEREAS experts anticipate that while a high percentage of individuals affected by COVID-19 will experience mild flu-like symptoms, some will have more serious symptoms and require hospitalization, particularly individuals who are elderly or already have underlying chronic health conditions; and

WHEREAS it is imperative to prepare for and respond to suspected or confirmed COVID-19 cases in California, to implement measures to mitigate the spread of COVID-19, and to prepare to respond to an increasing number of individuals requiring medical care and hospitalization; and

WHEREAS if COVID-19 spreads in California at a rate comparable to the rate of spread in other countries, the number of persons requiring medical care may exceed locally available resources, and controlling outbreaks minimizes the risk to the public, maintains the health and safety of the people of California, and limits the spread of infection in our communities and within the healthcare delivery system; and

WHEREAS personal protective equipment (PPE) is not necessary for use by the general population but appropriate PPE is one of the most effective ways to preserve and protect California's healthcare workforce at this critical time and to prevent the spread of COVID-19 broadly; and

WHEREAS state and local health departments must use all available preventative measures to combat the spread of COVID-19, which will require access to services, personnel, equipment, facilities, and other resources, potentially including resources beyond those currently available, to prepare for and respond to any potential cases and the spread of the virus; and

WHEREAS I find that conditions of Government Code section 8558(b), relating to the declaration of a State of Emergency, have been met; and

WHEREAS I find that the conditions caused by COVID-19 are likely to require the combined forces of a mutual aid region or regions to appropriately respond; and

WHEREAS under the provisions of Government Code section 8625(c), I find that local authority is inadequate to cope with the threat posed by COVID-19; and

WHEREAS under the provisions of Government Code section 8571, I find that strict compliance with various statutes and regulations specified in this order would prevent, hinder, or delay appropriate actions to prevent and mitigate the effects of the COVID-19.

NOW, THEREFORE, I, GAVIN NEWSOM, Governor of the State of California, in accordance with the authority vested in me by the State Constitution and statutes, including the California Emergency Services Act, and in particular, Government Code section 8625, **HEREBY PROCLAIM A STATE OF EMERGENCY** to exist in California.



IT IS HEREBY ORDERED THAT:

1. In preparing for and responding to COVID-19, all agencies of the state government use and employ state personnel, equipment, and facilities or perform any and all activities consistent with the direction of the Office of Emergency Services and the State Emergency Plan, as well as the California Department of Public Health and the Emergency Medical Services Authority. Also, all residents are to heed the advice of emergency officials with regard to this emergency in order to protect their safety.
2. As necessary to assist local governments and for the protection of public health, state agencies shall enter into contracts to arrange for the procurement of materials, goods, and services needed to assist in preparing for, containing, responding to, mitigating the effects of, and recovering from the spread of COVID-19. Applicable provisions of the Government Code and the Public Contract Code, including but not limited to travel, advertising, and competitive bidding requirements, are suspended to the extent necessary to address the effects of COVID-19.
3. Any out-of-state personnel, including, but not limited to, medical personnel, entering California to assist in preparing for, responding to, mitigating the effects of, and recovering from COVID-19 shall be permitted to provide services in the same manner as prescribed in Government Code section 179.5, with respect to licensing and certification. Permission for any such individual rendering service is subject to the approval of the Director of the Emergency Medical Services Authority for medical personnel and the Director of the Office of Emergency Services for non-medical personnel and shall be in effect for a period of time not to exceed the duration of this emergency.
4. The time limitation set forth in Penal Code section 396, subdivision (b), prohibiting price gouging in time of emergency is hereby waived as it relates to emergency supplies and medical supplies. These price gouging protections shall be in effect through September 4, 2020.
5. Any state-owned properties that the Office of Emergency Services determines are suitable for use to assist in preparing for, responding to, mitigating the effects of, or recovering from COVID-19 shall be made available to the Office of Emergency Services for this purpose, notwithstanding any state or local law that would restrict, delay, or otherwise inhibit such use.
6. Any fairgrounds that the Office of Emergency Services determines are suitable to assist in preparing for, responding to, mitigating the effects of, or recovering from COVID-19 shall be made available to the Office of Emergency Services pursuant to the Emergency Services Act, Government Code section 8589. The Office of Emergency Services shall notify the fairgrounds of the intended use and can immediately use the fairgrounds without the fairground board of directors' approval, and

notwithstanding any state or local law that would restrict, delay, or otherwise inhibit such use.

7. The 30-day time period in Health and Safety Code section 101080, within which a local governing authority must renew a local health emergency, is hereby waived for the duration of this statewide emergency. Any such local health emergency will remain in effect until each local governing authority terminates its respective local health emergency.
8. The 60-day time period in Government Code section 8630, within which local government authorities must renew a local emergency, is hereby waived for the duration of this statewide emergency. Any local emergency proclaimed will remain in effect until each local governing authority terminates its respective local emergency.
9. The Office of Emergency Services shall provide assistance to local governments that have demonstrated extraordinary or disproportionate impacts from COVID-19, if appropriate and necessary, under the authority of the California Disaster Assistance Act, Government Code section 8680 et seq., and California Code of Regulations, Title 19, section 2900 et seq.
10. To ensure hospitals and other health facilities are able to adequately treat patients legally isolated as a result of COVID-19, the Director of the California Department of Public Health may waive any of the licensing requirements of Chapter 2 of Division 2 of the Health and Safety Code and accompanying regulations with respect to any hospital or health facility identified in Health and Safety Code section 1250. Any waiver shall include alternative measures that, under the circumstances, will allow the facilities to treat legally isolated patients while protecting public health and safety. Any facilities being granted a waiver shall be established and operated in accordance with the facility's required disaster and mass casualty plan. Any waivers granted pursuant to this paragraph shall be posted on the Department's website.
11. To support consistent practices across California, state departments, in coordination with the Office of Emergency Services, shall provide updated and specific guidance relating to preventing and mitigating COVID-19 to schools, employers, employees, first responders and community care facilities by no later than March 10, 2020.
12. To promptly respond for the protection of public health, state entities are, notwithstanding any other state or local law, authorized to share relevant medical information, limited to the patient's underlying health conditions, age, current condition, date of exposure, and possible contact tracing, as necessary to address the effect of the COVID-19 outbreak with state, local, federal, and nongovernmental partners, with such information to be used for the limited purposes of monitoring, investigation and control, and treatment and coordination of care. The

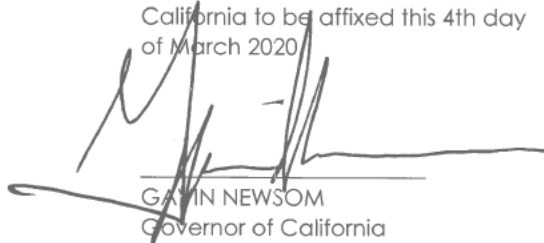


notification requirement of Civil Code section 1798.24, subdivision (i), is suspended.

13. Notwithstanding Health and Safety Code sections 1797.52 and 1797.218, during the course of this emergency, any EMT-P licensees shall have the authority to transport patients to medical facilities other than acute care hospitals when approved by the California EMS Authority. In order to carry out this order, to the extent that the provisions of Health and Safety Code sections 1797.52 and 1797.218 may prohibit EMT-P licensees from transporting patients to facilities other than acute care hospitals, those statutes are hereby suspended until the termination of this State of Emergency.
14. The Department of Social Services may, to the extent the Department deems necessary to respond to the threat of COVID-19, waive any provisions of the Health and Safety Code or Welfare and Institutions Code, and accompanying regulations, interim licensing standards, or other written policies or procedures with respect to the use, licensing, or approval of facilities or homes within the Department's jurisdiction set forth in the California Community Care Facilities Act (Health and Safety Code section 1500 et seq.), the California Child Day Care Facilities Act (Health and Safety Code section 1596.70 et seq.), and the California Residential Care Facilities for the Elderly Act (Health and Safety Code section 1569 et seq.). Any waivers granted pursuant to this paragraph shall be posted on the Department's website.

I FURTHER DIRECT that as soon as hereafter possible, this proclamation be filed in the Office of the Secretary of State and that widespread publicity and notice be given of this proclamation.

IN WITNESS WHEREOF I have
hereunto set my hand and caused
the Great Seal of the State of
California to be affixed this 4th day
of March 2020.



GAVIN NEWSOM
Governor of California

ATTEST:

ALEX PADILLA
Secretary of State



4/26/2020

WHO Director-General's opening remarks at the media briefing on COVID-19 - 11 March 2020



WHO Director-General's opening remarks at the media briefing on COVID-19 - 11 March 2020

11 March 2020

Good afternoon.

In the past two weeks, the number of cases of COVID-19 outside China has increased 13-fold, and the number of affected countries has tripled.

There are now more than 118,000 cases in 114 countries, and 4,291 people have lost their lives.

Thousands more are fighting for their lives in hospitals.

In the days and weeks ahead, we expect to see the number of cases, the number of deaths, and the number of affected countries climb even higher.

<https://www.who.int/dg/speeches/detail/who-director-general-s-opening-remarks-at-the-media-briefing-on-covid-19—11-march-2020>

1/5

4/26/2020

WHO Director-General's opening remarks at the media briefing on COVID-19 - 11 March 2020

WHO has been assessing this outbreak around the clock and we are deeply concerned both by the alarming levels of spread and severity, and by the alarming levels of inaction.

We have therefore made the assessment that COVID-19 can be characterized as a pandemic.

Pandemic is not a word to use lightly or carelessly. It is a word that, if misused, can cause unreasonable fear, or unjustified acceptance that the fight is over, leading to unnecessary suffering and death.

Describing the situation as a pandemic does not change WHO's assessment of the threat posed by this virus. It doesn't change what WHO is doing, and it doesn't change what countries should do.

We have never before seen a pandemic sparked by a coronavirus. This is the first pandemic caused by a coronavirus.

And we have never before seen a pandemic that can be controlled, at the same time.

WHO has been in full response mode since we were notified of the first cases.

And we have called every day for countries to take urgent and aggressive action.

We have rung the alarm bell loud and clear.

===

As I said on Monday, just looking at the number of cases and the number of countries affected does not tell the full story.

Of the 118,000 cases reported globally in 114 countries, more than 90 percent of cases are in just four countries, and two of those – China and the Republic of Korea – have significantly declining epidemics.

81 countries have not reported any cases, and 57 countries have reported 10 cases or less.

4/26/2020

WHO Director-General's opening remarks at the media briefing on COVID-19 - 11 March 2020

We cannot say this loudly enough, or clearly enough, or often enough: all countries can still change the course of this pandemic.

If countries detect, test, treat, isolate, trace, and mobilize their people in the response, those with a handful of cases can prevent those cases becoming clusters, and those clusters becoming community transmission.

Even those countries with community transmission or large clusters can turn the tide on this virus.

Several countries have demonstrated that this virus can be suppressed and controlled.

The challenge for many countries who are now dealing with large clusters or community transmission is not whether they can do the same – it's whether they will.

Some countries are struggling with a lack of capacity.

Some countries are struggling with a lack of resources.

Some countries are struggling with a lack of resolve.

We are grateful for the measures being taken in Iran, Italy and the Republic of Korea to slow the virus and control their epidemics.

We know that these measures are taking a heavy toll on societies and economies, just as they did in China.

All countries must strike a fine balance between protecting health, minimizing economic and social disruption, and respecting human rights.

WHO's mandate is public health. But we're working with many partners across all sectors to mitigate the social and economic consequences of this pandemic.

This is not just a public health crisis, it is a crisis that will touch every sector – so every sector and every individual must be involved in the fight.

4/26/2020

WHO Director-General's opening remarks at the media briefing on COVID-19 - 11 March 2020

I have said from the beginning that countries must take a whole-of-government, whole-of-society approach, built around a comprehensive strategy to prevent infections, save lives and minimize impact.

Let me summarize it in four key areas.

First, prepare and be ready.

Second, detect, protect and treat.

Third, reduce transmission.

Fourth, innovate and learn.

I remind all countries that we are calling on you to activate and scale up your emergency response mechanisms;

Communicate with your people about the risks and how they can protect themselves – this is everybody's business;

Find, isolate, test and treat every case and trace every contact;

Ready your hospitals;

Protect and train your health workers.

And let's all look out for each other, because we need each other.

===

There's been so much attention on one word.

Let me give you some other words that matter much more, and that are much more actionable.

4/26/2020

WHO Director-General's opening remarks at the media briefing on COVID-19 - 11 March 2020

Prevention.

Preparedness.

Public health.

Political leadership.

And most of all, people.

We're in this together, to do the right things with calm and protect the citizens of the world. It's doable.

I thank you.

Subscribe to the WHO newsletter →

DECLARATION OF LOCAL HEALTH EMERGENCY

WHEREAS, California Health and Safety Code section 101080 authorizes a local health officer to declare a local health emergency in the health officer's jurisdiction, or any part thereof, whenever the health officer reasonably determines that there is an imminent and proximate threat of the introduction of any contagious, infectious, or communicable disease, chemical agent, noncommunicable biologic agent, toxin, or radioactive agent; and

WHEREAS, the Centers for Disease Control and Prevention (CDC) announced on February 25, 2020 that community spread of COVID-19 is likely to occur in the United States; and on March 11, 2020, World Health Organization (WHO) declared COVID-19 as a pandemic; and

WHEREAS, three COVID-19 positive travel-related cases have been identified in Ventura County and one case of community transmission has been identified in a neighboring county; and

WHEREAS, based on the foregoing, there is an imminent and proximate threat of COVID-19 spread in the County of Ventura and a threat to the public health of the County residents; and

WHEREAS, COVID-19 has already demonstrated its deleterious impact on human health in other counties in the State of California; and

WHEREAS, there is neither known specific anti-viral treatment nor immunization for COVID-19; and

WHEREAS, social isolation is considered useful as a tool to control the spread of pandemic viral infections; and


WHEREAS, social isolation is the shared responsibility of a multitude of organizations, agencies, businesses, educational sectors and health care providers throughout the County; and

WHEREAS, early and widespread social isolation actions can spare lives;

NOW, THEREFORE, IT IS HEREBY PROCLAIMED AND ORDERED by the Ventura County Health Officer, that a local health emergency exists in the County of Ventura and shall be deemed to continue to exist until its termination is proclaimed by the Ventura County Board of Supervisors.

This declaration shall also apply to all public schools in Ventura County allowing for their closure as necessary due to this pandemic.

Dated: 3/12/2020
Time: 5:05 PM


Robert Levin, M.D.,
Ventura County Health Officer

**HEALTH OFFICER ORDER FOR THE CONTROL OF COVID-19
DIRECTING VULNERABLE INDIVIDUALS LIVING IN
THE COUNTY TO SHELTER AT THEIR PLACE OF RESIDENCE,
RESTRICTIONS OF CERTAIN BUSINESSES, AMONG OTHER ORDERS
DATE OF ORDER: MARCH 17, 2020**

Please read this Order carefully. Violation of or failure to comply with this Order is a misdemeanor punishable by fine, imprisonment, or both, pursuant to Health and Safety Code section 120295 et seq.

WHEREAS, the intent of this Order is to strengthen the steps the County of Ventura has already taken to protect our residents and particularly the most vulnerable in our population from COVID-19; and

WHEREAS, on March 15, 2020 Governor Gavin Newsom announced that California is taking additional measures to protect those most at risk of serious, life-threatening complications from COVID-19, including urging those most vulnerable to COVID-19 to socially isolate at home, such as people age 65 and older and those with underlying medical conditions that make them more susceptible to serious illness from the coronavirus; and

WHEREAS, the intent of this Order is to ensure that specified individuals self-isolate in their places of residence to the maximum extent feasible to slow the spread of COVID-19 to the maximum extent possible, and all provisions of this Order should be interpreted to effectuate this intent; and

WHEREAS, social isolation is considered useful as a tool to control the spread of pandemic viral infections; and

WHEREAS, social isolation is the shared responsibility of all individuals in the County; and

WHEREAS, this Order is issued based on evidence of increasing occurrence of COVID-19 within the County and scientific evidence that the age, condition, and health of a significant portion of the population of the County places it at risk for serious health complications, including death, from COVID-19; and

WHEREAS, 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 and to prevent the health care system from being overwhelmed and that one proven way to slow the transmission is to limit interactions among people to the greatest extent practicable;

WHEREAS, by reducing the spread of the COVID-19 virus, this Order also helps preserve critical and limited healthcare capacity in the County; and

WHEREAS, this Order comes after the release of substantial guidance from the Centers for Disease Control and Prevention, the California Department of Public Health, and other public

health officials throughout the United States and around the world, including a variety of prior orders to combat the spread and harms of COVID-19;

NOW, THEREFORE, PURSUANT TO SECTIONS 101040, 101085 AND 120175 OF THE HEALTH AND SAFETY CODE, IT IS HEREBY ORDERED AS FOLLOWS:

1. All individuals currently living within Ventura County, equal to or older than 75 years of age, or equal to or older than 70 years of age with an active or unstable comorbidity, are ordered to shelter at their place of residence from March 18, 2020 to April 1, 2020. To the extent such individuals are using shared or outdoor spaces, they must at all times as reasonably possible maintain physical distancing of at least six feet from any other person. Exceptions shall only exist as necessary to seek medical care, nutrition, or to perform essential work in healthcare or government.
2. All permanent food facilities, as defined by Health and Safety Code § 113849, may only prepare and offer food that is provided to customers via delivery service, via pick-up for takeout dining, and via drive-thru. Bars and nightclubs that offer food to consumers may remain open only for purposes of continuing to prepare and offer food to consumers via delivery service, via pick-up, or via drive-thru. Permanent food facilities that provide and offer food to consumers for pick up must require patrons or groups of patrons who are ordering food and beverages to be and remain at least six (6) feet apart from each other while inside the facility.
3. The following types of businesses are ordered to close (March 18, 2020 to April 1, 2020):
 - a. Bars and nightclubs that do not serve food.
 - b. Movie theaters, live performance venues, bowling alleys, and arcades.
 - c. Gyms, and fitness centers, and aquatic centers.
 - d. Wineries, breweries, and tap rooms that provide tastings.
4. This Order is issued in accordance with, and incorporates by reference, the March 4, 2020 Proclamation of a State of Emergency issued by Governor Newsom, the March 12, 2020 Declaration of Local Health Emergency issued by the Health Officer, the March 17, 2020 Resolution of the Board of Supervisors of the County of Ventura Proclaiming a Local Emergency and Ratifying and Extending the Declaration of a Local Health Emergency, the March 12, 2020 State of California Executive Order N-25-20, and the March 16, 2020 California Department of Public Health guidance on Retail Food, Beverage, and Other Related Service Venues.
5. The violation of any provision of this Order constitutes a threat to public health. Pursuant to Government Code sections 26602 and 41601 and Health and Safety Code section 101029, the Health Officer requests that the Sheriff and all chiefs of police in the County ensure compliance with and enforce this Order.

6. This Order shall become effective at 12:01 a.m. on March 18, 2020 and will continue to be in effect until 11:59 p.m. on April 1, 2020, or until it is extended, rescinded, superseded, or amended in writing by the Health Officer.
7. The Health Officer will continue to assess the quickly evolving situation and may issue additional Orders related to COVID-19.
8. Copies of this Order shall promptly be: (1) made available at the County of Ventura Public Health Office at 2240 East Gonzalez Road, ste. 210, Oxnard, California 93036; (2) posted on the County Public Health Department website (available at www.vchca.org/ph); and (3) provided to any member of the public requesting a copy of this Order.
9. If any provision of this Order or the application thereof to any person or circumstance is held to be invalid by a court of competent jurisdiction, the reminder of the Order, including the application of such part or provision to other persons or circumstances, shall not be affected and shall continue in full force and effect. To this end, the provisions of this Order are severable.

IT IS SO ORDERED:



Robert Levin, M.D.
Ventura County Health Officer

Dated: March 17, 2020

EXECUTIVE DEPARTMENT
STATE OF CALIFORNIA

EXECUTIVE ORDER N-33-20

WHEREAS on March 4, 2020, I proclaimed a State of Emergency to exist in California as a result of the threat of COVID 19; and

WHEREAS in a short period of time, COVID-19 has rapidly spread throughout California, necessitating updated and more stringent guidance from federal, state, and local public health officials; and

WHEREAS for the preservation of public health and safety throughout the entire State of California, I find it necessary for all Californians to heed the State public health directives from the Department of Public Health.

NOW, THEREFORE, I, GAVIN NEWSOM, Governor of the State of California, in accordance with the authority vested in me by the State Constitution and statutes of the State of California, and in particular, Government Code sections 8567, 8627, and 8665 do hereby issue the following Order to become effective immediately:

IT IS HEREBY ORDERED THAT:

- 1) To preserve the public health and safety, and to ensure the healthcare delivery system is capable of serving all, and prioritizing those at the highest risk and vulnerability, all residents are directed to immediately heed the current State public health directives, which I ordered the Department of Public Health to develop for the current statewide status of COVID-19. Those directives are consistent with the March 19, 2020, Memorandum on Identification of Essential Critical Infrastructure Workers During COVID-19 Response, found at: <https://covid19.ca.gov/>. Those directives follow:

ORDER OF THE STATE PUBLIC HEALTH OFFICER
March 19, 2020

To protect public health, I as State Public Health Officer and Director of the California Department of Public Health order all individuals living in the State of California to stay home or at their place of residence except as needed to maintain continuity of operations of the federal critical infrastructure sectors, as outlined at <https://www.cisa.gov/identifying-critical-infrastructure-during-covid-19>. In addition, and in consultation with the Director of the Governor's Office of Emergency Services, I may designate additional sectors as critical in order to protect the health and well-being of all Californians.

Pursuant to the authority under the Health and Safety Code 120125, 120140, 131080, 120130(c), 120135, 120145, 120175 and 120150, this order is to go into effect immediately and shall stay in effect until further notice.

The federal government has identified 16 critical infrastructure sectors whose assets, systems, and networks, whether physical or virtual, are considered so vital to the United States that their incapacitation or



destruction would have a debilitating effect on security, economic security, public health or safety, or any combination thereof. I order that Californians working in these 16 critical infrastructure sectors may continue their work because of the importance of these sectors to Californians' health and well being.

This Order is being issued to protect the public health of Californians. The California Department of Public Health looks to establish consistency across the state in order to ensure that we mitigate the impact of COVID 19. Our goal is simple, we want to bend the curve, and disrupt the spread of the virus.

The supply chain must continue, and Californians must have access to such necessities as food, prescriptions, and health care. When people need to leave their homes or places of residence, whether to obtain or perform the functions above, or to otherwise facilitate authorized necessary activities, they should at all times practice social distancing.

- 2) The healthcare delivery system shall prioritize services to serving those who are the sickest and shall prioritize resources, including personal protective equipment, for the providers providing direct care to them.
- 3) The Office of Emergency Services is directed to take necessary steps to ensure compliance with this Order.
- 4) This Order shall be enforceable pursuant to California law, including, but not limited to, Government Code section 8665.

IT IS FURTHER ORDERED that as soon as hereafter possible, this Order be filed in the Office of the Secretary of State and that widespread publicity and notice be given of this Order.

This Order is not intended to, and does not, create any rights or benefits, substantive or procedural, enforceable at law or in equity, against the State of California, its agencies, departments, entities, officers, employees, or any other person.

IN WITNESS WHEREOF I have
hereunto set my hand and caused
the Great Seal of the State of
California to be affixed this 19th day
of March 2020.



GAVIN NEWSOM
Governor of California

ATTEST:

ALEX PADILLA
Secretary of State



U.S. Department of Homeland Security
Cybersecurity & Infrastructure Security Agency
Office of the Director
Washington, DC 20528



CISA
CYBER+INFRASTRUCTURE

March 19, 2020

**MEMORANDUM ON IDENTIFICATION OF ESSENTIAL CRITICAL
INFRASTRUCTURE WORKERS DURING COVID-19 RESPONSE**

FROM: Christopher C. Krebs
Director
Cybersecurity and Infrastructure Security Agency (CISA)

As the Nation comes together to slow the spread of COVID-19, on March 16th, the President issued updated Coronavirus Guidance for America. This guidance states that:

"If you work in a critical infrastructure industry, as defined by the Department of Homeland Security, such as healthcare services and pharmaceutical and food supply, you have a special responsibility to maintain your normal work schedule."

The Cybersecurity and Infrastructure Security Agency (CISA) executes the Secretary of Homeland Security's responsibilities as assigned under the Homeland Security Act of 2002 to provide strategic guidance, promote a national unity of effort, and coordinate the overall federal effort to ensure the security and resilience of the Nation's critical infrastructure. CISA uses trusted partnerships with both the public and private sectors to deliver infrastructure resilience assistance and guidance to a broad range of partners.

In accordance with this mandate, and in collaboration with other federal agencies and the private sector, CISA developed an initial list of "Essential Critical Infrastructure Workers" to help State and local officials as they work to protect their communities, while ensuring continuity of functions critical to public health and safety, as well as economic and national security. The list can also inform critical infrastructure community decision-making to determine the sectors, sub-sectors, segments, or critical functions that should continue normal operations, appropriately modified to account for Centers for Disease Control (CDC) workforce and customer protection guidance.

The attached list identifies workers who conduct a range of operations and services that are essential to continued critical infrastructure viability, including staffing operations centers, maintaining and repairing critical infrastructure, operating call centers, working construction, and performing management functions, among others. The industries they support represent, but are not necessarily limited to, medical and healthcare, telecommunications, information technology systems, defense, food and agriculture, transportation and logistics, energy, water and wastewater, law enforcement, and public works.

We recognize that State, local, tribal, and territorial governments are ultimately in charge of implementing and executing response activities in communities under their jurisdiction, while the Federal Government is in a supporting role. As State and local communities consider COVID-19-related restrictions, CISA is offering this list to assist prioritizing activities related to continuity of operations and incident response, including the appropriate movement of critical infrastructure workers within and between jurisdictions.

