May 8, 2020

The Honorable Kate Brown, Governor
900 Court St NE, Suite 254
Salem, OR 97301-4047

Dear Governor Brown:

On behalf of Lane County and Lane County’s Board of Commissioners, I am pleased to provide this documentation to demonstrate Lane County’s readiness to move into Phase 1 COVID-19 re-opening.

Attached please find:
- Response to Prerequisite Check-list
- Lane County’s Blueprint for Re-opening

As of today, Lane County has 16 active cases of COVID-19 and zero hospitalizations. Lane County has a strong community collaborative approach to containing the spread of disease, with local partners meeting regularly and working hard to protect the health of the community. We have sufficient staff and resources to test, trace and isolate new cases. Between the County’s stockpile and the supplies of our health care and community partners, we have sufficient PPE on-hand for at least 30 days.

We are committed to the health and safety of our residents and all Oregonians; therefore we have put together a blueprint that will guide us in monitoring the spread of COVID-19 and outlines our plan to adhere to state guidance on Phase 1. Should data and conditions indicate a need, we are prepared to re-impose physical distancing measures either county-wide or in effected areas.

We appreciate your consideration.

Sincerely,

Steve Mokrohisky
Lane County Administrator
Lane County's Application to Move to Phase 1

The health and safety of Lane County residents must be the top priority as Lane County prepares to relax the restrictions implemented as part of Governor Brown’s Stay Home, Save Lives executive order. While there is no expectation that COVID-19 cases will get to zero in the near future, a phased approach to re-opening the community and allowing commerce to resume will help limit the number of people impacted by this new disease. Lane County has used the time provided by this executive order to plan carefully and build capacity to limit the spread of COVID-19 as the community resumes more normal levels of activity. As of May 7, 2020, Lane County has 13 active cases of COVID-19, sufficient testing capacity, the ability to expand capacity of contact tracing and hospital facilities if needed, and an adequate supply of personal protective equipment to move to Phase 1 of re-opening.

<table>
<thead>
<tr>
<th>Prerequisite</th>
<th>Lane County's Demonstration</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Declining prevalence of COVID-19</td>
<td>According to Essence data, ED visits for CLI in Lane County have been in the normal range since April 10, 2020.</td>
</tr>
<tr>
<td>The percentage of emergency department visits for COVID-19-like illnesses (CLI) are less than the historic average for flu at the same time of year.</td>
<td>Since March 1, 2020 a total of 15 Lane County residents confirmed to have COVID-19 have been hospitalized. The maximum number of Lane County residents hospitalized at one time was 8 people on April 11th and 12th. There have been no confirmed hospitalized cases since April 24, 2020 in Lane County.</td>
</tr>
<tr>
<td>A 14-day decline in COVID-19 hospital admissions.</td>
<td></td>
</tr>
</tbody>
</table>

![Hospitalized Patients - COVID: Confirmed & Suspect/Confirmed](source: HOSCAP)

<table>
<thead>
<tr>
<th>Hospital Report Date</th>
<th>Day of Hospital Report Date [2020]</th>
</tr>
</thead>
<tbody>
<tr>
<td>4/23/2020</td>
<td>April 9, April 10, April 20, April 21, April 24, April 28, May 4</td>
</tr>
</tbody>
</table>

2. Minimum Testing Regimen

| County is able to administer testing at a rate of 30 per 10k per week | Based on the population size of Lane County, 30 tests per would be 1,071 tests per week, or 153 tests per day. Based on the daily average number of tests for the week ending May 3, 2020, Lane County is currently conducting about 185 tests per day and just under 1,300 tests per week. Local labs at PeaceHealth and McKenzie-Willamette hospitals have capacity to administer up to 400 tests per day and each hospital has committed to processing up to 50 tests per day for Lane County Public Health as part of outbreak investigations, sentinel |
surveillance, and other urgent needs. With the capacity of other labs, Lane County can test up to 3500 residents per week.