Accordingly, this list is advisory in nature. It is not, nor should it be considered to be, a federal directive or standard in and of itself.

In addition, these identified sectors and workers are not intended to be the authoritative or exhaustive list of critical infrastructure sectors and functions that should continue during the COVID-19 response. Instead, State and local officials should use their own judgment in using their authorities and issuing implementation directives and guidance. Similarly, critical infrastructure industry partners will use their own judgment, informed by this list, to ensure continued operations of critical infrastructure services and functions. All decisions should appropriately balance public safety while ensuring the continued delivery of critical infrastructure services and functions.

CISA will continue to work with you and our partners in the critical infrastructure community to update this list as the Nation's response to COVID-19 evolves. We also encourage you to submit how you might use this list so that we can develop a repository of use cases for broad sharing across the country.

Should you have questions about this list, please contact CISA at CISA.CAT@cisa.dhs.gov.

Attachment: "Guidance on the Essential Critical Infrastructure Workforce: Ensuring Community and National Resilience in COVID-19 Response"



Guidance on the Essential Critical Infrastructure Workforce: Ensuring Community and National Resilience in COVID-19 Response

Version 1.0 (March 19, 2020)

THE IMPORTANCE OF ESSENTIAL CRITICAL INFRASTRUCTURE WORKERS

Functioning critical infrastructure is imperative during the response to the COVID-19 emergency for both public health and safety as well as community well-being. Certain critical infrastructure industries have a special responsibility in these times to continue operations.

This guidance and accompanying list are intended to support State, Local, and industry partners in identifying the critical infrastructure sectors and the essential workers needed to maintain the services and functions Americans depend on daily and that need to be able to operate resiliently during the COVID-19 pandemic response.

This document gives guidance to State, local, tribal, and territorial jurisdictions and the private sector on defining essential critical infrastructure workers. Promoting the ability of such workers to continue to work during periods of community restriction, access management, social distancing, or closure orders/directives is crucial to community resilience and continuity of essential functions.

CONSIDERATIONS FOR GOVERNMENT AND BUSINESS

This list was developed in consultation with federal agency partners, industry experts, and State and local officials, and is based on several key principles:

1. Response efforts to the COVID-19 pandemic are locally executed, State managed, and federally supported
2. Everyone should follow guidance from the CDC, as well as State and local government officials, regarding strategies to limit disease spread.
3. Workers should be encouraged to work remotely when possible and focus on core business activities. In-person, non-mandatory activities should be delayed until the resumption of normal operations.
4. When continuous remote work is not possible, businesses should enlist strategies to reduce the likelihood of spreading the disease. This includes, but is not necessarily limited to, separating staff by off-setting shift hours or days and/or social distancing. These steps can preserve the workforce and allow operations to continue.

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Essential Critical Infrastructure Workforce

5. All organizations should implement their business continuity and pandemic plans, or put plans in place if they do not exist. Delaying implementation is not advised and puts at risk the viability of the business and the health and safety of the employees.
6. In the modern economy, reliance on technology and just-in-time supply chains means that certain workers must be able to access certain sites, facilities, and assets to ensure continuity of functions.
7. Government employees, such as emergency managers, and the business community need to establish and maintain lines of communication.
8. When government and businesses engage in discussions about critical infrastructure workers, they need to consider the implications of business operations beyond the jurisdiction where the asset or facility is located. Businesses can have sizeable economic and societal impacts as well as supply chain dependencies that are geographically distributed.
9. Whenever possible, jurisdictions should align access and movement control policies related to critical infrastructure workers to lower the burden of workers crossing jurisdictional boundaries.

IDENTIFYING ESSENTIAL CRITICAL INFRASTRUCTURE WORKERS

The following list of sectors and identified essential critical infrastructure workers are an initial recommended set and are intended to be overly inclusive reflecting the diversity of industries across the United States. CISA will continually solicit and accept feedback on the list (both sectors/sub sectors and identified essential workers) and will evolve the list in response to stakeholder feedback. We will also use our various stakeholder engagement mechanisms to work with partners on how they are using this list and share those lessons learned and best practices broadly. We ask that you share your feedback, both positive and negative on this list so we can provide the most useful guidance to our critical infrastructure partners. **Feedback can be sent to CISA.CAT@CISA.DHS.GOV.**



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Essential Critical Infrastructure Workforce

HEALTHCARE / PUBLIC HEALTH

- Workers providing COVID-19 testing; Workers that perform critical clinical research needed for COVID-19 response
- Caregivers (e.g., physicians, dentists, psychologists, mid-level practitioners, nurses and assistants, infection control and quality assurance personnel, pharmacists, physical and occupational therapists and assistants, social workers, speech pathologists and diagnostic and therapeutic technicians and technologists)
- Hospital and laboratory personnel (including accounting, administrative, admitting and discharge, engineering, epidemiological, source plasma and blood donation, food service, housekeeping, medical records, information technology and operational technology, nutritionists, sanitarians, respiratory therapists, etc.)
- Workers in other medical facilities (including Ambulatory Health and Surgical, Blood Banks, Clinics, Community Mental Health, Comprehensive Outpatient rehabilitation, End Stage Renal Disease, Health Departments, Home Health care, Hospices, Hospitals, Long Term Care, Organ Pharmacies, Procurement Organizations, Psychiatric Residential, Rural Health Clinics and Federally Qualified Health Centers)
- Manufacturers, technicians, logistics and warehouse operators, and distributors of medical equipment, personal protective equipment (PPE), medical gases, pharmaceuticals, blood and blood products, vaccines, testing materials, laboratory supplies, cleaning, sanitizing, disinfecting or sterilization supplies, and tissue and paper towel products
- Public health / community health workers, including those who compile, model, analyze and communicate public health information
- Blood and plasma donors and the employees of the organizations that operate and manage related activities
- Workers that manage health plans, billing, and health information, who cannot practically work remotely
- Workers who conduct community-based public health functions, conducting epidemiologic surveillance, compiling, analyzing and communicating public health information, who cannot practically work remotely
- Workers performing cybersecurity functions at healthcare and public health facilities, who cannot practically work remotely
- Workers conducting research critical to COVID-19 response
- Workers performing security, incident management, and emergency operations functions at or on behalf of healthcare entities including healthcare coalitions, who cannot practically work remotely
- Workers who support food, shelter, and social services, and other necessities of life for economically disadvantaged or otherwise needy individuals, such as those residing in shelters
- Pharmacy employees necessary for filling prescriptions
- Workers performing mortuary services, including funeral homes, crematoriums, and cemetery workers
- Workers who coordinate with other organizations to ensure the proper recovery, handling, identification, transportation, tracking, storage, and disposal of human remains and personal effects; certify cause of death; and facilitate access to mental/behavioral health services to the family members, responders, and survivors of an incident

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Essential Critical Infrastructure Workforce

LAW ENFORCEMENT, PUBLIC SAFETY, FIRST RESPONDERS

- Personnel in emergency management, law enforcement, Emergency Management Systems, fire, and corrections, including front line and management
- Emergency Medical Technicians
- 911 call center employees
- Fusion Center employees
- Hazardous material responders from government and the private sector.
- Workers – including contracted vendors – who maintain digital systems infrastructure supporting law enforcement and emergency service operations.

FOOD AND AGRICULTURE

- Workers supporting groceries, pharmacies and other retail that sells food and beverage products
- Restaurant carry-out and quick serve food operations - Carry-out and delivery food employees
- Food manufacturer employees and their supplier employees—to include those employed in food processing (packers, meat processing, cheese plants, milk plants, produce, etc.) facilities; livestock, poultry, seafood slaughter facilities; pet and animal feed processing facilities; human food facilities producing by-products for animal food; beverage production facilities; and the production of food packaging
- Farm workers to include those employed in animal food, feed, and ingredient production, packaging, and distribution; manufacturing, packaging, and distribution of veterinary drugs; truck delivery and transport; farm and fishery labor needed to produce our food supply domestically
- Farm workers and support service workers to include those who field crops; commodity inspection; fuel ethanol facilities; storage facilities; and other agricultural inputs
- Employees and firms supporting food, feed, and beverage distribution, including warehouse workers, vendor-managed inventory controllers and blockchain managers
- Workers supporting the sanitation of all food manufacturing processes and operations from wholesale to retail
- Company cafeterias - in-plant cafeterias used to feed employees
- Workers in food testing labs in private industries and in institutions of higher education
- Workers essential for assistance programs and government payments
- Employees of companies engaged in the production of chemicals, medicines, vaccines, and other substances used by the food and agriculture industry, including pesticides, herbicides, fertilizers, minerals, enrichments, and other agricultural production aids
- Animal agriculture workers to include those employed in veterinary health; manufacturing and distribution of animal medical materials, animal vaccines, animal drugs, feed ingredients, feed, and bedding, etc.; transportation of live animals, animal medical materials; transportation of deceased animals for disposal; raising of animals for food; animal production operations; slaughter and packing plants and associated regulatory and government workforce
- Workers who support the manufacture and distribution of forest products, including, but not limited to timber, paper, and other wood products
- Employees engaged in the manufacture and maintenance of equipment and other infrastructure necessary to agricultural production and distribution

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Essential Critical Infrastructure Workforce

ENERGY

Electricity industry:

- Workers who maintain, ensure, or restore the generation, transmission, and distribution of electric power, including call centers, utility workers, reliability engineers and fleet maintenance technicians
- Workers needed for safe and secure operations at nuclear generation
- Workers at generation, transmission, and electric blackstart facilities
- Workers at Reliability Coordinator (RC), Balancing Authorities (BA), and primary and backup Control Centers (CC), including but not limited to independent system operators, regional transmission organizations, and balancing authorities
- Mutual assistance personnel
- IT and OT technology staff – for EMS (Energy Management Systems) and Supervisory Control and Data Acquisition (SCADA) systems, and utility data centers; Cybersecurity engineers; cybersecurity risk management
- Vegetation management crews and traffic workers who support
- Environmental remediation/monitoring technicians
- Instrumentation, protection, and control technicians

Petroleum workers:

- Petroleum product storage, pipeline, marine transport, terminals, rail transport, road transport
- Crude oil storage facilities, pipeline, and marine transport
- Petroleum refinery facilities
- Petroleum security operations center employees and workers who support emergency response services
- Petroleum operations control rooms/centers
- Petroleum drilling, extraction, production, processing, refining, terminal operations, transporting, and retail for use as end-use fuels or feedstocks for chemical manufacturing
- Onshore and offshore operations for maintenance and emergency response
- Retail fuel centers such as gas stations and truck stops, and the distribution systems that support them

Natural and propane gas workers:

- Natural gas transmission and distribution pipelines, including compressor stations
- Underground storage of natural gas
- Natural gas processing plants, and those that deal with natural gas liquids
- Liquefied Natural Gas (LNG) facilities
- Natural gas security operations center, natural gas operations dispatch and control rooms/centers natural gas emergency response and customer emergencies, including natural gas leak calls
- Drilling, production, processing, refining, and transporting natural gas for use as end-use fuels, feedstocks for chemical manufacturing, or use in electricity generation
- Propane gas dispatch and control rooms and emergency response and customer emergencies, including propane leak calls
- Propane gas service maintenance and restoration, including call centers

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Essential Critical Infrastructure Workforce

- Processing, refining, and transporting natural liquids, including propane gas, for use as end-use fuels or feedstocks for chemical manufacturing
- Propane gas storage, transmission, and distribution centers

WATER AND WASTEWATER

Employees needed to operate and maintain drinking water and wastewater/drainage infrastructure, including:

- Operational staff at water authorities
- Operational staff at community water systems
- Operational staff at wastewater treatment facilities
- Workers repairing water and wastewater conveyances and performing required sampling or monitoring
- Operational staff for water distribution and testing
- Operational staff at wastewater collection facilities
- Operational staff and technical support for SCADA Control systems
- Chemical disinfectant suppliers for wastewater and personnel protection
- Workers that maintain digital systems infrastructure supporting water and wastewater operations

TRANSPORTATION AND LOGISTICS

- Employees supporting or enabling transportation functions, including dispatchers, maintenance and repair technicians, warehouse workers, truck stop and rest area workers, and workers that maintain and inspect infrastructure (including those that require cross-border travel)
- Employees of firms providing services that enable logistics operations, including cooling, storing, packaging, and distributing products for wholesale or retail sale or use.
- Mass transit workers
- Workers responsible for operating dispatching passenger, commuter and freight trains and maintaining rail infrastructure and equipment
- Maritime transportation workers - port workers, mariners, equipment operators
- Truck drivers who haul hazardous and waste materials to support critical infrastructure, capabilities, functions, and services
- Automotive repair and maintenance facilities
- Manufacturers and distributors (to include service centers and related operations) of packaging materials, pallets, crates, containers, and other supplies needed to support manufacturing, packaging staging and distribution operations
- Postal and shipping workers, to include private companies
- Employees who repair and maintain vehicles, aircraft, rail equipment, marine vessels, and the equipment and infrastructure that enables operations that encompass movement of cargo and passengers
- Air transportation employees, including air traffic controllers, ramp personnel, aviation security, and aviation management
- Workers who support the maintenance and operation of cargo by air transportation, including flight crews, maintenance, airport operations, and other on- and off- airport facilities workers

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Essential Critical Infrastructure Workforce

PUBLIC WORKS

- Workers who support the operation, inspection, and maintenance of essential dams, locks and levees
- Workers who support the operation, inspection, and maintenance of essential public works facilities and operations, including bridges, water and sewer main breaks, fleet maintenance personnel, construction of critical or strategic infrastructure, traffic signal maintenance, emergency location services for buried utilities, maintenance of digital systems infrastructure supporting public works operations, and other emergent issues
- Workers such as plumbers, electricians, exterminators, and other service providers who provide services that are necessary to maintaining the safety, sanitation, and essential operation of residences
- Support, such as road and line clearing, to ensure the availability of needed facilities, transportation, energy and communications
- Support to ensure the effective removal, storage, and disposal of residential and commercial solid waste and hazardous waste

COMMUNICATIONS AND INFORMATION TECHNOLOGY

Communications:

- Maintenance of communications infrastructure- including privately owned and maintained communication systems- supported by technicians, operators, call-centers, wireline and wireless providers, cable service providers, satellite operations, undersea cable landing stations, Internet Exchange Points, and manufacturers and distributors of communications equipment
- Workers who support radio, television, and media service, including, but not limited to front line news reporters, studio, and technicians for newsgathering and reporting
- Workers at Independent System Operators and Regional Transmission Organizations, and Network Operations staff, engineers and/or technicians to manage the network or operate facilities
- Engineers, technicians and associated personnel responsible for infrastructure construction and restoration, including contractors for construction and engineering of fiber optic cables
- Installation, maintenance and repair technicians that establish, support or repair service as needed
- Central office personnel to maintain and operate central office, data centers, and other network office facilities
- Customer service and support staff, including managed and professional services as well as remote providers of support to transitioning employees to set up and maintain home offices, who interface with customers to manage or support service environments and security issues, including payroll, billing, fraud, and troubleshooting
- Dispatchers involved with service repair and restoration

Information Technology:

- Workers who support command centers, including, but not limited to Network Operations Command Center, Broadcast Operations Control Center and Security Operations Command Center
- Data center operators, including system administrators, HVAC & electrical engineers, security personnel, IT managers, data transfer solutions engineers, software and hardware engineers, and database administrators
- Client service centers, field engineers, and other technicians supporting critical infrastructure, as well as

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Essential Critical Infrastructure Workforce

manufacturers and supply chain vendors that provide hardware and software, and information technology equipment (to include microelectronics and semiconductors) for critical infrastructure

- Workers responding to cyber incidents involving critical infrastructure, including medical facilities, SLTT governments and federal facilities, energy and utilities, and banks and financial institutions, and other critical infrastructure categories and personnel
- Workers supporting the provision of essential global, national and local infrastructure for computing services (incl. cloud computing services), business infrastructure, web-based services, and critical manufacturing
- Workers supporting communications systems and information technology used by law enforcement, public safety, medical, energy and other critical industries
- Support required for continuity of services, including janitorial/cleaning personnel

OTHER COMMUNITY-BASED GOVERNMENT OPERATIONS AND ESSENTIAL FUNCTIONS

- Workers to ensure continuity of building functions
- Security staff to maintain building access control and physical security measures
- Elections personnel
- Federal, State, and Local, Tribal, and Territorial employees who support Mission Essential Functions and communications networks
- Trade Officials (FTA negotiators; international data flow administrators)
- Weather forecasters
- Workers that maintain digital systems infrastructure supporting other critical government operations
- Workers at operations centers necessary to maintain other essential functions
- Workers who support necessary credentialing, vetting and licensing operations for transportation workers
- Customs workers who are critical to facilitating trade in support of the national emergency response supply chain
- Educators supporting public and private K-12 schools, colleges, and universities for purposes of facilitating distance learning or performing other essential functions, if operating under rules for social distancing
- Hotel Workers where hotels are used for COVID-19 mitigation and containment measures

CRITICAL MANUFACTURING

- Workers necessary for the manufacturing of materials and products needed for medical supply chains, transportation, energy, communications, food and agriculture, chemical manufacturing, nuclear facilities, the operation of dams, water and wastewater treatment, emergency services, and the defense industrial base.

HAZARDOUS MATERIALS

- Workers at nuclear facilities, workers managing medical waste, workers managing waste from pharmaceuticals and medical material production, and workers at laboratories processing test kits
- Workers who support hazardous materials response and cleanup
- Workers who maintain digital systems infrastructure supporting hazardous materials management operations

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Essential Critical Infrastructure Workforce

FINANCIAL SERVICES

- Workers who are needed to process and maintain systems for processing financial transactions and services (e.g., payment, clearing, and settlement; wholesale funding; insurance services; and capital markets activities)
- Workers who are needed to provide consumer access to banking and lending services, including ATMs, and to move currency and payments (e.g., armored cash carriers)
- Workers who support financial operations, such as those staffing data and security operations centers

CHEMICAL

- Workers supporting the chemical and industrial gas supply chains, including workers at chemical manufacturing plants, workers in laboratories, workers at distribution facilities, workers who transport basic raw chemical materials to the producers of industrial and consumer goods, including hand sanitizers, food and food additives, pharmaceuticals, textiles, and paper products.
- Workers supporting the safe transportation of chemicals, including those supporting tank truck cleaning facilities and workers who manufacture packaging items
- Workers supporting the production of protective cleaning and medical solutions, personal protective equipment, and packaging that prevents the contamination of food, water, medicine, among others essential products
- Workers supporting the operation and maintenance of facilities (particularly those with high risk chemicals and/or sites that cannot be shut down) whose work cannot be done remotely and requires the presence of highly trained personnel to ensure safe operations, including plant contract workers who provide inspections
- Workers who support the production and transportation of chlorine and alkali manufacturing, single-use plastics, and packaging that prevents the contamination or supports the continued manufacture of food, water, medicine, and other essential products, including glass container manufacturing

DEFENSE INDUSTRIAL BASE

- Workers who support the essential services required to meet national security commitments to the federal government and U.S. Military. These individuals include but are not limited to, aerospace; mechanical and software engineers, manufacturing/production workers; IT support; security staff; security personnel; intelligence support, aircraft and weapon system mechanics and maintainers
- Personnel working for companies, and their subcontractors, who perform under contract to the Department of Defense providing materials and services to the Department of Defense, and government-owned/contractor-operated and government-owned/government-operated facilities

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On March 19, 2020, Governor Newsom issued Executive Order N-33-20 directing all residents immediately to heed current State public health directives to stay home, except as needed to maintain continuity of operations of essential critical infrastructure sectors and additional sectors as the State Public Health Officer may designate as critical to protect health and well-being of all Californians.

In accordance with this order, the State Public Health Officer has designated the following list of “Essential Critical Infrastructure Workers” to help state, local, tribal, and industry partners as they work to protect communities, while ensuring continuity of functions critical to public health and safety, as well as economic and national security.

HEALTHCARE / PUBLIC HEALTH

Sector Profile

The Healthcare and Public Health (HPH) Sector is large, diverse, and open, spanning both the public and private sectors. It includes publicly accessible healthcare facilities, research centers, suppliers, manufacturers, and other physical assets and vast, complex public-private information technology systems required for care delivery and to support the rapid, secure transmission and storage of large amounts of HPH data.

Essential Workforce

- Workers providing COVID-19 testing; Workers that perform critical clinical research needed for COVID-19 response.
- Health care providers and caregivers (e.g., physicians, dentists, psychologists, mid-level practitioners, nurses and assistants, infection control and quality assurance personnel, pharmacists, physical and occupational therapists and assistants, social workers, speech pathologists and diagnostic and therapeutic technicians and technologists).
- Hospital and laboratory personnel (including accounting, administrative, admitting and discharge, engineering, epidemiological, source plasma and blood donation, food service, housekeeping, medical records, information technology and operational technology, nutritionists, sanitarians, respiratory therapists, etc.).
- Workers in other medical facilities (including Ambulatory Health and Surgical, Blood Banks, Clinics, Community Mental Health, Comprehensive Outpatient rehabilitation, End Stage Renal Disease, Health Departments, Home Health care, Hospices, Hospitals, Long Term Care, Organ Pharmacies, Procurement Organizations, Psychiatric, Residential, Rural Health Clinics and Federally Qualified Health Centers, cannabis retailers).
- Manufacturers, technicians, logistics and warehouse operators, and distributors of medical equipment, personal protective equipment (PPE), medical gases, pharmaceuticals, blood and blood products, vaccines, testing materials, laboratory supplies, cleaning, sanitizing, disinfecting or sterilization supplies, [personal care/hygiene products](#), and tissue and paper towel products.

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- Public health / community health workers, including those who compile, model, analyze and communicate public health information.
- Behavioral health workers (including mental and substance use disorder) responsible for coordination, outreach, engagement, and treatment to individuals in need of mental health and/or substance use disorder services.
- Blood and plasma donors and the employees of the organizations that operate and manage related activities.
- Workers that manage health plans, billing, and health information, who cannot practically work remotely.
- Workers who conduct community-based public health functions, conducting epidemiologic surveillance, compiling, analyzing and communicating public health information, who cannot practically work remotely.
- Workers who provide support to vulnerable populations to ensure their health and well-being including family care providers
- Workers performing cybersecurity functions at healthcare and public health facilities, who cannot practically work remotely.
- Workers conducting research critical to COVID-19 response.
- Workers performing security, incident management, and emergency operations functions at or on behalf of healthcare entities including healthcare coalitions, who cannot practically work remotely.
- Workers who support food, shelter, and social services, and other necessities of life for economically disadvantaged or otherwise needy individuals, such as those residing in shelters.
- Pharmacy employees necessary for filling prescriptions.
- Workers performing mortuary services, including funeral homes, crematoriums, and cemetery workers.
- Workers who coordinate with other organizations to ensure the proper recovery, handling, identification, transportation, tracking, storage, and disposal of human remains and personal effects; certify cause of death; and facilitate access to behavioral health services to the family members, responders, and survivors of an incident.
- Workers supporting veterinary hospitals and clinics

EMERGENCY SERVICES SECTOR

Sector Profile

The Emergency Services Sector (ESS) is a community of highly-skilled, trained personnel, along with the physical and cyber resources, that provide a wide range of prevention, preparedness, response, and recovery services during both day-to-day operations and incident response. The ESS includes geographically distributed facilities and equipment in both paid and volunteer capacities organized primarily at the federal, state, local, tribal, and territorial levels of government, such as city police departments and fire stations, county sheriff's offices, Department of Defense police and fire departments, and town public works departments. The ESS also includes private sector resources, such

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as industrial fire departments, private security organizations, and private emergency medical services providers.

Essential Workforce - Law Enforcement, Public Safety and First Responders

- Including front line and management, personnel include emergency management, law enforcement, Emergency Management Systems, fire, and corrections, search and rescue, tactical teams including maritime, aviation, and canine units.
- Emergency Medical Technicians
- Public Safety Answering Points and 911 call center employees
- Fusion Center employees
- Fire Mitigation Activities
- Hazardous material responders and hazardous devices teams, from government and the private sector.
- Workers – including contracted vendors -- who maintain digital systems infrastructure supporting law enforcement and emergency service operations.
- Private security, private fire departments, and private emergency medical services personnel.
- County workers responding to abuse and neglect of children, elders and dependent adults.
- [Animal control officers and humane officers](#)

Essential Workforce - Public Works

- Workers who support the operation, inspection, and maintenance of essential dams, locks and levees
- Workers who support the operation, inspection, and maintenance of essential public works facilities and operations, including bridges, water and sewer main breaks, fleet maintenance personnel, construction of critical or strategic infrastructure, [construction material suppliers](#), traffic signal maintenance, emergency location services for buried utilities, maintenance of digital systems infrastructure supporting public works operations, and other emergent issues
- Workers such as plumbers, electricians, exterminators, and other service providers who provide services that are necessary to maintaining the safety, sanitation, and essential operation of residences.
- Support, such as road and line clearing, to ensure the availability of needed facilities, transportation, energy and communications Support to ensure the effective removal, storage, and disposal of residential and commercial solid waste and hazardous waste.

FOOD AND AGRICULTURE

Sector Profile

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The Food and Agricultural (FA) Sector is composed of complex production, processing, and delivery systems and has the capacity to feed people and animals both within and beyond the boundaries of the United States. Beyond domestic food production, the FA Sector also imports many ingredients and finished products, leading to a complex web of growers, processors, suppliers, transporters, distributors, and consumers. This sectors is critical to maintaining and securing our food supply.

Essential Workforce

- Workers supporting groceries, pharmacies, and other retail that sells food and beverage products, including but not limited to Grocery stores, Corner stores and convenience stores, including liquor stores that sell food, Farmers' markets, Food banks, Farm and produce stands, Supermarkets, Similar food retail establishments, Big box stores that sell groceries and essentials
- Restaurant carry-out and quick serve food operations – including food preparation, carry-out and delivery food employees
- Food manufacturer employees and their supplier employees—to include those employed in food processing (packers, meat processing, cheese plants, milk plants, produce, etc.) facilities; livestock, poultry, seafood slaughter facilities; pet and animal feed processing facilities; human food facilities producing by-products for animal food; beverage production facilities; and the production of food packaging
- Farm workers to include those employed in animal food, feed, and ingredient production, packaging, and distribution; manufacturing, packaging, and distribution of veterinary drugs; truck delivery and transport; farm and fishery labor needed to produce our food supply domestically
- Farm workers and support service workers to include those who field crops; commodity inspection; fuel ethanol facilities; storage facilities; and other agricultural inputs
- Employees and firms supporting food, feed, and beverage distribution (including curbside distribution and deliveries), including warehouse workers, vendor-managed inventory controllers, blockchain managers, distribution
- Workers supporting the sanitation of all food manufacturing processes and operations from wholesale to retail
- Company cafeterias - in-plant cafeterias used to feed employees
- Workers in food testing labs in private industries and in institutions of higher education
- Workers essential for assistance programs and government payments
- Workers supporting cannabis retail and dietary supplement retail
- Employees of companies engaged in the production of chemicals, medicines, vaccines, and other substances used by the food and agriculture industry, including pesticides, herbicides, fertilizers, minerals, enrichments, and other agricultural production aids
- Animal agriculture workers to include those employed in veterinary health; manufacturing and distribution of animal medical materials, animal vaccines, animal drugs, feed ingredients, feed, and bedding, etc.; transportation of live animals, animal medical materials; transportation of deceased animals for disposal; raising of animals for food; animal production operations; slaughter and packing plants and associated regulatory and government workforce
- Workers who support the manufacture and distribution of forest products, including, but not limited to timber, paper, and other wood products

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- Employees engaged in the manufacture and maintenance of equipment and other infrastructure necessary to agricultural production and distribution

ENERGY

Sector Profile

The Energy Sector consists of widely-diverse and geographically-dispersed critical assets and systems that are often interdependent of one another. This critical infrastructure is divided into three interrelated segments or subsectors—electricity, oil, and natural gas—to include the production, refining, storage, and distribution of oil, gas, and electric power, except for hydroelectric and commercial nuclear power facilities and pipelines. The Energy Sector supplies fuels to the transportation industry, electricity to households and businesses, and other sources of energy that are integral to growth and production across the Nation. In turn, it depends on the Nation's transportation, information technology, communications, finance, water, and government infrastructures.

Essential Workforce - Electricity industry:

- Workers who maintain, ensure, or restore the generation, transmission, and distribution of electric power, including call centers, utility workers, reliability engineers and fleet maintenance technicians
- Workers needed for safe and secure operations at nuclear generation
- Workers at generation, transmission, and electric blackstart facilities
- Workers at Reliability Coordinator (RC), Balancing Authorities (BA), and primary and backup Control Centers (CC), including but not limited to independent system operators, regional transmission organizations, and balancing authorities
- Mutual assistance personnel
- IT and OT technology staff – for EMS (Energy Management Systems) and Supervisory Control and Data
- Acquisition (SCADA) systems, and utility data centers; Cybersecurity engineers; cybersecurity risk management
- Vegetation management crews and traffic workers who support
- Environmental remediation/monitoring technicians
- Instrumentation, protection, and control technicians

Essential Workforce - Petroleum workers:

- Petroleum product storage, pipeline, marine transport, terminals, rail transport, road transport
- Crude oil storage facilities, pipeline, and marine transport
- Petroleum refinery facilities
- Petroleum security operations center employees and workers who support emergency response services

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- Petroleum operations control rooms/centers
- Petroleum drilling, extraction, production, processing, refining, terminal operations, transporting, and retail for use as end-use fuels or feedstocks for chemical manufacturing
- Onshore and offshore operations for maintenance and emergency response
- Retail fuel centers such as gas stations and truck stops, and the distribution systems that support them.

Essential Workforce - Natural and propane gas workers:

- Natural gas transmission and distribution pipelines, including compressor stations
- Underground storage of natural gas
- Natural gas processing plants, and those that deal with natural gas liquids
- Liquefied Natural Gas (LNG) facilities
- Natural gas security operations center, natural gas operations dispatch and control rooms/centers natural gas emergency response and customer emergencies, including natural gas leak calls
- Drilling, production, processing, refining, and transporting natural gas for use as end-use fuels, feedstocks for chemical manufacturing, or use in electricity generation
- Propane gas dispatch and control rooms and emergency response and customer emergencies, including propane leak calls
- Propane gas service maintenance and restoration, including call centers
- Processing, refining, and transporting natural liquids, including propane gas, for use as end-use fuels or feedstocks for chemical manufacturing
- Propane gas storage, transmission, and distribution centers

WATER AND WASTEWATER

Sector Profile

The Water and Wastewater Sector is a complex sector composed of drinking water and wastewater infrastructure of varying sizes and ownership types. Multiple governing authorities pertaining to the Water and Wastewater Sector provide for public health, environmental protection, and security measures, among others.

Essential Workforce

Employees needed to operate and maintain drinking water and wastewater/drainage infrastructure, including:

- Operational staff at water authorities
- Operational staff at community water systems
- Operational staff at wastewater treatment facilities
- Workers repairing water and wastewater conveyances and performing required sampling or monitoring

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- Operational staff for water distribution and testing
- Operational staff at wastewater collection facilities
- Operational staff and technical support for SCADA Control systems
- Chemical disinfectant suppliers for wastewater and personnel protection
- Workers that maintain digital systems infrastructure supporting water and wastewater operations

TRANSPORTATION AND LOGISTICS

Sector Profile

The Transportation Systems Sector consists of seven key subsectors, or modes:

- Aviation includes aircraft, air traffic control systems, and airports, heliports, and landing strips. Commercial aviation services at civil and joint-use military airports, heliports, and sea plane bases. In addition, the aviation mode includes commercial and recreational aircraft (manned and unmanned) and a wide-variety of support services, such as aircraft repair stations, fueling facilities, navigation aids, and flight schools.
- Highway and Motor Carrier encompasses roadway, bridges, and tunnels. Vehicles include trucks, including those carrying hazardous materials; other commercial vehicles, including commercial motorcoaches and school buses; vehicle and driver licensing systems; taxis, transportation services including Transportation Network Companies, and delivery services including Delivery Network Companies; traffic management systems; AND cyber systems used for operational management.
- Maritime Transportation System consists of coastline, ports, waterways, and intermodal landside connections that allow the various modes of transportation to move people and goods to, from, and on the water.
- Mass Transit and Passenger Rail includes terminals, operational systems, and supporting infrastructure for passenger services by transit buses, trolleybuses, monorail, heavy rail—also known as subways or metros—light rail, passenger rail, and vanpool/rideshare.
- Pipeline Systems consist of pipelines carrying natural gas hazardous liquids, as well as various chemicals. Above-ground assets, such as compressor stations and pumping stations, are also included.
- Freight Rail consists of major carriers, smaller railroads, active railroad, freight cars, and locomotives.
- Postal and Shipping includes large integrated carriers, regional and local courier services, mail services, mail management firms, and chartered and delivery services.

Essential Workforce

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- Employees supporting or enabling transportation functions, including dispatchers, maintenance and repair technicians, warehouse workers, truck stop and rest area workers, and workers that maintain and inspect infrastructure (including those that require cross-border travel)
- Employees of firms providing services that enable logistics operations, including cooling, storing, packaging, and distributing products for wholesale or retail sale or use.
- Mass transit workers
- Taxis, transportation services including Transportation Network Companies, and delivery services including Delivery Network Companies
- Workers responsible for operating dispatching passenger, commuter and freight trains and maintaining rail infrastructure and equipment
- Maritime transportation workers - port workers, mariners, equipment operators
- Truck drivers who haul hazardous and waste materials to support critical infrastructure, capabilities, functions, and services
- Automotive repair and maintenance facilities
- Manufacturers and distributors (to include service centers and related operations) of packaging materials, pallets, crates, containers, and other supplies needed to support manufacturing, packaging staging and distribution operations
- Postal and shipping workers, to include private companies
- Employees who repair and maintain vehicles, aircraft, rail equipment, marine vessels, and the equipment and infrastructure that enables operations that encompass movement of cargo and passengers
- Air transportation employees, including air traffic controllers, ramp personnel, aviation security, and aviation management
- Workers who support the maintenance and operation of cargo by air transportation, including flight crews, maintenance, airport operations, and other on- and off- airport facilities workers

COMMUNICATIONS AND INFORMATION TECHNOLOGY

Sector Profile

The Communications Sector provides products and services that support the efficient operation of today's global information-based society. Communication networks enable people around the world to contact one another, access information instantly, and communicate from remote areas. This involves creating a link between a sender (including voice signals) and one or more recipients using technology (e.g., a telephone system or the Internet) to transmit information from one location to another. Technologies are changing at a rapid pace, increasing the number of products, services, service providers, and communication options. The national communications architecture is a complex collection of networks that are owned and operated by individual service providers. Many of this sector's products and services are foundational or necessary for the operations and services provided by other critical infrastructure sectors. The nature of communication networks involve both physical infrastructure (buildings, switches, towers, antennas, etc.) and cyber infrastructure (routing and

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switching software, operational support systems, user applications, etc.), representing a holistic challenge to address the entire physical-cyber infrastructure.

The IT Sector provides products and services that support the efficient operation of today's global information-based society and are integral to the operations and services provided by other critical infrastructure Sectors. The IT Sector is comprised of small and medium businesses, as well as large multinational companies. Unlike many critical infrastructure Sectors composed of finite and easily identifiable physical assets, the IT Sector is a functions-based Sector that comprises not only physical assets but also virtual systems and networks that enable key capabilities and services in both the public and private sectors.

Essential Workforce - Communications:

- Maintenance of communications infrastructure- including privately owned and maintained communication systems- supported by technicians, operators, call-centers, wireline and wireless providers, cable service providers, satellite operations, undersea cable landing stations, Internet Exchange Points, and manufacturers and distributors of communications equipment
- Workers who support radio, television, and media service, including, but not limited to front line news reporters, studio, and technicians for newsgathering and reporting
- Workers at Independent System Operators and Regional Transmission Organizations, and Network Operations staff, engineers and/or technicians to manage the network or operate facilities
- Engineers, technicians and associated personnel responsible for infrastructure construction and restoration, including contractors for construction and engineering of fiber optic cables
- Installation, maintenance and repair technicians that establish, support or repair service as needed
- Central office personnel to maintain and operate central office, data centers, and other network office facilities
- Customer service and support staff, including managed and professional services as well as remote providers of support to transitioning employees to set up and maintain home offices, who interface with customers to manage or support service environments and security issues, including payroll, billing, fraud, and troubleshooting
- Dispatchers involved with service repair and restoration

Essential Workforce - Information Technology:

- Workers who support command centers, including, but not limited to Network Operations Command Center, Broadcast Operations Control Center and Security Operations Command Center
- Data center operators, including system administrators, HVAC & electrical engineers, security personnel, IT managers, data transfer solutions engineers, software and hardware engineers, and database administrators
- Client service centers, field engineers, and other technicians supporting critical infrastructure, as well as manufacturers and supply chain vendors that provide hardware and software, and

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information technology equipment (to include microelectronics and semiconductors) for critical infrastructure

- Workers responding to cyber incidents involving critical infrastructure, including medical facilities, SLTT governments and federal facilities, energy and utilities, and banks and financial institutions, and other critical infrastructure categories and personnel
- Workers supporting the provision of essential global, national and local infrastructure for computing services (incl. cloud computing services), business infrastructure, web-based services, and critical manufacturing
- Workers supporting communications systems and information technology used by law enforcement, public safety, medical, energy and other critical industries
- Support required for continuity of services, including janitorial/cleaning personnel

OTHER COMMUNITY-BASED GOVERNMENT OPERATIONS AND ESSENTIAL FUNCTIONS

Essential Workforce

- Critical government workers, as defined by the employer and consistent with Continuity of Operations Plans and Continuity of Government plans.
- County workers responsible for determining eligibility for safety net benefits
- The Courts, consistent with [guidance](#) released by the California Chief Justice
- Workers to ensure continuity of building functions
- Security staff to maintain building access control and physical security measures
- Elections personnel
- Federal, State, and Local, Tribal, and Territorial employees who support Mission Essential Functions and communications networks
- Trade Officials (FTA negotiators; international data flow administrators)
- Weather forecasters
- Workers that maintain digital systems infrastructure supporting other critical government operations
- Workers at operations centers necessary to maintain other essential functions
- Workers who support necessary credentialing, vetting and licensing operations for transportation workers
- Workers who are critical to facilitating trade in support of the national, state, and local emergency response supply chain
- Workers supporting public and private childcare establishments, pre-K establishments, K-12 schools, colleges, and universities for purposes of distance learning, provision of school meals, or care and supervision of minors to support essential workforce across all sectors

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- Workers and instructors supporting academies and training facilities and courses for the purpose of graduating students and cadets that comprise the essential workforce for all identified critical sectors
- Hotel Workers where hotels are used for COVID-19 mitigation and containment measures, including measures to protect homeless populations.
- Construction Workers who support the construction, operation, inspection, and maintenance of construction sites and construction projects (including housing construction)
- Workers such as plumbers, electricians, exterminators, and other service providers who provide services that are necessary to maintaining the safety, sanitation, [construction material sources](#), and essential operation of construction sites and construction projects (including those that support such projects to ensure the availability of needed facilities, transportation, energy and communications; and support to ensure the effective removal, storage, and disposal of solid waste and hazardous waste)
- Commercial Retail Stores, that supply essential sectors, including convenience stores, pet supply stores, auto supplies and repair, hardware and home improvement, and home appliance retailers
- Workers supporting the entertainment industries, studios, and other related establishments, provided they follow covid-19 public health guidance around social distancing.
- Workers critical to operating Rental Car companies that facilitate continuity of operations for essential workforces, and other essential travel
- Workers that provide or determine eligibility for food, shelter, in-home supportive services, child welfare, adult protective services and social services, and other necessities of life for economically disadvantaged or otherwise needy individuals (including family members)
- Professional services, such as legal or accounting services, when necessary to assist in compliance with legally mandated activities and critical sector services
- Faith based services that are provided through streaming or other technology
- Laundromats and laundry services
- [Workers at animal care facilities that provide food, shelter, veterinary and/or routine care and other necessities of life for animals.](#)

CRITICAL MANUFACTURING

Sector Profile

The Critical Manufacturing Sector identifies several industries to serve as the core of the sector: Primary Metals Manufacturing, Machinery Manufacturing, Electrical Equipment, Appliance, and Component Manufacturing, Transportation Equipment Manufacturing Products made by these manufacturing industries are essential to many other critical infrastructure sectors.

Essential Workforce

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- Workers necessary for the manufacturing of materials and products needed for medical supply chains, transportation, energy, communications, food and agriculture, chemical manufacturing, nuclear facilities, the operation of dams, water and wastewater treatment, emergency services, and the defense industrial base.

HAZARDOUS MATERIALS

Essential Workforce

- Workers at nuclear facilities, workers managing medical waste, workers managing waste from pharmaceuticals and medical material production, and workers at laboratories processing test kits
- Workers who support hazardous materials response and cleanup
- Workers who maintain digital systems infrastructure supporting hazardous materials management operations

FINANCIAL SERVICES

Sector Profile

The Financial Services Sector includes thousands of depository institutions, providers of investment products, insurance companies, other credit and financing organizations, and the providers of the critical financial utilities and services that support these functions. Financial institutions vary widely in size and presence, ranging from some of the world's largest global companies with thousands of employees and many billions of dollars in assets, to community banks and credit unions with a small number of employees serving individual communities. Whether an individual savings account, financial derivatives, credit extended to a large organization, or investments made to a foreign country, these products allow customers to: Deposit funds and make payments to other parties; Provide credit and liquidity to customers; Invest funds for both long and short periods; Transfer financial risks between customers.

Essential Workforce

- Workers who are needed to process and maintain systems for processing financial transactions and services (e.g., payment, clearing, and settlement; wholesale funding; insurance services; and capital markets activities)
- Workers who are needed to provide consumer access to banking and lending services, including ATMs, and to move currency and payments (e.g., armored cash carriers)
- Workers who support financial operations, such as those staffing data and security operations centers

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CHEMICAL

Sector Profile

The Chemical Sector—composed of a complex, global supply chain—converts various raw materials into diverse products that are essential to modern life. Based on the end product produced, the sector can be divided into five main segments, each of which has distinct characteristics, growth dynamics, markets, new developments, and issues: Basic chemicals; Specialty chemicals; Agricultural chemicals; Pharmaceuticals; Consumer products

Essential Workforce

- Workers supporting the chemical and industrial gas supply chains, including workers at chemical manufacturing plants, workers in laboratories, workers at distribution facilities, workers who transport basic raw chemical materials to the producers of industrial and consumer goods, including hand sanitizers, food and food additives, pharmaceuticals, textiles, and paper products.
- Workers supporting the safe transportation of chemicals, including those supporting tank truck cleaning facilities and workers who manufacture packaging items
- Workers supporting the production of protective cleaning and medical solutions, personal protective equipment, and packaging that prevents the contamination of food, water, medicine, among others essential products
- Workers supporting the operation and maintenance of facilities (particularly those with high risk chemicals and/ or sites that cannot be shut down) whose work cannot be done remotely and requires the presence of highly trained personnel to ensure safe operations, including plant contract workers who provide inspections
- Workers who support the production and transportation of chlorine and alkali manufacturing, single-use plastics, and packaging that prevents the contamination or supports the continued manufacture of food, water, medicine, and other essential products, including glass container manufacturing

DEFENSE INDUSTRIAL BASE

Sector Profile

The Defense Industrial Base Sector is the worldwide industrial complex that enables research and development, as well as design, production, delivery, and maintenance of military weapons systems, subsystems, and components or parts, to meet U.S. military requirements. The Defense Industrial Base partnership consists of Department of Defense components, Defense Industrial Base companies and their subcontractors who perform under contract to the Department of Defense, companies providing

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incidental materials and services to the Department of Defense, and government-owned/contractor-operated and government-owned/government-operated facilities. Defense Industrial Base companies include domestic and foreign entities, with production assets located in many countries. The sector provides products and services that are essential to mobilize, deploy, and sustain military operations.

Essential Workforce

- Workers who support the essential services required to meet national security commitments to the federal government and U.S. Military. These individuals, include but are not limited to, aerospace; mechanical and software engineers, manufacturing/production workers; IT support; security staff; security personnel; intelligence support, aircraft and weapon system mechanics and maintainers
- Personnel working for companies, and their subcontractors, who perform under contract to the Department of Defense providing materials and services to the Department of Defense, and government-owned/contractor-operated and government-owned/government-operated facilities

4/26/2020

Coronavirus: Gun stores essential? Newsom punts to counties

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Coronavirus: Are gun stores essential? Governor Newsom sidesteps that question, leaves it to the counties

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Many gun shops stayed open, but counties worried about a run on guns will have to take action to close them



TRACY, CA – MARCH 25: Customers wait to be let inside the Elite Armory Plus gun store during California's shelter-in-place order in Tracy, Calif., on Wednesday, March 25, 2020. The shelter-in-place order was put in place to contain the spread of the coronavirus. (Doug Duran/Bay Area News Group)

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Coronavirus: Gun stores essential? Newsom punts to counties

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Gov. Gavin Newsom on Wednesday wouldn't say whether his unprecedented statewide shelter-in-place order means gun stores in California have to close as non-essential businesses, instead leaving that decision to each of the state's 58 counties.

"I believe in people's right to bear arms but I'll defer to the sheriff in this instance, the sheriffs in their respective jurisdictions," said Newsom during a press conference.

That's sure to muddle what some local leaders say is a growing public safety issue: panicked buying of firearms and some stores defying tougher restrictions in Bay Area counties that don't define them as essential businesses during the unprecedented lockdown to stop the spread of the coronavirus.

"We don't want a run on guns," Contra Costa County Supervisor John Gioia said Wednesday. "It's a public safety issue. Law enforcement is well prepared to handle any issues. People don't need to stock up on guns."

Gioia said the joint shelter-in-place order issued on March 16 by Alameda, Contra Costa, Santa Clara, San Mateo, San Francisco, and Marin counties clearly deemed gun stores non-essential.

A check on the status of 75 gun stores in 17 Northern California counties by this news organization found at least 32 were either fully open for business or allowing customers to come in and pick up weapons that had already been ordered. At least 12 were closed. The status of the others was unclear.

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Coronavirus: Gun stores essential? Newsom punts to counties

Stores were open in Pleasant Hill, Antioch, Brentwood and El Cerrito in Contra Costa County, Fremont in Alameda County, and Pacifica in San Mateo County. Gioia said the Contra Costa stores would be closed.

In Marin County, the owner of Marin Firearms recorded a phone answering machine message saying the store was ordered to close: “We were forced to shut down the store. We tried to stay open.”

Early last week San Jose Mayor Sam Liccardo quickly deemed gun stores in that city to be non-essential after Bullseye Bishop stayed open after the Santa Clara County had ordered a shelter in place. The police [visited the shop and ordered it to close.](#)

The issue began getting more attention Tuesday when Los Angeles County Sheriff Alex Villanueva called gun stores non-essential and ordered his deputies to make sure they closed, citing safety concerns. Shelter-in-place orders were not permission “for everyone to be panic gun-buying or rushing to stores,” the Associated Press reported.

But late Tuesday, the Los Angeles County Counsel, Mary Wickham, issued a written opinion that gun stores are essential.

Villanueva then reversed his order to enforce closures, the [Los Angeles Daily News](#) reported. But later Wednesday, after Newsom’s news conference, the sheriff appeared to leave the door open on enforcement, tweeting that the governor had confirmed that “the sheriff has the authority to enforce his executive order and keep the public safe during this pandemic.”

Kris Brown, president of the gun control group Brady, said pandemic calls for extraordinary measures.

“They are temporary orders to address an emergency situation. There is no constitutional right to purchase a firearm immediately and, during this time where there are legitimate public safety concerns, all rights are balanced against competing interest in public safety and security,” Brown said.

At the Antioch Armory, a small gun store across the street from city hall, on Wednesday morning, a sign taped to a window said 10 customers were allowed in at time.

Staff members were wearing masks and gloves. One was showing a handgun to a man and woman, racking its slide several times, the gun making a distinct, loud click each time.

Asked if the store was flouting the county’s shelter-in-place order by being open, the owner, Mike Yow, declined to answer.

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At the Black Dog Armory in Fremont, owner Chuck Cunningham said he has stayed open because he believes the business is essential, saying “it was my choice to.”

People are buying weapons because they want to “protect the family,” he said, because of fears of looting. “Some people who don’t have heart, or a good soul, tend to do bad things.”

Cunningham said he would close the store if ordered, but that he had not heard from city or county officials.

“We just do not have the capacity to go door to door and check on every business. We have thousands of businesses in the city,” said Geneva Bosques, Fremont police spokesperson. Black Dog Armory was “not on our radar.” She said the city will now investigate.

Last week, the Alameda County sheriff’s office closed down a Castro Valley gun store that stayed open after the shelter-in-place order was issued. Sgt. Ray Kelly, a spokesperson for the office said Wednesday that it’s up to individual cities like Fremont to enforce the county order.

A Second Amendment advocate called for the stores to stay open.

“There is no doubt that gun shops are an essential business. The right to keep and bear arms is not one relegated for sunny days, it is a hedge against the unthinkable,” said Matthew Larosiére, director of legal policy for the Sacramento-based Firearms Policy Coalition.

Kelly disagreed.

“Our interpretation is that they are non-essential,” he said. “Is a food store or a pharmacy or a laundry vital to fighting the coronavirus? I think they are. I don’t think you can say that about a gun store.”

Staff writer John Woolfolk contributed to this story

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STAY WELL AT HOME

ORDER OF THE VENTURA COUNTY HEALTH OFFICER

**ORDER DIRECTING PERSONS LIVING IN THE COUNTY OF VENTURA
TO STAY AT THEIR PLACES OF RESIDENCE AND RESTRICTING NON-
ESSENTIAL ACTIVITIES IN RESPONSE TO COVID-19**

DATE OF ORDER: MARCH 20, 2020

Please read this Order carefully. This Order supplements the Health Officer's Order dated March 17, 2020, and the Governor's Executive Order N-33-20 dated March 19, 2020. All prior orders of the Health Officer remain in place.

PURSUANT TO SECTIONS 101040, 101085 AND 120175 OF THE HEALTH AND SAFETY CODE, THE HEALTH OFFICER OF VENTURA COUNTY HEREBY ORDERS AS FOLLOWS:

1. Intent. Consistent with the Governor's Executive Order N-33-20, the intent of this Order is to ensure that the maximum number of persons stay 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 persons 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 below. All provisions of this Order should be interpreted to effectuate this intent and to be consistent with and in furtherance of the Governor's Executive Order N-33-20. Failure to comply with any of the provisions of this Order constitutes an imminent threat to public health.
2. Persons to stay in places of residence. All persons currently living within Ventura County are ordered to stay at their places of residence, as required by the Governor's Executive Order N-33-20, subject to the exemptions set forth in this Order. This Order applies to all persons in the incorporated cities and the entire unincorporated area of Ventura County (the "County"). To the extent persons are outside of their places of residence, they must at all times as reasonably possible maintain a physical distance of at least six feet from any other person.

Persons of all ages may leave their places of residence for the purpose of physical activity by themselves or with members of their household in compliance with Social Distancing Requirements, such as walking, running, bicycling or working around their places of residence, including gardening. Persons experiencing homelessness are exempt from this section, but are strongly urged to obtain shelter, and governmental and other entities are strongly urged to make such shelter available as soon as possible and to the maximum extent practicable (and to use Social Distancing Requirements in their operation).

3. Exemptions to the order to stay in places of residence. Except for persons governed by section 1 of the Health Officer's Order dated March 17, 2020, persons may leave their places of residence only for Essential Activities and Essential Governmental Functions or Services or to operate or work at Essential Businesses. (All capitalized terms in this Order are defined in section 7 below.)
4. Businesses to close. All businesses with a facility in the County, except Essential Businesses, are required to cease all activities at facilities located within the County except Minimum Basic Operations. For clarity, businesses may continue operations consisting exclusively of employees or contractors performing activities at their own places of residence. All Essential Businesses are strongly encouraged to remain open. To the greatest extent feasible, Essential Businesses shall comply with Social Distancing Requirements, including for any customers standing in line. For the purposes of this Order, businesses as used in this section include any for-profit, non-profit or educational entities, regardless of the nature of their services, the functions they perform, or their corporate or entity structure.
5. Gatherings of more than 10 persons prohibited. All public and private gatherings of more than 10 persons who are not part of a single household or living unit are prohibited, except for gatherings as part of the operation of an Essential Business. Nothing in this Order prohibits the gathering of members of a household or living unit within a place of residence or the operation of a shelter for persons experiencing homelessness.
6. Travel prohibited. All travel, including, but not limited to, travel on motorcycle, automobile or public transit, except for Essential Travel and Essential Activities, is prohibited. Persons may use public transit only for purposes of performing Essential Activities or to travel to and from work at Essential Businesses or to maintain, provide or receive Essential Governmental Functions or Services. Persons riding on public transit must comply with Social Distancing Requirements, to the greatest extent feasible. This Order allows travel into or out of the County to perform Essential Activities, operate Essential Businesses or to maintain or provide Essential Governmental Functions or Services.
7. Definitions and exemptions.

For the purposes of this Order:

- a. Essential Activities. Persons may leave their places of residence only to perform any of the following "Essential Activities" (but persons at high risk of severe illness from COVID-19 and persons who are sick are urged to stay in their places of 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 (including pets), such as, by way of example, obtaining medical supplies

- or medication, visiting a health care professional, or obtaining supplies needed to work from a place of residence.
- 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, 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 places of residence.
 - iii. To engage in outdoor activity, provided the persons comply with Social Distancing Requirements, such as, by way of example, walking, hiking, running, bicycling or yard work.
 - iv. To perform work providing 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. Healthcare Operation. Persons may leave their places of residence to work for or obtain services at any "Healthcare Operation," including hospitals, clinics, dentists, pharmacies, pharmaceutical and biotechnology companies, other licensed healthcare facilities, healthcare suppliers, home healthcare services providers, mental health providers, or any related and/or ancillary healthcare services, including blood donation centers. "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 Operation" does not include fitness and exercise gyms, aquatic centers and similar facilities.
- c. Essential Infrastructure. Persons may leave their places of residence to provide any services or perform any work necessary to the operations and maintenance of "Essential Infrastructure," which means and includes, but is not limited to, public works construction, construction of housing (in particular affordable housing or housing for persons experiencing homelessness), airport and port operations, military installations, water, sewer, gas, electrical, oil and gas production and refining including associated businesses and activities, roads and highways, public transportation, solid waste collection and removal, funeral homes and cemeteries, 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, to the extent possible. All U.S. Department of Defense activities are categorically exempt from this Order.
- d. Essential Governmental Functions or Services. Government functions or services performed by first responders, emergency management personnel, emergency dispatchers, court personnel, and law enforcement personnel, and others who need to perform essential governmental functions or services, as such may be

determined by the governmental entity performing those functions or providing such services, shall be considered "Essential Governmental Functions or Services." All persons who perform Essential Governmental Functions or Services are categorically exempt from this Order. Further, nothing in this Order shall prohibit any person from performing or accessing Essential Governmental Functions or Services. Each governmental entity shall identify and designate appropriate employees or contractors to continue providing and carrying out any Essential Governmental Functions or Services. All Essential Governmental Functions or Services shall be performed in compliance with Social Distancing Requirements, to the extent possible.

- e. Essential Businesses. "Essential Businesses" means:
- i. Healthcare Operations and Essential Infrastructure;
 - ii. Grocery stores, certified farmers' markets, farm and produce stands, supermarkets, food banks, convenience stores, and other establishments engaged in the retail sale of canned or frozen food, dry goods, beverages, 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 places of residence;
 - iii. Any form of agricultural production and processing, including the cultivation of products for personal consumption or use, including farming and services provided by farmworkers, ranching, livestock, and fishing, as well as business activities that support production and processing by providing essential agricultural supplies and services, including transportation, manufacturing, equipment, and services such as cooling, storing, packaging, and distribution of such products for wholesale or retail sale, provided that, to the extent possible, such businesses comply with Social Distancing Requirements and otherwise provide for the health and safety of their employees;
 - iv. Businesses that provide food, shelter, and social services, and other necessities of life for economically disadvantaged, compromised or otherwise needy persons;
 - v. Newspapers and 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 places of residence, Essential Activities and Essential Businesses;
 - 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, in compliance with Social Distancing Requirements, to the greatest extent possible;
- xii. Laundromats, drycleaners and laundry service providers;
 - xiii. Restaurants and other facilities that prepare and serve food, but only for delivery or carry out. Schools and other entities that typically provide free food services to students or members of the public may continue to do so under this Order on the condition that the food is provided to students or members of the public on a pick-up and take-away basis only. Schools and other entities that provide food services under this exemption shall not permit the food to be eaten at the site where it is provided, or at any other gathering site;
 - xiv. Businesses that supply products needed for persons to work from their places of residence;
 - xv. Businesses that supply other Essential Businesses with the support or supplies necessary to operate, including, by way of example, businesses that manufacture products for ultimate use in a Healthcare Operation;
 - xvi. Businesses that ship or deliver groceries, food, goods or services directly to places of residence;
 - 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. Childcare facilities providing services that enable employees exempted in this Order to work as permitted. Childcare facilities must operate under the following mandatory conditions:
 - 1. Childcare must be carried out in stable groups of 12 or fewer (“stable” means that the same 12 or fewer children are in the same group each day).
 - 2. Children shall not change from one group to another.
 - 3. If more than one group of children is cared for at one facility, each group shall be in a separate room. Groups shall not mix with each other.
 - 4. Childcare providers shall remain solely with one group of children.
 - xxii. Hotels, motels, bed-and-breakfast establishments and other businesses that provide transient occupancy for visitors to the County, provided that such businesses require their patrons to stay in place as otherwise required by this Order.
 - xxiii. Commercial construction provided that such activity implements Social Distancing Requirements to the extent feasible and otherwise provides for the health and safety of employees.

- f. Minimum Basic Operations. “Minimum Basic Operations” means and includes the following, provided that employees comply with Social Distancing Requirements, 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 places of residence.
 - g. Essential Travel. “Essential Travel” means and includes travel within or without the County, or between the various counties, for any of the following purposes, subject to Social Distancing Requirements:
 - i. Any travel related to the provision of or access to Essential Activities, Essential Governmental Functions or Services, Essential Businesses or Minimum Basic Operations.
 - ii. Travel to care for elderly persons, 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 County.
 - v. Travel required by law enforcement or court order.
 - vi. Travel required for non-residents to return to their places of residence outside the County.
 - vii. Travel engaged in interstate commerce and otherwise subject to the provisions of the Commerce Clause of the United States Constitution.
 - h. Hotels, etc. Places of residence include hotels, motels, shared rental units and similar facilities.
 - i. Social Distancing Requirements. “Social Distancing Requirements” means and includes maintaining at least a six-foot physical distance from other persons, washing hands with soap and water for at least 20 seconds or using hand sanitizer as frequently as possible, covering coughs or sneezes (into the sleeve or elbow, not hands), regularly cleaning high-touch surfaces, and not shaking hands.
8. Commercial laboratory test results. All commercial laboratories that test persons in the County for the presence of COVID-19 must report all test results (whether positive or negative) to the County Public Health Department laboratory within eight hours of receiving the test results.
9. Compliance. The violation of any provision of this Order constitutes a threat to public health. Pursuant to Government Code sections 26602 and 41601 and Health and Safety Code section 101029, the Health Officer requests that the Sheriff and all chiefs of police in the County ensure compliance with and enforce this Order.

10. Effective date and time. This Order shall become effective and operative at 11:59 p.m. on March 20, 2020, and will continue to be in effect until 11:59 p.m. on April 19, 2020, or until it is extended, rescinded, superseded or amended in writing by the Health Officer.
11. Continuing assessment. The Health Officer will continue to assess the quickly evolving situation, may issue additional orders related to COVID-19 and will review this Order within two weeks of its effective date.
12. Copies of Order. Copies of this Order shall promptly be: (1) made available at the County of Ventura Public Health Office, 2240 East Gonzalez Road, Suite 210, Oxnard, California, 93036; (2) posted on the County Public Health Department website (available at www.vchca.org/ph); and (3) provided to any member of the public requesting a copy of this Order.
13. Severability. If any provision of this Order or the application thereof to any person or circumstance is held to be invalid by a court of competent jurisdiction, the remainder of the Order, including the application of such part or provision to other persons or circumstances, shall not be affected and shall continue in full force and effect. To this end, the provisions of this Order are severable.
14. March 17, 2020, Order. This Order supplements the Order dated March 17, 2020, which remains in full force and effect pursuant to its terms.

IT IS SO ORDERED:



Robert Levin, M.D.
Ventura County Health Officer

Dated: March 20, 2020

Pursuant to Health and Safety Code section 120295 et seq., violation of or failure to comply with this Order is a misdemeanor punishable by fine, imprisonment, or both.

STAY WELL AT HOME

ORDER OF THE VENTURA COUNTY HEALTH OFFICER

**ORDER EXTENDING THE HEALTH OFFICER'S ORDER DATED MARCH 17, 2020,
AND IMPOSING ADDITIONAL LIMITATIONS ON ACTIVITIES AND BUSINESSES**

DATE OF ORDER: MARCH 31, 2020

Please read this Order carefully. This Order extends the expiration date of the Health Officer's March 17, 2020, Order to April 19, 2020, and imposes additional limitations on the activities of persons and entities. The Health Officer's March 20, 2020, Order remains in place, except where inconsistent with more restrictive limitations set out in this Order.

Pursuant to Health and Safety Code section 120295 et seq., violation of or failure to comply with this Order is a misdemeanor punishable by fine, imprisonment, or both.

PURSUANT TO SECTIONS 101040, 101085 AND 120175 OF THE HEALTH AND SAFETY CODE, THE HEALTH OFFICER OF VENTURA COUNTY HEREBY ORDERS AS FOLLOWS:

1. Intent. The intent of this Order is to (a) extend the duration of the Health Officer's Order dated March 17, 2020, to April 19, 2020; (b) keep the Health Officer's March 20, 2020, Order in place except that any more restrictive limitations in this Order shall control; (c) impose new and additional limitations on the activities of persons and entities that are more restrictive than the existing orders; and (d) clarify that a violation of the Health Officer's Orders by a business may subject the business to liability under the state's unfair competition law as well as other civil and criminal penalties.

The main intent of all Orders, including this Order, is to limit the spread of COVID-19 to the maximum extent possible by keeping all persons in their places of residence to the maximum extent possible. Failure to comply with any of the provisions of these Orders constitutes an imminent threat to public health.


2. March 17, 2020, and March 20, 2020, Orders. This Order supplements and extends the Orders dated March 17, 2020, and March 20, 2020, both of which shall remain in full force and effect, except where inconsistent with more restrictive limitations set out in this Order, for the duration of this Order.
3. Procedures for take-out restaurants and entities. Licensed, permanent food facilities that have been allowed under the current Orders to prepare and offer food via delivery service, pick-up or drive-thru must comply with the following procedures:

- a. Containers required. All food must be completely contained in a suitable container before being transferred to a customer. For example, ice cream cones are not allowed; ice cream scoops in a covered container are allowed.
 - b. Must consume food away from premises. The exception for take-out food activities is designed to enable persons who are confined to their places of residence to obtain prepared food to take back to their places of residence for consumption. The take-out food shall not be consumed anywhere within the line-of-sight of a person standing in front of the facility that sold the food.
 - c. Six-foot spacing must be maintained. All persons waiting in line or otherwise congregating outside a food facility selling food via take-out, delivery or drive-thru shall maintain a distance of at least six feet from all other persons. Current Orders already require that all persons inside the facility must maintain a distance of at least six feet from other persons.
4. Essential Businesses must limit activities to essential goods and services. The March 20, 2020, Order required all businesses, except Essential Businesses, to close. The primary purpose for this exception is to provide support for persons required to stay at home or work from home. In some cases, business types were deemed essential because they supported the maintenance of Essential Infrastructure, Essential Governmental Functions or Services, or Healthcare Operations. However, it is determined that the activities of businesses deemed to be Essential Businesses should be limited to the provision of those goods and services essential to the overall intent of the Health Officer's Orders. Therefore:
 - a. Grocery stores, certified farmers' markets, farm and produce stands, supermarkets, convenience stores and other establishments that sell food, beverages, pet supplies or household products (such as cleaning and personal care products) necessary to the safe, sanitary and essential operation of places of residence, that are open to the public, shall not sell any goods other than those described in this subsection (a). The sale of items not listed herein, such as clothing, jewelry, sporting goods, furniture, etc., is prohibited.
 - b. Only businesses whose primary business is the sale of food, beverages, pet supplies or household products (such as cleaning and personal care products) qualify as an Essential Business under subdivision (a) above. For example, a tobacco or vape store that sells a minimal amount of snacks and water as a side business does not qualify as a grocery store, convenience store or similar establishment. Items, the sale of which constitutes less than 33 percent of a business's gross sales over the last six months, are deemed to be minimal.
 - c. Automobile dealerships may remain open only to operate repair shops and/or auto parts supply stores. Showroom facilities shall be closed, and on-premise sales activities shall cease.
5. Swimming pools and hot tubs to close. The following facilities shall be closed to all persons: All swimming pools, spas, hot tubs, saunas, steam rooms and similar facilities, except those located at a single-family residence, which shall be used only by members of the household residing at the single-family residence.

6. Campgrounds and RV parks to close. All public and private campgrounds and recreational vehicle (RV) parks are to close, except that persons who certify that their RV is their primary residence may be permitted to stay in the RV park. All persons residing in an RV shall comply with all Orders otherwise applicable to residents.
7. Admittance to long-term care facilities. Long-Term Care Facilities may not refuse to admit any person who has been diagnosed with or treated for COVID-19 after that person has been discharged from a health care facility and approved for admittance to a Long-Term Care Facility by the Ventura County Public Health Department.
 - a. For purposes of this section, “Long-Term Care Facility” means a long-term care facility, skilled nursing facility, intermediate care facility, congregate living health facility, nursing facility, hospice facility, residential care facility for the elderly, residential facility, or community care facility as defined in Health and Safety Code sections 1250, 1502, 1503.5 and 1569, and regulations promulgated thereunder, as they may be amended from time to time.
8. Door-to-door solicitations must cease. Door-to-door solicitations, whether for purposes of sales of goods or services, charitable contributions, signature-gathering or any other commercial or noncommercial purpose, do not constitute Essential Activities or Essential Businesses pursuant to the Order dated March 20, 2020, and, if currently occurring, are occurring in violation of that Order and shall immediately cease.
9. Retail food and beverage facilities. The Public Health Officer recognizes the authority of the Ventura County Environmental Health Division as stated in “Coronavirus COVID-19 Guidance for Food Facilities,” and strongly advises all food and beverage facilities to comply with the guidance.
10. Definition of businesses. The terms “business” and “businesses” as used in this Order and the Orders dated March 17, 2020, and March 20, 2020, include any for-profit, non-profit or educational entities (including sole proprietorships, corporations, firms, partnerships, limited liability companies, joint stock companies, associations and other organizations of persons), regardless of the nature of their services or the functions they perform.
11. Violation may constitute unfair competition. Any person that, after notice, operates, manages, maintains or occupies, or continues to operate, manage, maintain or occupy, any business in violation of this Order, the Order dated March 17, 2020, or the Order dated March 20, 2020, may, in addition or in the alternative to any other civil and criminal penalties allowed by law, be subject to liability under the Unfair Competition Law (chapter 5 of part 2 of division 7 of the Business and Professions Code, commencing at section 17200), and subject to civil penalties and other relief as provided therein, for each act or practice in violation of the Orders, or any of them.

12. Compliance. The violation of any provision of this Order constitutes a threat to public health. Pursuant to Government Code sections 26602 and 41601 and Health and Safety Code section 101029, the Health Officer requests that the Sheriff and all chiefs of police in the County ensure compliance with and enforce this Order.
13. Effective date and time. This Order shall become effective and operative at 11:59 p.m. on March 31, 2020, and will continue to be in effect until 11:59 p.m. on April 19, 2020, or until it is extended, rescinded, superseded or amended in writing by the Health Officer.
14. Continuing assessment. The Health Officer will continue to assess the quickly evolving situation regarding the spread of COVID-19, may issue additional orders related to COVID-19 and will review this Order within two weeks of its effective date.
15. Copies of Order. Copies of this Order shall promptly be: (1) made available at the County of Ventura Public Health Office, 2240 East Gonzalez Road, Suite 210, Oxnard, California, 93036; (2) posted on the County Public Health Department website (available at www.vchca.org/ph); and (3) provided to any member of the public requesting a copy of this Order.
16. Severability. If any provision of this Order or the application thereof to any person or circumstance is held to be invalid by a court of competent jurisdiction, the remainder of the Order, including the application of such part or provision to other persons or circumstances, shall not be affected and shall continue in full force and effect. To this end, the provisions of this Order are severable.

IT IS SO ORDERED:


Robert Levin, M.D.
Ventura County Health Officer

Dated: March 31, 2020

STAY WELL AT HOME

ORDER OF THE VENTURA COUNTY HEALTH OFFICER

**ORDER PROHIBITING ALL GATHERINGS, ADDING TO THE LIST OF
ESSENTIAL BUSINESSES, AND REQUIRING IMPLEMENTATION
OF SOCIAL DISTANCING PROTOCOLS**

DATE OF ORDER: APRIL 9, 2020

Please read this Order carefully. This Order supplements the Health Officer's Orders dated March 17, 20 and 31, 2020. All prior Orders issued by the Health Officer remain in effect except where inconsistent with the provisions of this Order, in which case the provisions of this Order shall apply.

Pursuant to Health and Safety code section 120295 et seq., violation of or failure to comply with this Order is a misdemeanor punishable by fine, imprisonment or both.

PURSUANT TO SECTIONS 101040, 101085 AND 120175 OF THE HEALTH AND SAFETY CODE, THE HEALTH OFFICER OF VENTURA COUNTY HEREBY ORDERS AS FOLLOWS:

1. Intent. The intent of this Order is to ensure that the maximum number of people stay in their places of residence to the maximum extent feasible to slow the spread of COVID-19 and mitigate the impact of the COVID-19 pandemic on the delivery of critical healthcare services to those in need. All provisions of this Order must be interpreted to effectuate this intent.
2. Summary of this Order. This Order supplements and amends existing orders by, among other things: (a) prohibiting all gatherings, no matter the size, outside of places of residences with limited exceptions; (b) adding certain businesses to the list of essential businesses; (c) requiring essential businesses to adopt and implement social distancing protocols; (d) providing guidance for hospital holding units and long-term care facilities; and (e) declaring that violations of Health Officer Orders constitute a nuisance.
3. All Gatherings prohibited. Notwithstanding any other Order, all public and private gatherings of two or more persons occurring outside a single household or living unit are prohibited, except for limited purposes expressly permitted in this Order. This section supersedes and replaces Section 5 of the March 20, 2020, Order.
 - a. "Gathering" means and is defined as any event or convening that brings together two or more persons in a single room or single space at the same time, including, but not limited to, an auditorium, stadium, golf course, arena, theater, church, casino, conference room, meeting hall, cafeteria, drive-in theater, parking lot, or any other indoor or outdoor space used for non-essential purposes, including, but not limited to, movies, church services, swap meets or

similar purposes.

b. Nothing in this section prohibits members of a single household or living unit from engaging in Essential Travel or Essential Activities together.

c. Nothing in this section prohibits an event or convening that brings together two or more people as necessary to operate an Essential Business or to perform Essential Governmental Functions or Services.

d. Gatherings of 10 or fewer persons are permitted at graveside funeral services.

e. Staff of organizations or associations, including faith-based organizations, may gather in a single space for the sole purpose of preparing and facilitating live-stream or other virtual communications with their members, including worship services, provided that the number of such staff is the fewest necessary to prepare and facilitate those communications, but in no event in excess of seven persons.

4. Additions to List of Essential Businesses. The following subsections are added to the list of essential businesses set forth in section 7, subpart (e) of the March 20, 2020, Order:

(xxiv) Bicycle repair and supply shops. Bicycle shops may engage in the sale of bicycles on-line only and provided that all bicycles are delivered to a place of residence or Essential Business.

(xxv) Service providers that enable residential real estate transactions (including rentals, leases and home sales), including, but not limited to, real estate agents, escrow agents, notaries, and title companies, provided that appointments and other residential viewings must only occur virtually or, if virtual viewing is not feasible, by appointment with no more than two visitors at a time, both whom must reside within the same household or living unit, and one individual showing the unit (except in-person visits are not allowed when the occupant is present in the residence).

(xxvi) Automotive dealerships may engage in the purchase and sale of automobiles (including cars, trucks, motorcycles and motorized scooters) on-line only and provided that all vehicles are delivered to a place of residence or Essential Business.

5. All Essential Businesses must have Social Distancing Protocol. All Essential Businesses must prepare and post by no later than April 12, 2020, a "Social Distancing Protocol" for each of their facilities in the County frequented by the public or employees. The Social Distancing Protocol must be posted at or near the entrance of the relevant facility and shall be easily viewable by the public and employees. A copy of the Social Distancing Protocol must also be provided to each employee performing work at the facility. All Essential Businesses shall implement the Social Distancing Protocol and provide evidence of its implementation to any authority enforcing this Order upon demand. Completion and posting of the form attached hereto as Appendix A: Social Distancing Protocol will be compliant with this Order. The

Social Distancing Protocol must explain how the business is achieving the following, as applicable:

- a. Limiting the number of persons who can enter into the facility and work areas at any one time to ensure that persons in the facility and work areas can easily maintain a minimum six-foot distance from one another at all times, except as required to complete the Essential Business activity;
- b. Where lines may form at a facility, marking increments of six feet, at a minimum, establishing where individuals must stand to maintain adequate social distancing;
- c. Providing hand sanitizer, soap and water, or other effective disinfectant at or near the entrance of the facility and in other appropriate areas for use by the public and employees and in locations where there is high-frequency employee interaction with the public (e.g., cashiers);
- d. Providing for contactless payment systems or, if not feasible to do so, providing for disinfecting all payment portals, pens and styluses after each use;
- e. Regularly cleaning and disinfecting other high-touch surfaces;
- f. Posting a sign at the entrance of the facility and work area informing the public and employees that they should avoid entering the facility if they have a cough or fever; maintain a minimum six-foot distance from one another; sneeze and cough into their elbow; and not shake hands or engage in unnecessary physical contact; and
- g. Any additional social distancing measures being implemented.

6. Hospitals and Long-Term Care Facilities. The Health Officer recognizes the authority of the guidance documents "Hospital Holding Unit Guidance for COVID-19" and "Long-Term Care Facility Guidance for Preventing and Managing COVID-19" (the current versions of which are available at www.vcemergency.com) and strongly advises all hospitals and Long-Term Care Facilities (as that term is defined in section 7.a of the March 31, 2020, Order) to comply with the guidance.

7. Violation may constitute unfair competition. Any person that, after notice, operates, manages, maintains or occupies, or continues to operate, manage, maintain or occupy, any business in violation of this Order, in addition or in the alternative to any other civil and criminal penalties allowed by law, be subject to liability under the Unfair Competition Law (chapter 5 of part 2 of division 7 of the Business and Professions Code, commencing at section 17200) and subject to civil penalties and other relief as provided therein, for each act or practice in violation of the Orders, or any of them.

8. Compliance. The violation of any provision of this Order constitutes a threat to public health and a public nuisance per se. Pursuant to Health and Safety Code sections 101040 and 120175, Civil Code section 3494 and Code of Civil Procedure section 731, the Health Officer

or any other authorized County official may enforce any violation of this Order and abate the public nuisance by obtaining injunctive relief from a court of competent jurisdiction. In addition, pursuant to Government Code sections 26602 and 41601 and Health and Safety Code section 101029, the Health Officer requests that the Sheriff and all chiefs of police in the County ensure compliance with and enforce this Order.

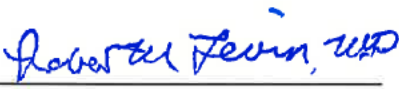
9. Effective date and time. This Order shall become effective and operative at 11:59 p.m. on April 9, 2020, and will continue to be in effect until 11:59 p.m. on April 19, 2020, or until it is extended, rescinded, superseded or amended in writing by the Health Officer.

10. Continuing assessment. The Health Officer will continue to assess the quickly evolving situation regarding the spread of COVID-19, may issue additional orders related to COVID-19 and will review this Order prior to its expiration.

11. Copies of Order. Copies of this Order shall promptly be: (1) made available at the County of Ventura Public Health Office, 2240 East Gonzalez Road, Suite 210, Oxnard, California, 93036; (2) posted on the County Public Health Department website (available at www.vchca.org/ph); and (3) provided to any member of the public requesting a copy of this Order.

12. Severability. If any provision of this Order, or the application thereof to any person or circumstance, is held to be invalid by a court of competent jurisdiction, the remainder of the Order, including the application of such part or provision to other persons or circumstances, shall not be affected and shall continue in full force and effect. To this end, the provisions of this Order are severable.

IT IS SO ORDERED



Robert Levin, M.D.
Ventura County Health Officer

Dated: April 9, 2020

Attachment: Appendix A: Social Distancing Protocol

STAY WELL AT HOME

ORDER OF THE VENTURA COUNTY HEALTH OFFICER

**AMENDED ORDER DIRECTING PERSONS TO STAY AT THEIR
HOMES, CLOSING NON-ESSENTIAL BUSINESSES AND PROHIBITING
NON-ESSENTIAL ACTIVITIES TO COMBAT THE COVID-19
PANDEMIC**

DATE OF ORDER: APRIL 20, 2020

Please read carefully. This Order issued by the Ventura County Health Officer shall become effective at 11:59 p.m. on April 20, 2020, and shall amend and restate the Health Officer Order dated April 18, 2020. Any and all prior violations of previous orders remain prosecutable, criminally or civilly. Further, all prior closure or cease and desist orders directed at specified persons or business shall remain in effect. Pursuant to Health and Safety Code section 120295 et seq., violation of or failure to comply with this Order is a misdemeanor punishable by fine, imprisonment, or both.

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PURSUANT TO SECTIONS 101040, 101085 AND 120175 OF THE HEALTH AND SAFETY CODE, THE HEALTH OFFICER OF VENTURA COUNTY HEREBY ORDERS AS FOLLOWS:

1. **Intent and Purpose.** The intent of this Order is to cause persons to stay at their places of residence to the maximum extent feasible with the minimum disruption to their social, emotional and economic well-being consistent with the overarching goal of eliminating the COVID-19 pandemic. The purpose of this Order is that by requiring persons to stay at home, while allowing them to engage in essential activities, such as working at essential businesses, purchasing necessities or participating in outdoor activities, that the spread of the virus will be mitigated, and that in the event a case of COVID-19 occurs, the public health officer can more easily trace public contacts. All provisions of this Order shall be interpreted to effectuate this intent.
2. **Applicable to entire County.** This Order applies to all persons in the cities and the entire unincorporated area of Ventura County (the "County").
3. **Persons to stay at home.** All persons currently living within the County are ordered to stay at their places of residence, subject to the exemptions set forth in

this Order. Persons experiencing homelessness are exempt from this section, but are strongly urged to obtain shelter, and governmental and other entities are strongly urged to make such shelter available as soon as possible, and to use Social Distancing Requirements in their operation.¹⁷

4. **Persons may leave home for specified purposes.** Persons may leave their places of residence for the following purposes only: to engage in an Essential Activity; to provide or receive an Essential Governmental Function or Service; or to operate or work at an Essential Business. When persons leave their places of residence for purposes authorized under this Order, they shall follow the Social Distancing Requirements to the maximum extent feasible.
5. **Special rule for persons 70 years of age or older.** All persons currently living in the County equal to or older than 75 years of age, or equal to or older than 70 years of age with an active or unstable comorbidity, are ordered to stay in their place of residence and must at all times follow Social Distancing Requirements to the greatest extent feasible. Such persons may leave their places of residence only as necessary to seek medical care or nutrition or to perform essential work in furtherance of Healthcare Operations or Essential Governmental Functions or Services.
6. **Non-Essential Travel is prohibited.** All travel within the County is prohibited except for Essential Travel. Persons may use public transit only for purposes of performing Essential Activities or to travel to and from work at Essential Businesses or to maintain, provide or receive Essential Governmental Functions or Services. Persons riding on public transit must comply with Social Distancing Requirements to the greatest extent feasible. This Order allows travel into or out of the County.
7. **Non-essential businesses must close.** All businesses with a facility in the County, except Essential Businesses as listed in section 17 of this Order, are required to cease all activities at facilities located within the County except that they may perform Minimum Basic Operations.
 - a. **Exceptions for home businesses and limited business operations.** Notwithstanding the above, the following businesses may operate provided

¹⁷ Unless defined when first used, all capitalized terms in this Order are defined in section 17 below.

they comply with all requirements applicable to Essential Businesses and any additional requirements stated below:

- (1) Home Businesses. All businesses may conduct activities and continue operations consisting solely of persons performing activities at their own places of residence.
- (2) Limited Business Operations. A business as specified below may conduct activities and continue operations at a facility of the business in the County provided that (i) no more than ten (10) employees or independent contractors shall be at the facility during any 24-hour period; (ii) there is no physical interaction between members of the public and employees or independent contractors of the business; (iii) members of the public are not permitted inside the business's facilities (i.e., all retail or storefront facilities shall remain closed to the public); (iv) Social Distancing Requirements are followed; and (v) any goods sold by the businesses shall be delivered to the purchaser's place of residence or business address, and any services provided by the businesses shall be provided remotely.

The paragraph immediately above applies only to businesses that meet the definition of a business necessary to maintain continuity of operations of the federal critical infrastructure sectors as defined in the March 19, 2020, Order of the State Public Health Officer (State Shelter Order), and only such businesses may conduct limited business operations under this Order.

Further, all businesses electing to conduct limited business operations must (i) prepare a "Social Distancing Protocol" as set forth in Section 10 below for each facility and post it where it will be easily viewable by the employees and contractors; (ii) provide a copy of the Social Distancing Protocol to each employee or contractor performing work at the facility; (iii) designate a specific on-duty supervisor or employee to monitor and enforce compliance with the Protocol at all times business operations are occurring; and (iv) permit access to the facility immediately upon request by any officer or employee of the County or its agents who wishes to inspect a business's facilities or operations. Repeated, confirmed failure to comply with Social Distancing Protocol may lead to closure of non-compliant businesses.

8. **Standards applicable to operation of Essential Businesses.** Among other requirements set out in this Order, all Essential Businesses that remain open shall provide only those goods and services that justify their classification as an Essential Business in the first place. Therefore:
 - a. Grocery stores, certified farmers' markets, farm and produce stands, supermarkets, convenience stores and other establishments that sell food, beverages, pet supplies or household products (such as cleaning and personal care products) necessary to the safe, sanitary and essential operation of places of residence, that are open to the public, shall not sell any goods other than those described in this subsection (a). The sale of items not listed herein, such as clothing, jewelry, sporting goods, furniture, etc., is prohibited.
 - b. Only businesses whose primary business is the sale of food, beverages, pet supplies or household products (such as cleaning and personal care products) qualify as an Essential Business under section (a) above. For example, a tobacco or vape store that sells a minimal amount of snacks and water as a side business does not qualify as a grocery store, convenience store or similar establishment. Items the sale of which constitute less than 33 percent of a business's gross sales over the last six months are deemed to be minimal.
9. **Food facilities.** All permanent food facilities, as defined by Health and Safety Code section 113849, may only prepare and offer food that is provided to customers via delivery service, via pick-up for takeout dining, and via drive-thru. Permanent food facilities that prepare and offer food via delivery service, pick-up or drive-thru must comply with the following procedures:
 - a. **Containers required.** All food must be completely contained in a suitable container before being transferred to a customer. For example, ice cream cones are not allowed; ice cream scoops in a covered container are allowed.
 - b. **Must consume food away from premises.** The exception for take-out food activities is designed to enable persons who are confined to their places of residence to obtain prepared food to take back to their places of residence for consumption. The take-out food shall not be consumed anywhere within the line-of-sight of a person standing in front of the facility that sold the food.

- c. Six-foot spacing must be maintained. All persons waiting in line or otherwise congregating outside a food facility selling food via take-out, delivery or drive-thru shall maintain a distance of at least six feet from all other persons.

Retail food and beverage facilities. The Health Officer recognizes the authority of the Ventura County Environmental Health Division as stated in “Coronavirus COVID-19 Guidance for Food Facilities” and strongly advises all food and beverage facilities to comply with the guidance.

- 10. **Essential Businesses must have Social Distancing Protocol.** All Essential Businesses must prepare and post a “Social Distancing Protocol” for each of their facilities in the County frequented by the public or employees. The Social Distancing Protocol must be posted at or near the entrance of the relevant facility and shall be easily viewable by the public and employees. A copy of the Social Distancing Protocol must also be provided to each employee performing work at the facility. All Essential Businesses shall implement the Social Distancing Protocol, and shall designate a specific on-duty employee to monitor and enforce compliance with the Protocol at all times the business is open to the public. Essential Businesses shall provide evidence of its implementation to any authority enforcing this Order upon demand.

Completion and posting of the form attached hereto as Appendix A: Social Distancing Protocol will be compliant with this Order. The Social Distancing Protocol must explain how the business is achieving the following, as applicable:

- a. Limiting the number of persons who can enter into the facility and work areas at any one time to ensure that persons in the facility and work areas can easily maintain a minimum six-foot distance from one another at all times, except as required to complete the Essential Business activity;
- b. Where lines may form at a facility, marking increments of six feet, at a minimum, establishing where individuals must stand to maintain adequate social distancing;
- c. Providing hand sanitizer, soap and water, or other effective disinfectant at or near the entrance of the facility and in other appropriate areas for use by the public and employees and in locations where there is high-frequency employee interaction with the public (e.g., cashiers);

- d. Providing for contactless payment systems or, if not feasible to do so, disinfect for the next customer by disinfecting all payment portals, pens and styluses after each use;
- e. Regularly cleaning and disinfecting other high-touch surfaces;
- f. Posting a sign at the entrance of the facility and work area informing the public and employees that they should avoid entering the facility if they have a cough or fever; maintain a minimum six-foot distance from one another; sneeze and cough into their elbow; and not shake hands or engage in unnecessary physical contact; and
- g. Any additional social distancing measures being implemented.

Repeated, confirmed failure to comply with Social Distancing Protocol may lead to closure of non-compliant businesses.

11. **Special allowance for completion of firearm sales.** Under California law persons wishing to purchase a firearm must complete a background check and waiting period, and all sales must be completed in-person. It is not feasible, therefore, for the Health Officer to require that firearm sales be conducted on-line only. To accommodate persons who initiated the purchase of a firearm at a store located within the County before March 20, 2020 (i.e., the day firearm stores were ordered to be closed by the Health Officer), firearm stores and purchasers may engage in the actions necessary to complete firearm purchases initiated before March 20, 2020, provided that:

- a. All activities, including the transfer of possession of any firearm, occur by appointment only, and only the purchaser and one person on behalf of the store shall be present;
- b. The firearm store shall remain closed to the general public; and
- c. Social Distancing Requirements shall be followed to the greatest extent feasible.

12. **Partial list of non-essential businesses and facilities ordered to close.** The intent and structure of this Order is to list Essential Businesses that may remain open subject to rigorous conditions designed to prohibit the spread of COVID-19

to the greatest extent feasible and to require all other businesses to close. For the sake of clarity, a list of business types that have been ordered to close as Non-Essential is set forth below. However, it is emphasized that the list below is not intended to be exclusive, and the fact that a business type is not listed below is not intended to imply that it is authorized to stay open as an Essential Business, Healthcare Operation, Essential Governmental Function or Service or Essential Infrastructure:

- a. Bars and nightclubs that do not serve food.
- b. Movie theaters, live performance venues, bowling alleys and arcades.
- c. Gyms, fitness centers and aquatic centers.
- d. Wineries, breweries and tap rooms that provide tastings.
- e. All swimming pools, spas, hot tubs, saunas, steam rooms and similar facilities, except those located at a single-family residence, which shall be used only by members of a household residing at the single-family residence.
- f. All public and private campgrounds and recreational vehicle (RV) parks, except that persons who certify that their RV is their primary residence may be permitted to stay in the RV park. All persons residing in an RV shall comply with all Orders otherwise applicable to residents.
- g. Clothing stores.
- h. Sporting goods stores.
- i. Jewelry stores.
- j. Fabric stores.
- k. Toy and game stores.
- l. Book stores.
- m. Arts and crafts stores.
- n. Pawn brokers.
- o. Gun stores.
- p. Bait and tackle shops.
- q. Furniture stores.
- r. Home decor and party decorations stores.
- s. Tobacco and vaping stores.
- t. Pet grooming.
- u. Hair or nail salons; barbershops.

13. **Partial list of non-essential activities ordered to cease.** The intent and structure of this Order is to list essential activities that may continue subject to rigorous conditions designed to prohibit the spread of COVID-19 to the greatest extent

feasible and to require all other activities to cease. For the sake of clarity, a list of activities that have been ordered to cease as non-essential is set forth below. However, it is emphasized that the list below is not intended to be exclusive and the fact that an activity is not listed below is not intended to imply that an activity is authorized:

- a. Door-to-Door Solicitations. Door-to-door solicitations, whether for purposes of sales of goods or services, charitable contributions, signature-gathering or any other commercial or noncommercial purpose.
14. **[Reserved]**
 15. **Admittance to Long-Term Care Facilities.** Long-Term Care Facilities may not refuse to admit any person who has been diagnosed with or treated for COVID-19 after that person has been discharged from a health care facility and approved for admittance to a Long-Term Care Facility by the Ventura County Public Health Department.
 - a. For purposes of this section, “Long-Term Care Facility” means a long-term care facility, skilled nursing facility, intermediate care facility, congregate living health facility, nursing facility, hospice facility, residential care facility for the elderly, residential facility, or community care facility as defined in Health and Safety Code sections 1250, 1502, 1503.5 and 1569, and regulations promulgated thereunder, as they may be amended from time to time.
 16. **Hospitals and Long-Term Care Facilities.** The Health Officer recognizes the authority of the guidance documents “Hospital Holding Unit Guidance for COVID-19” and “Long-Term Care Facility Guidance for Preventing and Managing COVID-19” (the current versions of which are available at www.vcemergency.com) and strongly advises all hospitals and Long-Term Care Facilities (as that term is defined in section 15 of this Order) to comply with the guidance.
 17. **Definitions and exemptions.**

For the purposes of this Order:

 - a. Essential Activities. Persons may leave their places of residence only to perform one of the following “Essential Activities” (but persons at high risk

of severe illness from COVID-19 and persons who are sick are urged to stay in their places of residence to the extent possible except as necessary to seek medical care):

- (1) 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 (including pets), such as, by way of example, obtaining medical supplies or medication, visiting a health care professional or obtaining supplies needed to work from a place of residence.
- (2) 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, 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 places of residence.
- (3) To engage in funeral services, provided the following restrictions are observed:
 - (i) For indoor services, where the body of the deceased is present for viewing or in a closed casket, members of the deceased's household and the relatives of the deceased within the second degree (including in-laws) may gather for the activity provided that Social Distancing Requirements are followed and that no more than five persons gather inside the facility at a single time. Stable groups of five persons (i.e., persons may not substitute in or out of the group) may rotate within the facility providing protocols are implemented to sanitize the facilities between each group visit.
 - (ii) For graveside services, members of the deceased's household and the relatives of the deceased within the second degree (including in-laws) may gather for the activity provided that Social Distancing Requirements are followed and that no more than 10 persons gather.
- (4) To engage in a wedding ceremony, provided that Social Distancing Requirements are followed to the greatest extent feasible and that no more than 10 persons (who need not be from the same household or living unit), in addition to the couple to be married and the officiant, gather in a stable group.

- (5) To attend a gathering of any size to observe or participate in live or virtual presentations to the gathering, such as faith-based services, concerts, plays, political speeches, movies and similar activities, provided that all of the following protocols are followed:
- (i) all activity must occur outdoors;
 - (ii) all persons attending the activity must be inside a motor vehicle occupied only by persons from the same household or living unit, not exceeding five persons;
 - (iii) all motor vehicles at the gathering must maintain a distance of six feet from all other vehicles;
 - (iv) the motor vehicle windows must be closed at all times during the event;
 - (v) all persons must remain in the vehicle in which they arrived at all times during the event;
 - (vi) no restroom facilities shall be made available to persons at the facility during the event;
 - (vii) no tangible items of any kind, including food products, may be transferred to persons in the motor vehicles;
 - (viii) notwithstanding the above, one or more persons, not exceeding five, may enter nearby buildings as necessary to putting on the presentation; and
 - (ix) all Social Distancing Requirements shall be complied with to the greatest extent feasible.
- (6) To engage in outdoor activity, provided the persons comply with Social Distancing Requirements, such as, by way of example, golfing, tennis, pickle-ball, walking, hiking, running, bicycling, pleasure driving and working around their places of residence, including gardening.
- (i) To provide accommodations for persons who wish to golf as a form of outdoor activity, public and private golf courses may operate provided they strictly enforce Social Distancing Requirements and enforce the following additional protocols:
- (a) Motorized carts are not allowed;
 - (b) No more than four golfers (who need not be from the same household or living unit), are allowed per group and each group must be stable (i.e., persons may not substitute in or out

- of the group);
 - (c) A distance of at least 30 feet shall be maintained between groups of golfers at all times;
 - (d) All ball washers shall be covered and flag pins shall be removed and the cup on each green shall be inverted or otherwise installed to eliminate high-frequency touch surfaces on the greens and tees;
 - (e) Persons may use a driving range provided that range balls are properly sanitized before distribution to customers (stand-alone golf driving ranges may also operate) ;
 - (f) Practice putting greens shall remain closed;
 - (g) The "Pro Shop" or similar facility designed for the sale of golf-related equipment and supplies shall remain closed; and
 - (h) The snack shop(s) and restaurant(s) shall remain closed.
- (7) To perform work providing products and services at an Essential Business or to otherwise carry out activities specifically permitted in this Order, including Minimum Basic Operations and limited business operations.
- (8) To care for a family member or pet in another household.
- (9) To prepare and present a live-stream or other virtual communication by an organization or association to its members, including worship services. Staff of organizations or associations (who need not be of the same household or living unit), including faith-based organizations, may gather in a single space at the same time solely for the sole purpose of preparing and presenting live-stream or other virtual communications provided that the number of such staff is the fewest necessary to prepare and present those communications, but in no event in excess of ten (10) persons, and that Social Distancing Requirements are followed.

Anti-gathering clause. It is the intent of this Order that individual persons be permitted to engage in the above Essential Activities. Where an activity listed above expressly allows a specified number of persons to engage in an activity together, the number of persons expressly stated in the listed activity shall prevail, notwithstanding any other provision in this Order. Except as expressly permitted, however, all public and private gatherings of any number of persons occurring outside of a household or living unit are

prohibited. Nothing in this paragraph prohibits a gathering of two or more persons as necessary to perform or work for Essential Businesses, Essential Governmental Functions or Services, Minimum Basic Operations, or limited business operations. Further, nothing in this paragraph prohibits members of a single household or living unit from engaging in Essential Travel or Essential Activities together.

- b. Healthcare Operation. Persons may leave their places of residence to work for or obtain services at any "Healthcare Operation," including hospitals, clinics, dentists, pharmacies, pharmaceutical and biotechnology companies, other licensed healthcare facilities, healthcare suppliers, home healthcare services providers, mental health providers or any related and/or ancillary healthcare services, including blood donation centers.
 - (1) "Healthcare Operation" includes professional services provided by chiropractors, acupuncturists, veterinarians and all healthcare services provided to animals.
 - (2) "Healthcare Operation" does not include fitness and exercise gyms, aquatic centers and similar facilities.
 - (3) This exemption shall be construed broadly to avoid any impacts to the delivery of healthcare, broadly defined.
- c. Essential Infrastructure. Persons may leave their places of residence to provide any services or perform any work necessary to the operations and maintenance of "Essential Infrastructure," which means and includes, but is not limited to, public works construction, construction of housing (in particular affordable housing or housing for persons experiencing homelessness), construction of agricultural structures, airport and port operations, military installations, water, sewer, gas, electrical, oil and gas production and refining including associated businesses and activities, roads and highways, public transportation, solid waste collection and removal, funeral homes and cemeteries, 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, to the extent possible. All U.S. Department of Defense activities are categorically exempt from this Order.

- d. Essential Governmental Functions or Services. Government functions or services performed by first responders, emergency management personnel, emergency dispatchers, court personnel, law enforcement personnel, and others who need to perform essential governmental functions or services, as such may be determined by the governmental entity performing those functions or services, shall be considered “Essential Governmental Functions or Services.” All persons who perform Essential Governmental Functions or Services are categorically exempt from this Order while performing such governmental functions or services. Further, nothing in this Order shall prohibit any person from performing or accessing Essential Governmental Functions or Services. Each governmental entity shall identify and designate appropriate employees or contractors to continue providing and carrying out any Essential Governmental Functions or Services. All Essential Governmental Functions or Services shall be performed in compliance with Social Distancing Requirements, to the extent possible.
- e. Essential Businesses. “Essential Businesses” means:
- (1) Healthcare Operations and Essential Infrastructure;
 - (2) Grocery stores, certified farmers’ markets, farm and produce stands, supermarkets, food banks, convenience stores and other establishments engaged in the retail sale of canned or frozen food, dry goods, beverages, 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 places of residence;
 - (3) Any form of agricultural production and processing, including the cultivation of products for personal consumption or use, including farming and services provided by farmworkers, ranching, livestock, and fishing, as well as business activities that support production and processing by providing essential agricultural supplies and services, including transportation, manufacturing, equipment and services such as cooling, storing, packaging and distribution of such products for wholesale or retail sale, provided that, to the extent possible, such businesses comply with Social Distancing Requirements and

otherwise provide for the health and safety of their employees;

- (4) Businesses that provide food, shelter and social services and other necessities of life for economically disadvantaged, compromised or otherwise needy persons;
- (5) Newspapers and television, radio and other media services;
- (6) Gas stations and auto-supply, auto-repair and related facilities;
- (7) Banks and related financial institutions;
- (8) Hardware stores;
- (9) Plumbers, electricians, exterminators, house-cleaners, gardeners and other service providers who provide services that are necessary to maintain the safety, sanitation and essential operation of places of residence, Essential Activities and Essential Businesses;
- (10) Businesses providing mailing and shipping services, including post office boxes;
- (11) Educational institutions, including public and private K-12 schools, colleges and universities, for purposes of facilitating distance learning or performing essential functions, in compliance with Social Distancing Requirements, to the greatest extent possible;
- (12) Laundromats, drycleaners and laundry service providers;
- (13) Restaurants and other facilities that prepare and serve food, but only for delivery, pick-up or drive-thru. Schools and other entities that typically provide free food services to students or members of the public may continue to do so under this Order on the condition that the food is provided to students or members of the public on a pick-up and take-away basis only. Schools and other entities that provide food services under this exemption shall not permit the food to be eaten at the site where it is provided, or at any other gathering site;
- (14) Drive-thru car washes, provided the service is automated and no

attendants or employees are involved in servicing the vehicles;

- (15) Businesses that supply other Essential Businesses with the support or supplies necessary to operate, including, by way of example, businesses that manufacture products for ultimate use in a Healthcare Operation;
- (16) Businesses that ship or deliver groceries, food, goods or services directly to places of residence. This exemption shall not be used to allow for manufacturing or assembly of non-essential products or for other functions besides those necessary to the delivery operation;
- (17) Airlines, taxis and other private transportation providers providing transportation services necessary for Essential Activities and other purposes expressly authorized in this Order;
- (18) Home-based care for seniors, adults or children;
- (19) Residential facilities and shelters for seniors, adults and children;
- (20) Professional services, such as legal or accounting services, when necessary to assist in compliance with legally mandated activities;
- (21) Childcare facilities providing services that enable employees exempted in this Order to work as permitted. Childcare facilities must operate under the following mandatory conditions:
 - (i) Childcare must be carried out in stable groups of 12 or fewer ("stable" means that the same 12 or fewer children are in the same group each day).
 - (ii) Children shall not change from one group to another.
 - (iii) If more than one group of children is cared for at one facility, each group shall be in a separate room. Groups shall not mix with each other.
 - (iv) Childcare providers shall remain solely with one group of children.
- (22) Hotels, motels, bed-and-breakfast establishments and other businesses that provide transient occupancy for visitors to the County, provided that such businesses require their patrons to stay in place as otherwise required by this Order.

- (23) Commercial construction provided that such activity implements Social Distancing Requirements to the extent feasible and otherwise provides for the health and safety of employees.
 - (24) Bicycle stores, including the sales of bicycles, parts and supplies, and the repair of bicycles. Bicycle rentals are not allowed.
 - (25) Service providers that enable residential real estate transactions (including rentals, leases and home sales), including, but not limited to, real estate agents, escrow agents, notaries and title companies, provided that appointments and other residential viewing must only occur virtually or, if virtual viewing is not feasible, by appointment with no more than two visitors at a time, both of whom must reside within the same household or living unit and one individual showing the unit (except in-person visits are not allowed when the occupant is present in the residence).
 - (26) Automobile dealerships and similar businesses with a primary business of automobile sales. In-person sales and long-term leasing transactions are allowed, as well as the operation of repair shops and auto-parts supply stores. Automobile rentals are not allowed. "Automobiles" include cars, trucks, recreational vehicles, motorcycles and motorized scooters.
 - (27) Household appliance stores.
 - (28) Shoe repair shops; in-person sales of other goods and services not allowed.
 - (29) Boat yards and other businesses that provide for safety, security and sanitation of boats stored at docks and marinas, including the repair of boats.
- f. Minimum Basic Operations. "Minimum Basic Operations" means and includes the following, provided that employees comply with Social Distancing Requirements, to the extent possible, while carrying out such operations:
- (1) The minimum necessary activities to maintain the value of the business's inventory, ensure security, process payroll and employee

benefits, or for related functions.

- (2) The minimum necessary activities to facilitate employees of the business being able to continue to work remotely from their places of residence.

g. Essential Travel. "Essential Travel" means and includes travel within or without the County, or between the various counties, for any of the following purposes, subject to Social Distancing Requirements:

- (1) Any travel related to the provision of or access to Essential Activities (including outdoor activities), Essential Governmental Functions or Services, Essential Businesses, Minimum Basic Operations or limited business operations.
- (2) Travel to care for elderly persons, minors, dependents, persons with disabilities or other vulnerable persons.
- (3) Travel to or from educational institutions for purposes of receiving materials for distance learning, for receiving meals and any other related services.
- (4) Travel to return to a place of residence from outside the County.
- (5) Travel required by law enforcement or court order.
- (6) Travel required for non-residents to return to their places of residence outside the County.
- (7) Travel engaged in interstate commerce and otherwise subject to the provisions of the Commerce Clause of the United States Constitution.

h. Hotels, etc. Places of residence include hotels, motels, shared rental units and similar facilities.

i. Business. The terms "business" and "businesses" as used in this Order include any for-profit, non-profit or educational entities (including sole proprietorships, corporations, firms, partnerships, limited liability companies, joint stock companies, associations and other organizations of

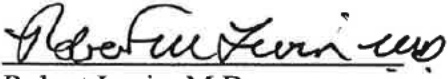
persons), regardless of the nature of their services or the functions they perform.

- j. **Social Distancing Requirements.** “Social Distancing Requirements” means and includes maintaining at least a six-foot physical distance from other persons, washing hands with soap and water for at least 20 seconds or using hand sanitizer as frequently as possible, covering coughs or sneezes (into the sleeve or elbow, not hands), regularly cleaning high-touch surfaces and not shaking hands.
- 18. **Commercial laboratory test results.** All commercial laboratories that test persons in the County for the presence of COVID-19 must report all test results (whether positive or negative) to the Ventura County Public Health Department laboratory within eight hours of receiving the test results.
- 19. **Compliance.** The violation of any provision of this Order constitutes a threat to public health and a public nuisance per se. Pursuant to Health and Safety Code sections 101040 and 120175, Civil Code section 3494 and Code of Civil Procedure section 731, the Health Officer or any other authorized County of Ventura official may enforce any violation of this Order and abate the public nuisance by obtaining injunctive relief from a court of competent jurisdiction. In addition, pursuant to Government Code sections 26602 and 41601 and Health and Safety Code section 101029, the Health Officer requests that the Sheriff and all chiefs of police in the County ensure compliance with and enforce this Order.
- 20. **Violation may constitute unfair competition.** Any person that, after notice, operates, manages, maintains or occupies or continues to operate, manage, maintain or occupy, any business in violation of this Order, may, in addition or in the alternative to any other civil and criminal penalties allowed by law, be subject to liability under the Unfair Competition Law (chapter 5 of part 2 of division 7 of the Business and Professions Code, commencing at section 17200), and subject to civil penalties and other relief as provided therein, for each act or practice in violation of the Orders, or any of them.
- 21. **Most Restrictive Provisions of County and State Health Orders Enforcable.** This Order is issued in light of the March 19, 2020, State Shelter Order, which set baseline statewide restrictions on non-residential business activities effective until further notice, as well as the Governor's March 19, 2020 Executive Order N-33-20 directing California residents to follow the State Shelter Order. This County Health Officer Order adopts in certain respects more stringent restrictions addressing the

particular facts and circumstances in this County, which are necessary to control the public health emergency as it is evolving within the County and the south coast region. Where a conflict exists between this Order and any state public health order related to the COVID-19 pandemic, the most restrictive provision controls.

22. **Effective date and time.** This Order shall become effective and operative at 11:59 p.m. on April 20, 2020, and will continue to be in effect until 11:59 p.m. on May 15, 2020, or until it is extended, rescinded, superseded or amended in writing by the Health Officer.
23. **Continuing assessment.** The Health Officer will continue to assess the quickly evolving situation, may issue additional orders related to COVID-19 and will review this Order within two weeks of its effective date.
24. **Copies of Order.** Copies of this Order shall promptly be: (1) made available at the County of Ventura Public Health Office, 2240 East Gonzalez Road, Suite 210, Oxnard, California, 93036; (2) posted on the Ventura County Public Health Department website (available at www.vchca.org/ph); and (3) provided to any member of the public requesting a copy of this Order.
25. **Severability.** If any provision of this Order or the application thereof to any person or circumstance is held to be invalid by a court of competent jurisdiction, the remainder of the Order, including the application of such part or provision to other persons or circumstances, shall not be affected and shall continue in full force and effect. To this end, the provisions of this Order are severable.

IT IS SO ORDERED:


Robert Levin, M.D.
Ventura County Health Officer

Dated: April 20, 2020

Attachment: Appendix A: Social Distancing Protocol

4/27/2020

Crime rates drop across the nation amid coronavirus | TheHill

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Crime rates drop across the nation amid coronavirus

BY TAL AXELROD - 04/03/20 02:57 PM EDT

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© JOHANNES EISELE/AFP via Getty Images

Crime rates in major cities across the country are dropping amid the coronavirus crisis as people stay in their homes to try to blunt the spread of the pandemic.

Police figures from across the country showed a nosedive in major crimes as authorities also report fewer arrests for small-time crime.

The New York Police Department said Thursday that crime across all five of the city's boroughs and within the transit system and public housing fell by nearly 20 percent from March 12-31. In the second half of last month, murder decreased by 25 percent, robberies fell by 10 percent and grand larcenies dropped by 37 percent.

The drop appeared to coincide with the declaration of a state of emergency in the city — prior to the declaration, crime had increased by nearly 28 percent in the first half of the month.

Los Angeles saw similarly stark drops in crime, with violent offenses falling over 11 percent in March compared to February, according to statistics released by the Los Angeles Police Department.

Homicide in California's biggest city fell by almost 43 percent, while rape dropped by about 37 percent and robbery declined by 14 percent. Those downward trends also appeared dovetail with an order from Mayor Eric Garcetti (D) shuttering nonessential businesses and mandating people stay home.

4/27/2020

Crime rates drop across the nation amid coronavirus | TheHill

And violent crime in [Chicago](#), [Atlanta](#) and [Denver](#) all also dropped last month compared to statistics from March 2019.

Officials have said that they do not have definitive proof that the drops in crime rates are directly correlated to the COVID-19 outbreak, but noted that they coincided with orders to stay indoors.

"We can't specifically say that the crime rate is affected by coronavirus," Chicago Mayor Lori Lightfoot (D) said at a March 25 news conference. "But obviously what we know going back many, many years and looking at data is that when large congregations of people are outside in neighborhoods where gun violence is prevalent, that increases the risk."

"Suspects for the most part are opportunists and they are looking at those locations, looking for that activity and looking for that victim," LAPD Assistant Chief Robert Arcos also noted to [the Los Angeles Times](#). "When you remove those things from that equation, it's not surprising to start to see these types of decreases."

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USNews NEWS

New York State Surpasses 1,000 Coronavirus Deaths

New York has surpassed 1,000 deaths from the coronavirus outbreak, less than a month after the first case was detected in the state

By Associated Press, Wire Service Content March 29, 2020



A paramedic transports a patient into the Trauma Center at the Elmhurst Hospital Center, Sunday, March 29, 2020, in the Queens borough of New York. The new coronavirus causes mild or moderate symptoms for most people, but for some, especially older adults and people with existing health problems, it can cause more severe illness or death. (AP Photo/Mary A. Taffer) THE ASSOCIATED PRESS

BY MICHAEL R. SISAK AND MARINA VILLENEUVE, Associated Press

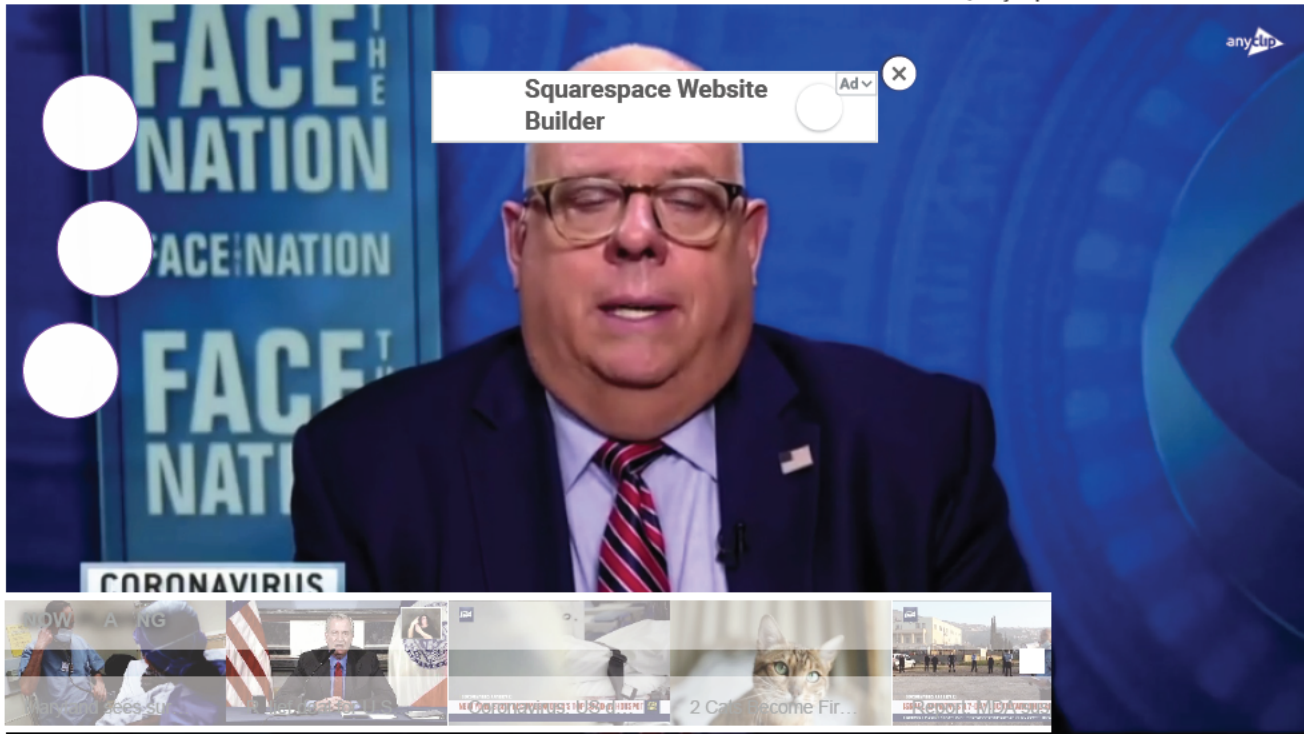
4/27/2020

New York State Surpasses 1,000 Coronavirus Deaths | U.S. News® | US News

NEW YORK (AP) — New York state's death toll from the coronavirus outbreak climbed Sunday above 1,000, less than a month after the first known infection in the state.

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Most of those deaths have come in just the past few days.

New York City reported in the evening that its toll had risen to 776. The total number of statewide deaths isn't expected to be released until Monday, but with at least 250 additional deaths recorded outside the city as of Sunday morning, the state's total fatalities was at least 1,026.

The virus and the disease it causes, COVID-19, has torn through New York with frightening speed.

The first known infection in the state was discovered March 1 in a health care worker who recently returned from Iran. Two days later, the state got its second case, a lawyer from the suburb of New Rochelle.

By March 10, Gov. Andrew Cuomo had declared a "containment area" in New Rochelle that shuttered area schools and houses of worship. That same day, the metropolitan area saw its first fatality: a man who worked at a harness track in Yonkers and lived in New Jersey.

By March 12, the state had banned all gatherings of more than 500 people, darkening Broadway theaters and sports arenas. A day later, the first New York resident died, an 82-year-old woman with emphysema.

New York City Mayor Bill De Blasio closed New York City's schools March 15.

More severe restrictions came March 20, when Cuomo ordered all nonessential workers to stay home, barred gatherings of any size and instructed anyone out in public to stay at least 6 feet from other people. At the time, only 35 New Yorkers had been killed by the virus.

That was only nine days ago.

4/27/2020

New York State Surpasses 1,000 Coronavirus Deaths | U.S. News® | US News



It took Spain 18 days to go from its first death to its 1,000th, according to data compiled by Johns Hopkins University. Italy took 21 days. New York state took 16 days.

Here are the latest coronavirus developments in New York:

'UNPRECEDENTED SURGE IN 911 CALLS

New Yorkers are hearing a constant wail of sirens as weary ambulance crews respond to a record volume of 911 calls.

The city's ambulances are responding to about 6,000 calls a day — more than 50% more than average. Fire Commissioner Daniel Nigro said Sunday that the last five days have been the busiest stretch in the history of the city's EMS operation.

"This is unprecedented, de Blasio said. "We have never seen our EMS system get this many calls — ever.

Nigro said the surge is delaying responses to lower-level calls. De Blasio said the city is planning to shift personnel onto EMS crews to help keep up with demand.

MAYOR: DAYS BEFORE SUPPLIES RUN OUT

De Blasio said he has asked the federal government to deliver 400 more ventilators to city hospitals by Wednesday and warned that without reinforcements the city will run out of masks, gowns and other hospital supplies in a week.

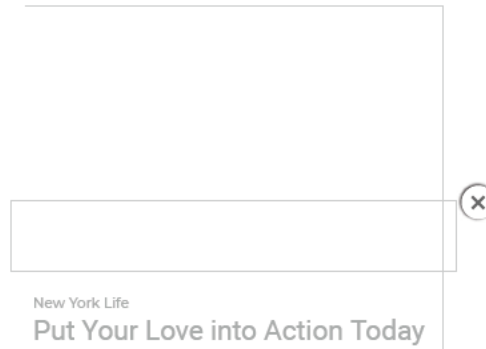
With the expected peak of cases in the city still two to three weeks away, de Blasio said he has asked the U.S. military to aid in sending needs new waves of doctors, nurses and other medical personnel to the city.

Cuomo said Sunday that more than 76,000 health professionals, including many who've recently retired from the field, have volunteered to help in the coronavirus fight.

The USNS Comfort, a Navy hospital ship with 1,000 beds, 12 operating rooms and a full medical staff, is scheduled to arrive in the city on Monday. It will be used to treat non-coronavirus patients to free up space in city hospitals..

4/27/2020

New York State Surpasses 1,000 Coronavirus Deaths | U.S. News® | US News



A 68-bed field hospital is being built in Manhattan's Central Park. Samaritan's Purse, a charity run by Christian evangelical preacher Franklin Graham, built a similar temporary facility in Italy to help deal with the crisis there. He said the New York City version could be up and running Tuesday.

POOR NEIGHBORHOODS HIT HARD

Coronavirus is overwhelming some of New York City's poorest neighborhoods, according to new data released by the city.

Queens accounts for 32% of the city's more than 30,000 confirmed cases as of Saturday — more than any other borough.

Neighborhoods such as Jackson Heights, Elmhurst and Corona, which are generally poor, densely packed and have large non-English speaking populations, have been among the hardest hit, according to a city map showing percent ranges of people testing positive for the disease. In those areas, between 69% and 86% of the tests done have come back positive.

A hospital in Elmhurst has been overrun with coronavirus cases.

Statistics on coronavirus cases do not reflect everyone who may have the virus, because many people have been told to manage their illness at home and are not getting tested.

EARLY PATIENT GOES HOME

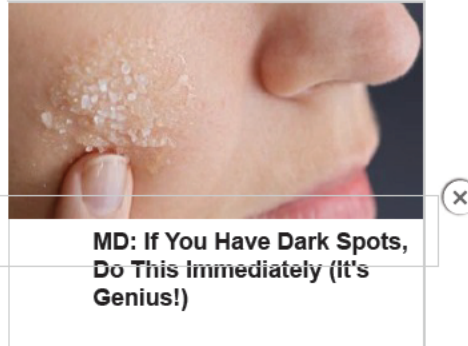
The number of patients being discharged at the state's hospitals after they've been treated for coronavirus has increased daily to a high of 845 on Saturday, Cuomo said. In all, more than 3,500 people have been discharged.

They include a lawyer from the New York City suburbs connected to one of the earliest U.S. coronavirus clusters. Lawrence Garbus's family and neighbor were infected, as well as members of his synagogue.

"The 'patient zero' — what we call patient zero in Westchester, New Rochelle — who was very sick for a very long time, he has actually gone home," Cuomo said Sunday. "He's out of the hospital."

4/27/2020

New York State Surpasses 1,000 Coronavirus Deaths | U.S. News® | US News



As of Sunday, more than 8,500 people remain hospitalized across the state because of the disease, including more than 2,000 in intensive care.

Those totals are continuing to spike, but Cuomo said they're not multiplying nearly as quickly as they were last week. From March 16-19, the number of hospitalizations in the state doubled every two days. Now it's taking about six days for the number to double.

STATE PUSHES FOR MORE FEDERAL MONEY

Cuomo spoke with Senate Minority Leader Chuck Schumer and House Speaker Nancy Pelosi on Sunday after lambasting the federal government for giving the state a fraction of needed funding as it faces a potential revenue shortfall of up to \$15 billion due to the economic damage caused by the virus.

They committed to right the wrong in the next federal bill that passes, and the governor is committed to working with them to make that a reality, Cuomo senior adviser Richard Azzoparadi told The Associated Press.

Schumer called the conversation "long and productive."

TRAVEL ADVISORY CONCERNS

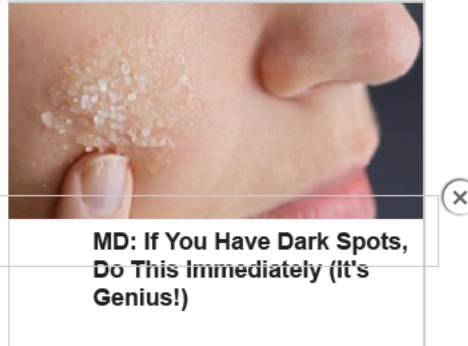
On Saturday, after saying he was weighing the idea of a mandatory quarantine for New York, New Jersey and Connecticut, President Donald Trump tweeted that instead he'd issue advisory urging people in those states to avoid any nonessential travel for two weeks.

De Blasio said he worried about the advisory's impact on families with members in New York and other places who were looking to reunite.

"We've got to respect, in the middle of a crisis, families have a right to be together," de Blasio said.

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New York State Surpasses 1,000 Coronavirus Deaths | U.S. News® | US News



OTHER DEVELOPMENTS:

- With schools and many day care centers closed, states, local governments and philanthropists are scrambling to provide child care for parents who are needed on the front lines of the virus fight.
- College students were sent home because of the coronavirus are taking advantage of their last days on campus to forge a few more memories.
- James Dolan, the owner of the New York Knicks and Rangers, has tested positive for COVID-19.

Marina Villeneuve reported from Albany, New York.

The Associated Press receives support for health and science coverage from the Howard Hughes Medical Institutes Department of Science Education. The AP is solely responsible for all content. Follow AP coverage of the virus outbreak at <https://apnews.com/VirusOutbreak> and <https://apnews.com/UnderstandingtheOutbreak>

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Tags: New York

4/27/2020

How the stay-at-home order has impacted Chicago's crime statistics | WGN-TV

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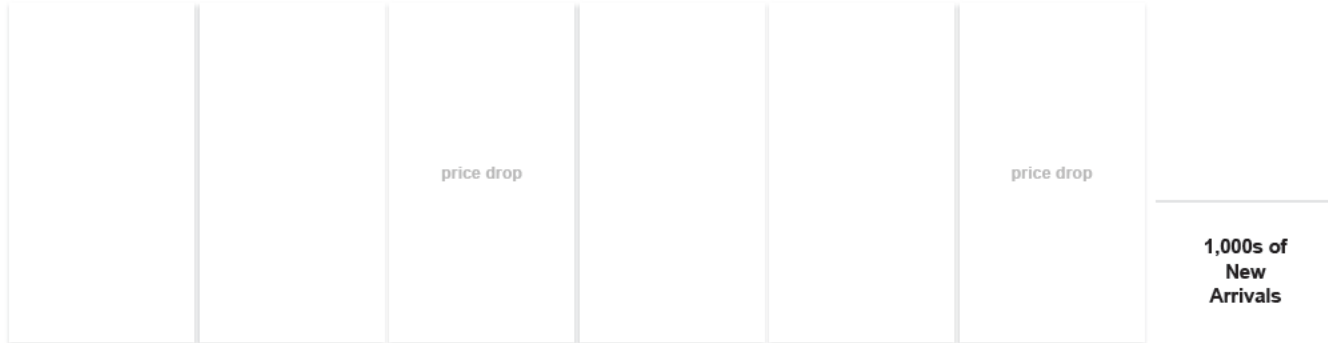
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WGN INVESTIGATES

How the stay-at-home order has impacted Chicago's crime statistics

by Ben Bradley, WGN Web Desk

Posted Mar 25, 2020 / 04 36 PM CDT / Updated Mar 25, 2020 / 04 36 PM CDT

CHICAGO — Illinois Gov. JB Pritzker's stay-at-home order that went into effect on March 21 — and the social distancing that followed — appears to have slowed crime in Chicago.

Police records from last week reveal:

- Murders dropped 29%
- Shootings were down 19%
- Sexual assaults dropped 51% from 2019

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4/27/2020

Miami Has Recorded No Homicides in 6 Weeks Despite Deliberate Decline in Police Enforcement – Reason.com

CORONAVIRUS

Miami Has Recorded No Homicides in 6 Weeks Despite Deliberate Decline in Police Enforcement

Miami's police chief orders officers to reduce ticketing and public interactions. Mayhem doesn't ensue.

SCOTT SHACKFORD | 4.23.2020 1:00 PM



(Joaquin Barbara / Dreamstime.com)

Fears of COVID-19 infection may have emptied the streets of Miami, but criminals are not taking advantage of the situation. Miami Police Chief Jorge Colina says that not only has violent crime plunged in the city, but Miami has not reported a homicide in six weeks. That hasn't happened since 1964.

Colina himself tested positive for COVID-19 last week and is at home recovering. *The New York Times* reports (you'll have to scroll down for the story) that 20 of Miami's 1,400 officers are sick. That's actually a pretty low infection rate when compared to a place like New York City, where at least 1,500 NYPD officers have become infected out of 36,000 officers. Earlier in April, one out of six NYPD officers was out sick.

One difference appears to be that Colina gave his officers very different instructions. He has strongly discouraging Miami police from interacting with people, both for his officers' safety and the safety of city residents. From the *Times*:

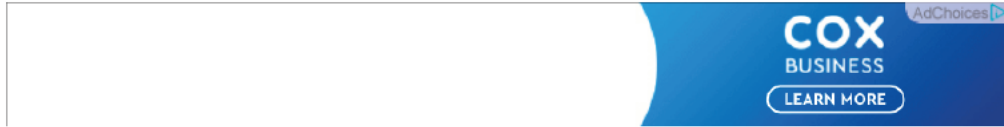
"I literally told them, 'I don't care if we don't issue a single ticket summons in the month of April,'" he said. "'I don't want you to unnecessarily interact with someone if you don't have to, for your safety and theirs.' And the amount of people who have been impacted financially is absolutely something that we should be mindful of."

Meanwhile, the NYPD appears to be out in force continuing heavy-duty policing of low-level "quality-of-life" crimes even as COVID-19 spreads through the department and the city's jails. NYPD Commissioner Dermot Shea has declared that he, unlike Colina, will not be reducing enforcement.

Perhaps he should. Miami's de-policing decision is not leading to anarchy. Colina says the city is seeing an uptick in car break-ins and that he worries about domestic violence incidents going unreported. Nevertheless, crime overall in Miami is down (and has been trending downward for years), and the community isn't any less safe as a result of his officers showing restraint.

4/27/2020

Coronavirus: Cops say commercial burglaries, vehicle thefts on rise



Coronavirus: Deputies say commercial burglaries, vehicle thefts on the rise

Jeremy Childs, Ventura County Star Published 6:00 a.m. PT April 13, 2020

Editor's note: The Star is making this story free to readers due to public health concerns related to coronavirus. Please consider a digital subscription to The Star so we can continue doing this important work. (<https://offers.vcstar.com/6UR>).

Most crime is down in areas patrolled by the Ventura County Sheriff's Office, but two types of crimes have seen a marked increase: vehicle thefts and commercial burglaries.

The agency, which serves five cities and unincorporated areas of the county, noted the recent change in crime trends caused in part by social distancing and stay-at-home orders in place during the coronavirus pandemic.

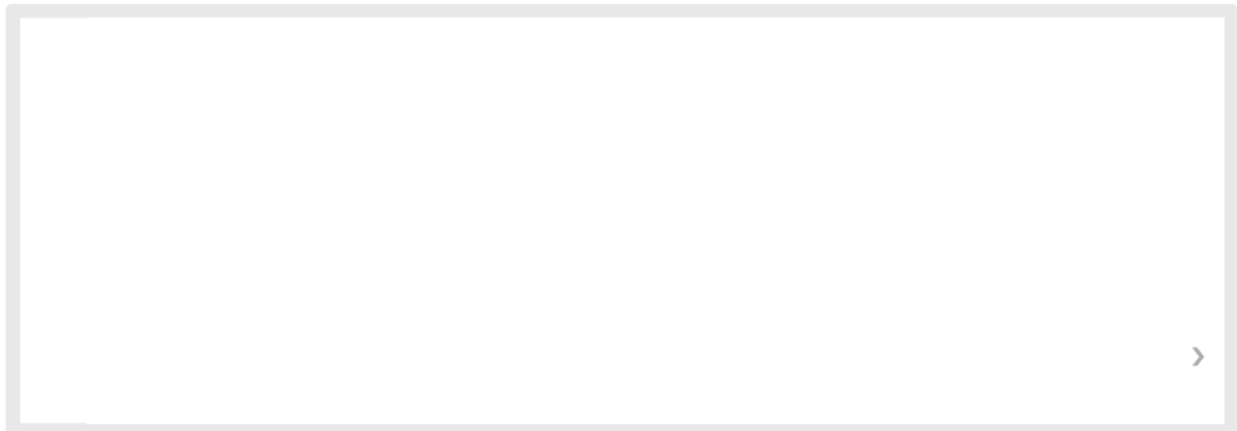
According to a recent study by the sheriff's office's crimes analysis unit, most types of major crimes had lower rates last month or remained the same compared to the same period last year. However, thefts and commercial burglaries have gone up in the agency's service areas of Camarillo, Fillmore, Moorpark, Ojai, Thousand Oaks and unincorporated Ventura County.

Last month, deputies responded to 29 commercial burglaries and 13 stolen vehicles, whereas in March 2019 deputies responded to 17 commercial burglaries and 11 stolen vehicles, according to sheriff's office data.

More: County's police, fire agencies bump up efforts against coronavirus; only one case so far (<https://story/news/local/communities/county/2020/04/10/ventura-coronavirus-police-fire-department-covid-19-changes/5127284002/>).

Deputies attributed the rise in commercial burglaries to the fact that many types of businesses are closed due to public health orders and are more vulnerable to crime as a result. In response to the uptick, deputies will be patrolling commercial and retail areas to deter property crimes, authorities said.

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4/27/2020

Coronavirus: Cops say commercial burglaries, vehicle thefts on rise

Regarding vehicle thefts, deputies said a frequent reason vehicles get stolen is due to keys being left inside an unlocked vehicle. Authorities recommend locking vehicles and taking the keys out when leaving it unattended to reduce the chances of the vehicle getting stolen. They also suggest not leaving any valuables inside a vehicle even if it's locked to dissuade thieves from breaking in.

Any criminal activity can be reported directly to the sheriff's office by calling 805-654-9511.

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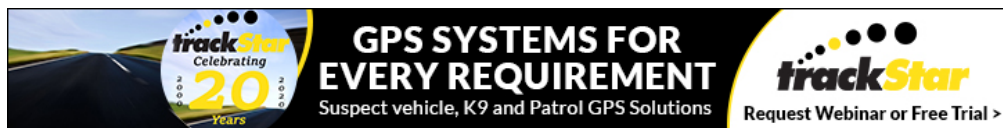
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Jeremy Childs is a breaking news and public safety reporter covering the night shift for the Ventura County Star. He can be reached by calling 805-437-0208 or emailing jeremy.childs@vcstar.com (<mailto:jeremy.childs@vcstar.com>). You can also find him on Twitter [@Jeremy_Childs](https://twitter.com/Jeremy_Childs) (https://twitter.com/Jeremy_Childs).

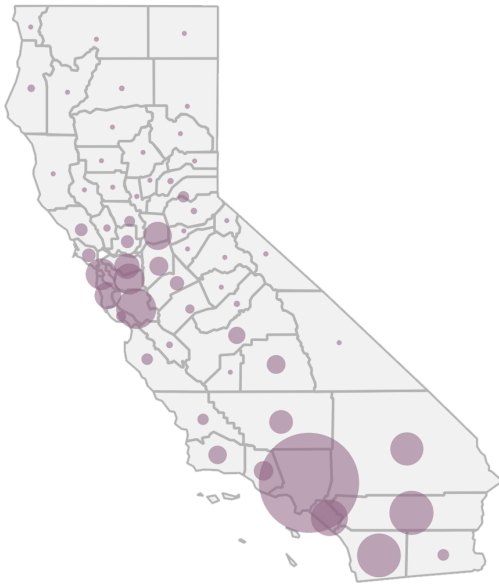
Read or Share this story: <https://www.vcstar.com/story/news/crime/2020/04/13/coronavirus-sheriff-say-commercial-burglaries-vehicle-thefts-rise/2977993001/>



California COVID-19 By The Numbers

May 2, 2020

Numbers as of May 1, 2020



For county-level data:
data.chhs.ca.gov

CALIFORNIA COVID-19 SPREAD

52,197

Total Cases

Ages of Confirmed Cases

- 0-17: **1,566**
- 18-49: **25,548**
- 50-64: **13,454**
- 65+: **11,547**
- Unknown/Missing: **82**

Gender of Confirmed Cases

- Female: **25,881**
- Male: **26,006**
- Unknown/Missing: **310**

Hospitalizations

Confirmed COVID-19
3,423/1,178
Hospitalized/in ICU

Suspected COVID-19
1,299/255
Hospitalized/in ICU

2,171
Fatalities

Stay Home. **Save Lives.**

covid19.ca.gov



Positive Cases by County

Sort by Positive Cases

Los Angeles	25,708
Riverside	4,034
San Diego	3,929
Orange	2,859
Santa Clara	2,235
San Bernardino	2,123
Alameda	1,731
San Francisco	1,692
San Mateo	1,277
Sacramento	1,109
Kern	1,025
Contra Costa	945
Tulare	736
Fresno	646
Ventura	583
San Joaquin	570
Santa Barbara	512
Stanislaus	411
Imperial	351
Solano	266
Sonoma	254

Ventura Case Statistics

Positive Cases

583

+19
+3.4%

Deaths

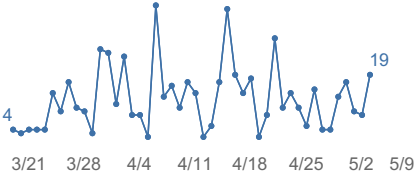
19

+0
+0.0%

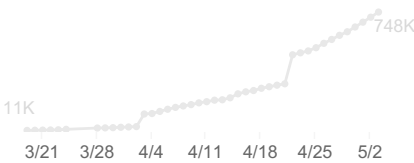
Lab Tests Reported Statewide

747,874

+32,123
+4.5%

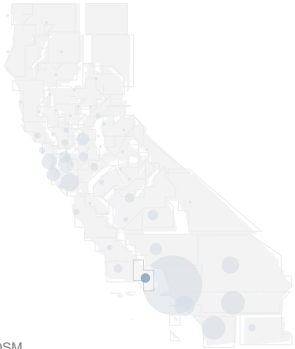


Note: Any instance of a negative number of cases or deaths reflects a correction to previous reporting.



Note: The increase in number of tests conducted on 4/22 is due to the addition of data sources to reflect a more complete count of testing in California.

Positive Cases by County



© Mapbox © OSM

Positive Cases Demographics

Gender		Age		Race/Ethnicity	
Female	50%	0-17	3%	AIAN	0%
				Asian	12%
Male	50%	18-49	49%	Black	6%
				Latino	48%
Unknown	1%	50-64	26%	NHPI	1%
				White	26%
		65+	22%	Multiracial	1%
				Unknown	0%

Note: Percentages may not add up to 100% due to rounding. Breakdown of deaths is a subset of total deaths as reported by law enforcement.

U.S. Department of Homeland Security
Cybersecurity & Infrastructure Security Agency
Office of the Director
Washington, DC 20528



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March 28, 2020

ADVISORY MEMORANDUM ON IDENTIFICATION OF ESSENTIAL CRITICAL INFRASTRUCTURE WORKERS DURING COVID-19 RESPONSE

FROM: Christopher C. Krebs
Director
Cybersecurity and Infrastructure Security Agency (CISA)

A handwritten signature in black ink, appearing to read "Chris Krebs", written over the printed name and title.

As the Nation comes together to slow the spread of COVID-19, on March 16th the President issued updated Coronavirus Guidance for America that highlighted the importance of the critical infrastructure workforce.

The Cybersecurity and Infrastructure Security Agency (CISA) executes the Secretary of Homeland Security's authorities to secure critical infrastructure. Consistent with these authorities, CISA has developed, in collaboration with other federal agencies, State and local governments, and the private sector, an "Essential Critical Infrastructure Workforce" advisory list. This list is intended to help State, local, tribal and territorial officials as they work to protect their communities, while ensuring continuity of functions critical to public health and safety, as well as economic and national security. Decisions informed by this list should also take into consideration additional public health considerations based on the specific COVID-19-related concerns of particular jurisdictions.

This list is advisory in nature. It is not, nor should it be considered, a federal directive or standard. Additionally, this advisory list is not intended to be the exclusive list of critical infrastructure sectors, workers, and functions that should continue during the COVID-19 response across all jurisdictions. Individual jurisdictions should add or subtract essential workforce categories based on their own requirements and discretion.

The advisory list identifies workers who conduct a range of operations and services that are typically essential to continued critical infrastructure viability, including staffing operations centers, maintaining and repairing critical infrastructure, operating call centers, working construction, and performing operational functions, among others. It also includes workers who support crucial supply chains and enable functions for critical infrastructure. The industries they support represent, but are not limited to, medical and healthcare, telecommunications, information technology systems, defense, food and agriculture, transportation and logistics, energy, water and wastewater, law enforcement,

and public works.

State, local, tribal, and territorial governments are responsible for implementing and executing response activities, including decisions about access and reentry, in their communities, while the Federal Government is in a supporting role. Officials should use their own judgment in issuing implementation directives and guidance. Similarly, while adhering to relevant public health guidance, critical infrastructure owners and operators are expected to use their own judgement on issues of the prioritization of business processes and workforce allocation to best ensure continuity of the essential goods and services they support. All decisions should appropriately balance public safety, the health and safety of the workforce, and the continued delivery of essential critical infrastructure services and functions. While this advisory list is meant to help public officials and employers identify essential work functions, it allows for the reality that some workers engaged in activity determined to be essential may be unable to perform those functions because of health-related concerns.

CISA will continue to work with our partners in the critical infrastructure community to update this advisory list if necessary as the Nation's response to COVID-19 evolves.

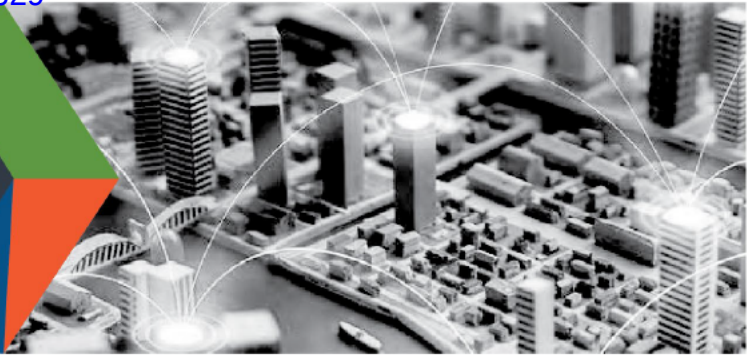
Should you have questions about this list, please contact CISA at CISA.CAT@cisa.dhs.gov.

Attachment: "Guidance on the Essential Critical Infrastructure Workforce: Ensuring Community and National Resilience in COVID-19 Response Version 2.0"



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DEFEND TODAY, SECURE TOMORROW



Guidance on the Essential Critical Infrastructure Workforce: Ensuring Community and National Resilience in COVID-19 Response

Version 3.0 (April 17, 2020)

THE IMPORTANCE OF ESSENTIAL CRITICAL INFRASTRUCTURE WORKERS

Functioning critical infrastructure is imperative during the response to the COVID-19 emergency for both public health and safety as well as community well-being. Certain critical infrastructure industries have a special responsibility in these times to continue operations.

This advisory guidance and accompanying list are intended to support state, local, tribal, territorial and industry partners in identifying the critical infrastructure sectors and the essential workers needed to maintain the services and functions Americans depend on daily and that need to be able to operate resiliently during the COVID-19 pandemic response.

This document gives advisory guidance on defining essential critical infrastructure workers. Promoting the ability of such workers to continue to work during periods of community restriction, access management, social distancing, or closure orders/directives is crucial to community resilience and continuity of essential functions. The term “workers” as used in this guidance is intended to apply to both employees and contractors performing the described functions.

CISA will continually solicit and accept feedback on the list and will evolve the list in response to stakeholder feedback. We will also use our various stakeholder engagement mechanisms to work with partners on how they are using this list and share those lessons learned and best practices broadly. Feedback can be sent to CISA.CAT@CISA.DHS.GOV.

CONSIDERATIONS FOR GOVERNMENT AND BUSINESS

This list was developed in consultation with federal agency partners, industry experts, and State and local officials, and is based on several key principles:

1. Response efforts to the COVID-19 pandemic are locally executed, state managed, and federally supported.
2. Everyone should follow guidance from the Centers for Disease Control and Prevention (CDC), as well as state and local government officials, regarding strategies to limit disease spread.
3. Employers must comply with applicable Occupational Safety and Health Administration (OSHA) requirements for protecting critical infrastructure workers who remain on or return to the job during the COVID-19 pandemic. As the nation relies on these workers to protect public health, safety, and community well-being, they must be protected from exposure to and infection with the virus so that they can continue to carry out

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Essential Critical Infrastructure Workforce

their responsibilities. OSHA has guidance and enforcement information for workplaces at www.osha.gov/coronavirus.

4. Businesses and government agencies may continue to implement organization-specific measures, which protect the workforce while meeting mission needs.
5. Workers should be encouraged to work remotely when possible and focus on core business activities. In-person, non-mandatory activities should be delayed until the resumption of normal operations.
6. When continuous remote work is not possible, businesses should enlist strategies to reduce the likelihood of spreading the disease. This includes, but is not limited to, physically separating staff, staggering work shift hours or days, and other social distancing measures. While the CDC recommends that everyone wear a cloth face cover to contain respiratory droplets when around others, critical infrastructure employers must consider how best to implement this public health recommendation for source control in the workplace. For example, employers may provide disposable facemasks (e.g., surgical masks) instead of cloth face coverings when workers would need to wear masks for extended periods of time (e.g., the duration of a work shift) or while performing tasks in which the face covering could become contaminated.
7. Consider the impact of workplace sick leave policies that may contribute to an employee decision to delay reporting medical symptoms. Sick employees should not return to the workplace until they meet the criteria to stop home isolation.
8. Critical infrastructure has an obligation to limit to the extent possible the reintegration of in-person workers who have experienced an exposure to COVID-19 but remain asymptomatic in ways that best protect the health of the worker, their co-workers, and the general public. An analysis of core job tasks and workforce availability at worksites can allow the employer to match core activities to other equally skilled and available in-person workers who have not experienced an exposure. CDC guidance on safety practices for critical infrastructure workers is maintained at <https://www.cdc.gov/coronavirus/2019-ncov/community/critical-workers/implementing-safety-practices.html>
9. All organizations should implement their business continuity and pandemic plans or put plans in place if they do not exist. Delaying implementation is not advised and puts at risk the viability of the business and the health and safety of the workers.
10. Reliance on technology and just-in-time supply chains means that certain workers must be able to access certain sites, facilities, and assets to ensure continuity of functions. The vast majority of our economy relies on technology and therefore information technology (IT) and operational technology (OT) workers for critical infrastructure operations are essential. This includes workers in many roles, including workers focusing on management systems, control systems, and Supervisory Control and Data Acquisition (SCADA) systems, and data centers; cybersecurity engineering; and cybersecurity risk management.
11. Government workers, such as emergency managers, and the business community need to establish and maintain lines of communication.
12. Essential critical infrastructure workers need continued and unimpeded access to sites, facilities, and equipment within quarantine zones, containment areas, or other areas where access or movement is limited to perform functions for community relief and stability; for public safety, security and health; for maintaining essential supply chains and preserving local, regional, and national economic well-being.
13. Essential critical infrastructure workers need sustained access to designated quarantine, containment, or

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restricted areas; and should be exempted from curfews, shelter-in-place orders, and transportation restrictions or restrictions on movement.

14. Whenever possible, local governments should consider adopting specific state guidance on essential workers to reduce potential complications of workers crossing jurisdictional boundaries. When this is not possible, local jurisdictions should consider aligning access and movement control policies with neighboring jurisdictions to reduce the burden of cross-jurisdictional movement of essential critical infrastructure workers.

IDENTIFYING ESSENTIAL CRITICAL INFRASTRUCTURE WORKERS

The following list of identified essential critical infrastructure workers is intended to be overly inclusive reflecting the diversity of industries across the United States.



HEALTHCARE / PUBLIC HEALTH

- Workers, including laboratory personnel, that perform critical clinical, biomedical and other research, development, and testing needed for COVID-19 or other diseases.
- Healthcare providers including, but not limited to, physicians; dentists; psychologists; mid-level practitioners; nurses; assistants and aids; infection control and quality assurance personnel; pharmacists; physical, respiratory, speech and occupational therapists and assistants; social workers; optometrists; speech pathologists; chiropractors; diagnostic and therapeutic technicians; and radiology technologists.
- Workers required for effective clinical, command, infrastructure, support service, administrative, security, and intelligence operations across the direct patient care and full healthcare and public health spectrum. Personnel examples may include, but are not limited to, accounting, administrative, admitting and discharge, engineering, accrediting, certification, licensing, credentialing, epidemiological, source plasma and blood donation, food service, environmental services, housekeeping, medical records, information technology and operational technology, nutritionists, sanitarians, respiratory therapists, etc.
 - Emergency medical services workers.
 - Prehospital workers included but not limited to urgent care workers.
 - Inpatient & hospital workers (e.g. hospitals, critical access hospitals, long-term acute care

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Essential Critical Infrastructure Workforce

- hospitals, long-term care facilities, inpatient hospice, ambulatory surgical centers, etc.).
- Outpatient care workers (e.g. end-stage-renal disease, Federally Qualified Health Centers, Rural Health Clinics, community mental health clinics, organ transplant/procurement centers, and other ambulatory care settings/providers, comprehensive outpatient rehabilitation facilities, etc.).
- Home care workers (e.g. home health care, at-home hospice, home dialysis, home infusion, etc.).
- Workers at Long-term care facilities, residential and community-based providers (e.g. Programs of All-Inclusive Care for the Elderly (PACE), Intermediate Care Facilities for Individuals with Intellectual Disabilities, Psychiatric Residential Treatment Facilities, Religious Nonmedical Health Care Institutions, etc.).
- Workplace safety workers (i.e., workers who anticipate, recognize, evaluate, and control workplace conditions that may cause workers' illness or injury).
- Workers needed to support transportation to and from healthcare facility and provider appointments.
- Workers needed to provide laundry services, food services, reprocessing of medical equipment, and waste management.
- Workers that manage health plans, billing, and health information and who cannot work remotely.
- Workers performing cybersecurity functions at healthcare and public health facilities and who cannot work remotely.
- Workers performing security, incident management, and emergency operations functions at or on behalf of healthcare entities including healthcare coalitions, who cannot practically work remotely.
- Childcare, eldercare, and other service providers for essential healthcare personnel.
- Vendors and suppliers (e.g. imaging, pharmacy, oxygen services, durable medical equipment, etc.).
- Workers at manufacturers (including biotechnology companies and those companies that have shifted production to medical supplies), materials and parts suppliers, technicians, logistics and warehouse operators, printers, packagers, distributors of medical products and equipment (including third party logistics providers, and those who test and repair), personal protective equipment (PPE), isolation barriers, medical gases, pharmaceuticals (including materials used in radioactive drugs), dietary supplements, blood and blood products, vaccines, testing materials, laboratory supplies, cleaning, sanitizing, disinfecting or sterilization supplies (including dispensers), sanitary goods, personal care products, pest control products, and tissue and paper towel products.
- Donors of blood, bone marrow, blood stem cell, or plasma, and the workers of the organizations that operate and manage related activities.
- Pharmacy staff, including workers necessary to maintain uninterrupted prescription, and other workers for pharmacy operations.
- Workers in retail facilities specializing in medical good and supplies.
- Public health and environmental health workers, such as:
 - Workers specializing in environmental health that focus on implementing environmental controls, sanitary and infection control interventions, healthcare facility safety and emergency preparedness planning, engineered work practices, and developing guidance and protocols for appropriate PPE to prevent COVID-19 disease transmission.
 - Public health/ community health workers (including call center workers) who conduct community-based public health functions, conducting epidemiologic surveillance and compiling, analyzing, and communicating public health information, who cannot work remotely.
- Human services providers, especially for at risk populations such as:
 - Home delivered meal providers for older adults, people with disabilities, and others with chronic

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Essential Critical Infrastructure Workforce

- health conditions.
- o Home-maker services for frail, homebound, older adults.
- o Personal assistance services providers to support activities of daily living for older adults, people with disabilities, and others with chronic health conditions who live independently in the community with supports and services.
- o Home health providers who deliver health care services for older adults, people with disabilities, and others with chronic health conditions who live independently in the community with supports and services.
- Government entities, and contractors that work in support of local, state, and federal public health and medical mission sets, including but not limited to supporting access to healthcare and associated payment functions, conducting public health functions, providing medical care, supporting emergency management, or other services necessary for supporting the COVID-19 response.
- Mortuary service providers, such as:
 - o Workers performing mortuary funeral, cremation, burial, cemetery, and related services, including funeral homes, crematoriums, cemetery workers, and coffin makers.
 - o Workers who coordinate with other organizations to ensure the proper recovery, handling, identification, transportation, tracking, storage, and disposal of human remains and personal effects; certify cause of death; and facilitate access to mental and behavioral health services to the family members, responders, and survivors of an incident.

LAW ENFORCEMENT, PUBLIC SAFETY, AND OTHER FIRST RESPONDERS

- Public, private, and voluntary personnel (front-line and management, civilian and sworn) in emergency management, law enforcement, fire and rescue services, emergency medical services (EMS), and security, public and private hazardous material responders, air medical service providers (pilots and supporting technicians), corrections, and search and rescue personnel.
- Personnel involved in provisioning of access to emergency services, including the provisioning of real-time text, text-to-911, and dialing 911 via relay.
- Personnel that are involved in the emergency alert system (EAS) ((broadcasters, satellite radio and television, cable, and wireline video) and wireless emergency alerts (WEA).
- Workers at Independent System Operators and Regional Transmission Organizations, and Network Operations staff, engineers and technicians to manage the network or operate facilities.
- Workers at emergency communication center, public safety answering points, public safety communications centers, emergency operation centers, and 911 call centers.
- Fusion Center workers.
- Workers, including contracted vendors, who maintain, manufacture, or supply equipment and services supporting law enforcement, fire, EMS, and response operations (to include electronic security and life safety security personnel).
- Workers and contracted vendors who maintain and provide services and supplies to public safety facilities, including emergency communication center, public safety answering points, public safety communications centers, emergency operation centers, fire and emergency medical services stations, police and law enforcement stations and facilities.
- Workers supporting the manufacturing, distribution, and maintenance of necessary safety equipment and uniforms for law enforcement and all public safety personnel.

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Essential Critical Infrastructure Workforce

- Workers supporting the operation of firearm, or ammunition product manufacturers, retailers, importers, distributors, and shooting ranges.
- Public agency workers responding to abuse and neglect of children, spouses, elders, and dependent adults.
- Workers who support weather disaster and natural hazard mitigation and prevention activities.
- Security staff to maintain building access control and physical security measures.

FOOD AND AGRICULTURE

- Workers supporting groceries, pharmacies, convenience stores, and other retail (including unattended and vending) that sells human food, animal and pet food and pet supply, and beverage products, including retail customer support service and information technology support staff necessary for online orders, pickup, and delivery.
- Restaurant carry-out and quick serve food operations, including dark kitchen and food prep centers, carry-out, and delivery food workers.
- Food manufacturer workers and their supplier workers including those employed at food ingredient production and processing facilities; aquaculture and seafood harvesting facilities; livestock, poultry, seafood slaughter facilities; pet and animal feed processing facilities; human food facilities producing by-products for animal food; beverage production facilities; and the production of food packaging.
- Farmers, farm and ranch workers, and agribusiness support services to include those employed in auction and sales; grain and oilseed handling, storage, processing, and distribution; animal food, feed, and ingredient production, packaging, and distribution; manufacturing, packaging, and distribution of veterinary drugs; and truck delivery and transport.
- Farmers, farm and ranch workers, and support service and supplier workers producing food supply domestically and for export, to include those engaged in raising, cultivating, harvesting, packing, storing, or delivering to storage or to market or to a carrier for transportation to market any agricultural or horticultural commodity for human consumption; agricultural inspection; fuel ethanol facilities; biodiesel and renewable diesel facilities; storage facilities; and other agricultural inputs.
- Workers and firms supporting the distribution of food, feed, and beverage and ingredients used in these products, including warehouse workers, vendor-managed inventory controllers, and blockchain managers.
- Workers supporting the sanitation and pest control of all food manufacturing processes and operations from wholesale to retail.
- Workers supporting the growth and distribution of plants and associated products for home gardens.
- Workers in cafeterias used to feed workers, particularly worker populations sheltered against COVID-19.
- Workers in animal diagnostic and food testing laboratories.
- Government, private, and non-governmental organizations' workers essential for food assistance programs (including school lunch programs) and government payments.
- Workers of companies engaged in the production, storage, transport, and distribution of chemicals, medicines, vaccines, and other substances used by the food and agriculture industry, including seeds, pesticides, herbicides, fertilizers, minerals, enrichments, and other agricultural production aids.
- Animal agriculture workers to include those employed in veterinary health (including those involved in supporting emergency veterinary or livestock services); raising, caring for and management of animals for food; animal production operations; livestock markets; slaughter and packing plants, manufacturers, renderers, and associated regulatory and government workforce.

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Essential Critical Infrastructure Workforce

- Transportation supporting animal agricultural industries, including movement of animal medical and reproductive supplies and materials, animal vaccines, animal drugs, feed ingredients, feed and bedding, live animals, animal by-products, and deceased animals for disposal.
- Workers who support sawmills and the manufacture and distribution of fiber and forest products, including, but not limited to timber, paper, and other wood and fiber products, as well as manufacture and distribution of products using agricultural commodities.
- Workers engaged in the manufacture and maintenance of equipment and other infrastructure necessary for agricultural production and distribution.

ENERGY

- Workers supporting the energy sector, regardless of the energy source (including, but not limited to, nuclear, fossil, hydroelectric, or renewable), segment of the system, or infrastructure the worker is involved in, who are needed to construct, manufacture, repair, transport, permit, monitor, operate engineer, and maintain the reliability, safety, security, environmental health, and physical and cyber security of the energy system, including those who support construction, manufacturing, transportation, permitting, and logistics.
- Workers and contractors supporting energy facilities that provide steam, hot water or chilled water from central power plants to connected customers.
- Workers conducting energy/commodity trading/scheduling/marketing functions who can't perform their duties remotely.
- Workers supporting the energy sector through renewable energy infrastructure (including, but not limited to, wind, solar, biomass, hydrogen, ocean, geothermal, and hydroelectric) and microgrids, including those supporting construction, manufacturing, transportation, permitting, operation and maintenance, monitoring, and logistics.
- Workers and security staff involved in nuclear re-fueling operations.
- Workers providing services related to energy sector fuels (including, but not limited to, petroleum (crude oil), natural gas, propane, liquefied natural gas (LNG), compressed natural gas (CNG), natural gas liquids (NGL), other liquid fuels, nuclear, and coal) and supporting the mining, processing, manufacturing, construction, logistics, transportation, permitting, operation, maintenance, security, waste disposal, storage, and monitoring of support for resources.
- Workers providing environmental remediation and monitoring, limited to immediate critical needs technicians.
- Workers involved in the manufacturing and distribution of equipment, supplies, and parts necessary to maintain production, maintenance, restoration, and service at energy sector facilities across all energy sector segments.

Electricity Industry

- Workers who maintain, ensure, restore, or who are involved in the development, transportation, fuel procurement, expansion, or operation of, the generation, transmission, and distribution of electric power, including call centers, utility workers, engineers, retail electricity, construction, maintenance, utility telecommunications, relaying, and fleet maintenance technicians who cannot perform their duties remotely.
- Workers at coal mines, production facilities, and those involved in manufacturing, transportation,

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Essential Critical Infrastructure Workforce

- permitting, operation, maintenance, and monitoring at coal sites.
- Workers who produce, process, ship, and handle coal used for power generation and manufacturing.
- Workers in the electricity industry including but not limited to those supporting safety, construction, manufacturing, transportation, permitting, operation/maintenance, engineering, physical and cyber security, monitoring, and logistics
- Workers needed for safe and secure operations at nuclear generation including, but not limited to, those critical to the broader nuclear supply chain, the manufacture and delivery of parts needed to maintain nuclear equipment, the operations of fuel manufacturers, and the production and processing of fuel components used in the manufacturing of fuel.
- Workers at fossil fuel (including but not limited to natural gas, refined, distillate, and/or coal), nuclear, and renewable energy infrastructure (including, but not limited to wind, solar, biomass, hydrogen, geothermal, and hydroelectric), and microgrids, including those supporting safety, construction, manufacturing, transportation, permitting, operation, maintenance, monitoring, and logistics.
- Workers at generation, transmission, and electric black start facilities.
- Workers at Reliability Coordinator, Balancing Authority, local distribution control centers, and primary and backup Control Centers, including, but not limited to, independent system operators, regional transmission organizations, and local distribution control centers.
- Workers that are mutual assistance/aid personnel, which may include workers from outside of the state or local jurisdiction.
- Vegetation management and traffic control for supporting those crews.
- Instrumentation, protection, and control technicians.
- Essential support personnel for electricity operations.
- Generator set support workers, such as diesel engineers used in power generation, including those providing fuel.

Petroleum Industry

- Workers who support onshore and offshore petroleum drilling operations; platform and drilling construction and maintenance; transportation (including helicopter operations), maritime transportation, supply, and dredging operations; maritime navigation; well stimulation, intervention, monitoring, automation and control, extraction, production; processing; waste disposal, and maintenance, construction, and operations.
- Workers in the petroleum industry including but not limited to those supporting safety, construction, manufacturing, transportation, permitting, operation/maintenance, engineering, physical and cyber security, monitoring, and logistics.
- Workers for crude oil, petroleum, and petroleum product storage and transportation, including pipeline, marine transport, terminals, rail transport, storage facilities, racks, and road transport for use as end-use fuels such as gasoline, diesel fuel, jet fuel, and heating fuels or feedstocks for chemical manufacturing.
- Petroleum and petroleum product security operations center workers and workers who support maintenance and emergency response services.
- Petroleum and petroleum product operations control rooms, centers, and refinery facilities.
- Retail fuel centers such as gas stations and truck stops, and the distribution systems that support them.
- Supporting new and existing construction projects, including, but not limited to, pipeline construction.
- Manufacturing and distribution of equipment, supplies, and parts necessary for production, maintenance, restoration, and service of petroleum and petroleum product operations and use, including end-users.

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Essential Critical Infrastructure Workforce

- Transmission and distribution pipeline workers, including but not limited to pump stations and any other required, operations maintenance, construction, and support for petroleum products.

Natural Gas, Natural Gas Liquids (NGL), Propane, and Other Liquid Fuels

- Workers who support onshore and offshore drilling operations, platform and drilling construction and maintenance; transportation (including helicopter operations); maritime transportation, supply, and dredging operations; maritime navigation; natural gas and natural gas liquid production, processing, extraction, storage and transportation; well intervention, monitoring, automation and control; waste disposal, and maintenance, construction, and operations.
- Workers in the natural gas, NGL, propane, and other liquid fuels industries including but not limited to those supporting safety, construction, manufacturing, transportation, permitting, operation/maintenance, engineering, physical and cyber security, monitoring, and logistics.
- Transmission and distribution pipeline workers, including compressor stations and any other required operations maintenance, construction, and support for natural gas, natural gas liquid, propane, and other liquid fuels.
- Workers at Liquefied Natural Gas (LNG) and Compressed Natural Gas (CNG) facilities.
- Workers at natural gas, propane, natural gas liquids, liquified natural gas, liquid fuel storage facilities, underground facilities, and processing plants and other related facilities, including construction, maintenance, and support operations personnel.
- Natural gas processing plants workers and those who deal with natural gas liquids.
- Workers who staff natural gas, propane, natural gas liquids, and other liquid fuel security operations centers, operations dispatch and control rooms and centers, and emergency response and customer emergencies (including leak calls) operations.
- Workers supporting drilling, production, processing, refining, and transporting natural gas, propane, natural gas liquids, and other liquid fuels for use as end-use fuels, feedstocks for chemical manufacturing, or use in electricity generation.
- Workers supporting propane gas service maintenance and restoration, including call centers.
- Workers supporting propane, natural gas liquids, and other liquid fuel distribution centers.
- Workers supporting propane gas storage, transmission, and distribution centers.
- Workers supporting new and existing construction projects, including, but not limited to, pipeline construction.
- Workers supporting ethanol and biofuel production, refining, and distribution.
- Workers in fuel sectors (including, but not limited to nuclear, coal, and gas types and liquid fuels) supporting the mining, manufacturing, logistics, transportation, permitting, operation, maintenance, and monitoring of support for resources.
- Workers ensuring, monitoring, and engaging in the physical security of assets and locations associated with natural gas, propane, natural gas liquids, and other liquid fuels.
- Workers involved in the manufacturing and distribution of equipment, supplies, and parts necessary to maintain production, maintenance, restoration, and service of natural gas, propane, natural gas liquids, and other liquid fuels operations and use, including end-users.

WATER AND WASTEWATER

Workers needed to operate and maintain drinking water and wastewater and drainage infrastructure, including:

- Operational staff at water authorities.

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Essential Critical Infrastructure Workforce

- Operational staff at community water systems.
- Operational staff at wastewater treatment facilities.
- Workers repairing water and wastewater conveyances and performing required sampling or monitoring, including field staff.
- Operational staff for water distribution and testing.
- Operational staff at wastewater collection facilities.
- Operational staff and technical support for SCADA Control systems.
- Chemical equipment and personal protection suppliers to water and wastewater system.
- Workers who maintain digital systems infrastructure supporting water and wastewater operations.

TRANSPORTATION AND LOGISTICS

- Workers supporting or enabling transportation and logistics functions, including truck drivers, bus drivers, dispatchers, maintenance and repair technicians, warehouse workers, truck stop and rest area workers, driver training and education centers, Department of Motor Vehicle (DMV) workers, enrollment agents for federal transportation worker vetting programs, towing and recovery services, roadside assistance workers, intermodal transportation personnel, and workers that construct, maintain, rehabilitate, and inspect infrastructure, including those that require cross-jurisdiction travel.).
- Workers supporting the distribution of food, fuels, pharmaceuticals and medical material (including materials used in radioactive drugs), and chemicals needed for water or water treatment and energy maintenance.
- Workers supporting operation of essential highway infrastructure, including roads, bridges, and tunnels (e.g., traffic operations centers and moveable bridge operators).
- Workers of firms providing services, supplies, and equipment that enable warehouse and operations, including cooling, storing, packaging, and distributing products for wholesale or retail sale or use, including cold- and frozen-chain logistics for food and critical biologic products.
- Mass transit workers providing critical transit services and performing critical or routine maintenance to mass transit infrastructure or equipment.
- Workers supporting personal and commercial transportation services including taxis, delivery services, vehicle rental services, bicycle maintenance and car-sharing services, and transportation network providers.
- Workers, including police, responsible for operating and dispatching passenger, commuter, and freight trains and maintaining rail infrastructure and equipment.
- Maritime transportation workers, including port authority and commercial facility personnel, dredgers, port workers, security personnel, mariners, ship crewmembers, ship pilots, tugboat operators, equipment operators (to include maintenance and repair, and maritime-specific medical providers), ship supply workers, chandlers, and repair company workers. Refer to the United States Coast Guard's Marine Safety Information Bulletin "Maintaining Maritime Commerce and Identification of Essential Maritime Critical Infrastructure Workers" for more information.
- Workers, including truck drivers, railroad employees, maintenance crews, and cleaners, supporting transportation of chemicals, hazardous, medical, and waste materials that support critical infrastructure, capabilities, functions, and services, including specialized carriers, crane and rigging industry workers.
- Bus drivers and workers who provide or support intercity, commuter, and charter bus service in support of other essential services or functions.

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Essential Critical Infrastructure Workforce

- Automotive repair, maintenance, and transportation equipment manufacturing and distribution facilities (including those who repair and maintain electric vehicle charging stations).
- Transportation safety inspectors, including hazardous material inspectors and accident investigator inspectors.
- Manufacturers and distributors (to include service centers and related operations) of lighting and communication systems, specialized signage and structural systems, emergency response equipment and support materials, printers, printed materials, packaging materials, pallets, crates, containers, and other supplies needed to support manufacturing, packaging staging and distribution operations, and other critical infrastructure needs.
- Postal Service, parcel, courier, last-mile delivery, and shipping and related workers, to include private companies, who accept, process, transport, and deliver information and goods.
- Workers who supply equipment and materials for maintenance of transportation equipment.
- Workers who repair and maintain vehicles, aircraft, rail equipment, marine vessels, bicycles, and the equipment and infrastructure that enables operations that encompass movement of cargo and passengers.
- Workers who support air transportation for cargo and passengers, including operation distribution, maintenance, and sanitation. This includes air traffic controllers, flight dispatchers, maintenance personnel, ramp workers, fueling agents, flight crews, airport safety inspectors and engineers, airport operations personnel, aviation and aerospace safety workers, security, commercial space personnel, operations personnel, accident investigators, flight instructors, and other on- and off-airport facilities workers.
- Workers supporting transportation via inland waterways, such as barge crew, dredging crew, and river port workers for essential goods.
- Workers critical to the manufacturing, distribution, sales, rental, leasing, repair, and maintenance of vehicles and other transportation equipment (including electric vehicle charging stations) and the supply chains that enable these operations to facilitate continuity of travel-related operations for essential workers.
- Warehouse operators, including vendors and support personnel critical for business continuity (including heating, ventilation, and air conditioning (HVAC) and electrical engineers, security personnel, and janitorial staff), e-commerce or online commerce, and customer service for essential functions.

PUBLIC WORKS AND INFRASTRUCTURE SUPPORT SERVICES

- Workers who support the construction, maintenance, or rehabilitation of critical infrastructure.
- Workers supporting construction materials production, testing laboratories, material delivery services, and construction inspection.
- Workers who support the operation, inspection, and maintenance of essential public works facilities and operations, including bridges, water and sewer main breaks, fleet maintenance personnel, construction of critical or strategic infrastructure, traffic signal maintenance, emergency location services for buried utilities, maintenance of digital systems infrastructure supporting public works operations, and other emergent issues.
- Workers such as plumbers, electricians, exterminators, builders (including building and insulation), contractors, HVAC Technicians, landscapers, and other service providers who provide services, including temporary construction, that are necessary to maintaining the safety, sanitation, and essential operation

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Essential Critical Infrastructure Workforce

of residences, businesses and buildings, such as hospitals and senior living facilities.

- Workers personnel, who support operations that ensure, the availability of and access to needed facilities, transportation, energy, and communications through activities such as road and line clearing.
- Workers who support the effective removal, storage, and disposal of residential, industrial, and commercial solid waste and hazardous waste, including at landfill operations.
- Workers who support the operation, inspection, and maintenance of essential dams, locks, and levees.
- Workers who support the inspection and maintenance of aids to navigation and other government-provided services that ensure continued maritime commerce.

COMMUNICATIONS AND INFORMATION TECHNOLOGY

Communications

- Maintenance of communications infrastructure, – including privately owned and maintained communication systems, – supported by technicians, operators, call centers, wireline and wireless providers, cable service providers, satellite operations, Internet Exchange Points, Points of Presence, Network Access Points, back haul and front haul facilities, and manufacturers and distributors of communications equipment.
- Government and private sector workers, including government contractors, with work related to undersea cable infrastructure and support facilities, including cable landing sites, beach manhole vaults and covers, submarine cable depots, and submarine cable ship facilities.
- Government and private sector workers, including government contractors, supporting Department of Defense internet and communications facilities.
- Network Operations staff, engineers, and technicians to include IT managers and staff, HVAC and electrical engineers, security personnel, software and hardware engineers, and database administrators that manage the network or operate facilities.
- Workers responsible for infrastructure construction and restoration, including but not limited to engineers, technicians, and contractors for construction and engineering of fiber optic cables, buried conduit, small cells, other wireless facilities, and other communications sector-related infrastructure. This includes permitting, construction of new facilities, and deployment of new technology as required to address congestion or customer usage due to unprecedented use of remote services.
- Installation, maintenance, and repair technicians that establish, support, or repair service as needed.
- Central office personnel to maintain and operate central office, data centers, and other network office facilities, including critical support personnel assisting front line workers.
- Customer service and support staff, including managed and professional services, as well as remote providers of support to transitioning workers to set up and maintain home offices, who interface with customers to manage or support service environments and security issues including payroll, billing, fraud, logistics, and troubleshooting.
- Workers providing electronic security, fire, monitoring, and life safety services, and who ensure physical security, cleanliness, and the safety of facilities and personnel, including those who provide temporary licensing waivers for security personnel to work in other States or Municipalities.
- Dispatchers involved with service repair and restoration.
- Retail customer service personnel at critical service center locations to address customer needs, including new customer processing, distributing and repairing equipment, and addressing customer issues, in order to support individuals' remote emergency communications needs

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Essential Critical Infrastructure Workforce

- Supply chain and logistics personnel to ensure goods and products are available to provision these front-line workers.
- External Affairs personnel to assist in coordinating with local, state, and federal officials to address communications needs supporting COVID-19 response, public safety, and national security.
- Workers responsible for ensuring that persons with disabilities have access to and the benefits of various communications platforms, including those involved in the provision of telecommunication relay services, closed captioning of broadcast television for the deaf, video relay services for deaf citizens who prefer communication via American Sign Language over text, and audio-description for television programming.

Information Technology

- Workers who support command centers, including, but not limited to, Network Operations Command Centers, Broadcast Operations Control Centers, and Security Operations Command Centers.
- Data center operators, including system administrators, HVAC and electrical engineers, security personnel, IT managers and purchasers, data transfer solutions engineers, software and hardware engineers, and database administrators for all industries, including financial services.
- Workers who support client service centers, field engineers, and other technicians and workers supporting critical infrastructure, as well as manufacturers and supply chain vendors that provide hardware and software, support services, research and development, information technology equipment (to include microelectronics and semiconductors), HVAC and electrical equipment for critical infrastructure, and test labs and certification agencies that qualify such equipment (to include microelectronics, optoelectronics, and semiconductors) for critical infrastructure, including data centers.
- Workers needed to preempt and respond to cyber incidents involving critical infrastructure, including medical facilities; state, local, tribal, and territorial (SLTT) governments and federal facilities; energy and utilities; banks and financial institutions; securities and other exchanges; other entities that support the functioning of capital markets, public works, critical manufacturing, food, and agricultural production; transportation; and other critical infrastructure categories and personnel, in addition to all cyber defense workers who can't perform their duties remotely.
- Suppliers, designers, transporters, and other workers supporting the manufacture, distribution, provision, and construction of essential global, national, and local infrastructure for computing services (including cloud computing services and telework capabilities), business infrastructure, financial transactions and services, web-based services, and critical manufacturing.
- Workers supporting communications systems, information technology, and work from home solutions used by law enforcement, public safety, medical, energy, public works, critical manufacturing, food and agricultural production, financial services, education, and other critical industries and businesses.
- Workers required in person to support Software as a Service businesses that enable remote working, performance of business operations, distance learning, media services, and digital health offerings, or required for technical support crucial for business continuity and connectivity.

OTHER COMMUNITY- OR GOVERNMENT-BASED OPERATIONS AND ESSENTIAL FUNCTIONS

- Workers to ensure continuity of building functions, including but not limited to security and environmental controls (e.g., HVAC), the manufacturing and distribution of the products required for these functions, and the permits and inspections for construction supporting essential infrastructure.

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Essential Critical Infrastructure Workforce

- Elections personnel to include both public and private sector elections support.
- Workers supporting the operations of the judicial system, including judges, lawyers, and others providing legal assistance.
- Workers who support administration and delivery of unemployment insurance programs, income maintenance, employment service, disaster assistance, workers' compensation insurance and benefits programs, and pandemic assistance.
- Federal, State, and Local, Tribal, and Territorial government workers who support Mission Essential Functions and communications networks.
- Trade Officials (FTA negotiators; international data flow administrators).
- Workers who support radio, print, internet and television news and media services, including, but not limited to front line news reporters, studio, and technicians for newsgathering, reporting, and publishing news.
- Workers supporting Census 2020.
- Weather forecasters.
- Clergy for essential support.
- Workers who maintain digital systems infrastructure supporting other critical government operations.
- Workers who support necessary permitting, credentialing, vetting, and licensing for essential critical infrastructure workers and their operations.
- Customs and immigration workers who are critical to facilitating trade in support of the national emergency response supply chain.
- Educators supporting public and private K-12 schools, colleges, and universities for purposes of facilitating distance learning or performing other essential functions.
- Workers at testing centers for emergency medical services and other healthcare workers.
- Staff at government offices who perform title search, notary, and recording services in support of mortgage and real estate services and transactions.
- Residential and commercial real estate services, including settlement services.
- Workers supporting essential maintenance, manufacturing, design, operation, inspection, security, and construction for essential products, services, supply chain, and COVID-19 relief efforts.
- Workers performing services to animals in human care, including zoos and aquariums.

CRITICAL MANUFACTURING

- Workers necessary for the manufacturing of metals (including steel and aluminum), industrial minerals, semiconductors, materials and products needed for medical supply chains and for supply chains associated with transportation, aerospace, energy, communications, information technology, food and agriculture, chemical manufacturing, nuclear facilities, wood products, commodities used as fuel for power generation facilities, the operation of dams, water and wastewater treatment, processing and reprocessing of solid waste, emergency services, and the defense industrial base. Additionally, workers needed to maintain the continuity of these manufacturing functions and associated supply chains, and workers necessary to maintain a manufacturing operation in warm standby.
- Workers necessary for the manufacturing of materials and products needed to manufacture medical equipment and PPE.
- Workers necessary for mining and production of critical minerals, materials and associated essential supply chains, and workers engaged in the manufacture and maintenance of equipment and other

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Essential Critical Infrastructure Workforce

infrastructure necessary for mining production and distribution.

- Workers who produce or manufacture parts or equipment that supports continued operations for any essential services and increase in remote workforce, including computing and communication devices, semiconductors, and equipment such as security tools for Security Operations Centers (SOCs) or data centers.
- Workers manufacturing or providing parts and equipment that enable the maintenance and continued operation of essential businesses and facilities.

HAZARDOUS MATERIALS

- Workers who manage hazardous materials associated with any other essential activity, including but not limited to healthcare waste (medical, pharmaceuticals, medical material production, and testing operations from laboratories processing and testing kits) and energy (including nuclear facilities).
- Workers who support hazardous materials response and cleanup.
- Workers who maintain digital systems infrastructure supporting hazardous materials management operations.

FINANCIAL SERVICES

- Workers who are needed to provide, process, and maintain systems for processing, verification, and recording of financial transactions and services, including payment, clearing, and settlement; wholesale funding; insurance services; consumer and commercial lending; public accounting; and capital markets activities.
- Workers who are needed to maintain orderly market operations to ensure the continuity of financial transactions and services.
- Workers who are needed to provide business, commercial, and consumer access to bank and non-bank financial services and lending services, including ATMs, lending and money transmission, lockbox banking, and to move currency, checks, securities, and payments (e.g., armored cash carriers).
- Workers who support financial operations and those staffing call centers, such as those staffing data and security operations centers, managing physical security, or providing accounting services.
- Workers supporting production and distribution of debit and credit cards.
- Workers providing electronic point of sale support personnel for essential businesses and workers.

CHEMICAL

- Workers supporting the chemical and industrial gas supply chains, including workers at chemical manufacturing plants, laboratories, distribution facilities, and workers who transport basic raw chemical materials to the producers of industrial and consumer goods, including hand sanitizers, food and food additives, pharmaceuticals, paintings and coatings, textiles, building materials, plumbing, electrical, and paper products.
- Workers supporting the safe transportation of chemicals, including those supporting tank truck cleaning facilities and workers who manufacture packaging items.
- Workers supporting the production of protective cleaning and medical solutions, PPE, chemical consumer and institutional products, disinfectants, fragrances, and packaging that prevents the contamination of food, water, medicine, among others essential products.

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Essential Critical Infrastructure Workforce

- Workers supporting the operation and maintenance of facilities (particularly those with high risk chemicals and sites that cannot be shut down) whose work cannot be done remotely and requires the presence of highly trained personnel to ensure safe operations, including plant contract workers who provide inspections.
- Workers (including those in glass container manufacturing) who support the production and transportation of chlorine and alkali manufacturing, single-use plastics, and packaging that prevents the contamination or supports the continued manufacture of food, water, medicine, and other essential products.

DEFENSE INDUSTRIAL BASE

- Workers who support the essential services required to meet national security commitments to the federal government and U.S. Military, including, but are not limited to, space and aerospace workers, nuclear matters workers, mechanical and software engineers (various disciplines), manufacturing and production workers, IT support, security staff, security personnel, intelligence support, aircraft and weapon system mechanics and maintainers, and sanitary workers who maintain the hygienic viability of necessary facilities.
- Personnel working for companies, and their subcontractors, who perform under contract or sub-contract to the Department of Defense (DoD) and the Department of Energy (DoE) (on nuclear matters), as well as personnel at government-owned/contractor operated facilities, and who provide materials and services to the DoD and DoE (on nuclear matters), including support for weapon systems, software systems and cybersecurity, defense and intelligence communications, surveillance, sale of U.S. defense articles and services for export to foreign allies and partners (as authorized by the U.S. government), and space systems and other activities in support of our military, intelligence, and space forces.

COMMERCIAL FACILITIES

- Workers who support the supply chain of building materials from production through application and installation, including cabinetry, fixtures, doors, cement, hardware, plumbing (including parts and services), electrical, heating and cooling, refrigeration, appliances, paint and coatings, and workers who provide services that enable repair materials and equipment for essential functions.
- Workers supporting ecommerce through distribution, warehouse, call center facilities, and other essential operational support functions, that accept, store, and process goods, and that facilitate their transportation and delivery.
- Workers in hardware and building materials stores necessary to provide access to essential supplies, consumer electronics, technology and appliances retail, and related merchant wholesalers and distributors.
- Workers distributing, servicing, repairing, installing residential and commercial HVAC systems, boilers, furnaces and other heating, cooling, refrigeration, and ventilation equipment.
- Workers supporting the operations of commercial buildings that are critical to safety, security, and the continuance of essential activities, such as on-site property managers, building engineers, security staff, fire safety directors, janitorial personnel, and service technicians (e.g., mechanical, HVAC, plumbers, electricians, and elevator).
- Management and staff at hotels and other temporary lodging facilities that provide for COVID-19 mitigation, containment, and treatment measures or provide accommodations for essential workers.

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RESIDENTIAL/SHELTER FACILITIES AND SERVICES

- Workers providing dependent care services, particularly those whose services ensure essential workers can continue to work.
- Workers who support food, shelter, and social services, and other necessities of life for needy groups and individuals, including in-need populations and COVID-19 responders including travelling medical staff.
- Workers in animal shelters.
- Workers responsible for the leasing of residential properties to provide individuals and families with ready access to available housing.
- Workers responsible for handling property management, maintenance, and related service calls who can coordinate the response to emergency "at-home" situations requiring immediate attention, as well as facilitate the reception of deliveries, mail, and other necessary services.
- Workers performing housing and commercial construction related activities, including those supporting government functions related to the building and development process, such as inspections, permitting, and plan review services that can be modified to protect the public health, but fundamentally should continue and enable the continuity of the construction industry (e.g., allow qualified private third-party inspections in case of federal government shutdown).
- Workers performing services in support of the elderly and disabled populations who coordinate a variety of services, including health care appointments and activities of daily living.
- Workers responsible for the movement of household goods.

HYGIENE PRODUCTS AND SERVICES

- Workers who produce hygiene products.
- Workers in laundromats, laundry services, and dry cleaners.
- Workers providing personal and household goods, repair, and maintenance.
- Workers providing disinfection services for all essential facilities and modes of transportation and who support the sanitation of all food manufacturing processes and operations from wholesale to retail.
- Workers necessary for the installation, maintenance, distribution, and manufacturing of water and space heating equipment and its components.
- Support required for continuity of services, including commercial disinfectant services, janitorial and cleaning personnel, and support personnel functions that need freedom of movement to access facilities in support of front-line workers.
- Workers supporting the production of home cleaning, pest control, and other essential products necessary to clean, disinfect, sanitize, and ensure the cleanliness of residential homes, shelters, and commercial facilities.
- Workers supporting agriculture irrigation infrastructure.
- Workers supporting the production of home cleaning and pest control products.

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