**Sufficient testing sites accessible to underserved communities**

Lane County residents with symptoms can be tested at multiple locations with doctor’s orders:
- McKenzie-Willamette, in cooperation with the University of Oregon is operating a testing site at the Springfield hospital where anyone with a doctor’s order can get a test
- Most primary care providers can take a sample and have contracts with labs that can perform the test
- Smaller primary care practices are sending their patients to McKenzie-Willamette hospital
- Nova urgent care, with locations in Eugene, Springfield and Cottage Grove can perform the tests and have them analyzed at McKenzie-Willamette’s lab
- Both McKenzie-Willamette and PeaceHealth hospitals are testing all admitted patients

Lane County Public Health is currently conducting surveillance testing for staff and clients at homeless respite sites and homeless shelters. During May, this will expand to testing staff and residents at long term care facilities and surveillance testing in the LatinX community in cooperation with trusted partner organizations.

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**COVID-19 tests collected in Lane County by date**

![Graph showing the number of tests collected in Lane County by date.](image)

*Source: Orpheus*

### 3. Contact Tracing System

**County has 15 contact tracers per 100k people**

To meet this requirement, Lane County would need 56 contract tracers, even though we currently only have 13 active cases. Lane County Public Health’s contract tracers work in teams of six supervised by a nurse or disease investigation specialist. Based on past experience, 8 FTE (includes shared epidemiologist and
supervisor) are needed to do adequate contact tracing for up to 10 active COVID-19 cases. Lane County currently has a pool of other staff and volunteers to bring capacity up to 20 FTE, enabling contact tracing of up to 50 active cases. Public Health will be partnering with Lane County Sheriff's Search and Rescue, the University of Oregon, and the Oregon Health Authority to provide a pool of 200 staff and volunteers who can be mobilized quickly to work under a nurse or disease investigation specialist to conduct contact tracing if surge in disease requires expansion to 50 tracers.

| Contact tracing workforce is reflective of the county and able to work in needed languages | Lane County will utilize existing Health and Human Services staff to ensure that there is at least one bilingual (Spanish/English) contract tracer and case investigator per team. Existing contacts with the tribal communities will be utilized to establish partnerships and collaborations as needed. An existing collaboration with South Lane Family Resource center to communicate about COVID-19 with populations that speak Mam, Q'anjob'a', Q'eq'chi' and Mixtec can also be utilized for contact tracing in the event of a case. |
| County is prepared to trace 95% of all new cases within 24 hours | Lane County currently investigates 95% of all new cases within 24 hours and expects this to continue. |

### 4. Isolation facilities

| County has facilities for those who cannot self-isolate | Lane County currently has sufficient facilities to isolate 15 individuals who cannot self-isolate, and will have facilities in place for at least 55 individuals by May 15th, |
| | • One hotel in Cottage Grove has agreed to provide up to 5 rooms. Sponsors has provided 10 tiny homes to Lane County for use by homeless individuals who need to be isolated or quarantined. |
| | • Lane County recently purchased a property with 40 rooms that can be used for isolation; this facility is expected to be ready to open on May 15th. |
| | • Three hotels in Florence have agreed to provide rooms as needed to Lane County Public Health |

### Narrative on response to three outbreak situations

#### Lane County Jail
Lane County's Sheriff's office contracts with Wellpath for provision of health care services in the Lane County jail. Communicable Disease nursing staff will work with Wellpath to ensure testing of suspected COVID-19 cases and provide guidance on isolation of confirmed cases and quarantine of exposed individuals. If Wellpath's contracted laboratory is unable to provide quick results on COVID-19 tests, Lane County Public Health will provide testing supplies and facilitate submission of tests to one of the two local labs that have agreed to provide analysis under these circumstances.

The goal is to:

- Protect the health and safety of all Law Enforcement Officers (LEOs), members, inmates and the public.
- To reduce the transmission and spread of COVID-19 and/or influenza by maintaining a sanitary facility.
- To ensure the justice system continues to operate without unnecessary delay.

The jail will notify the Communicable Disease Supervisor to coordinate efforts in the jail to prevent further spread. The response team will use the OHA/DOC guidance for addressing a case in the jail.
Long-term care facilities (LTCFs)
Lane County Public Health has historically collaborated closely with LTCFs in the event of outbreaks and has continued to provide guidance during the COVID-19 pandemic. In the event of an outbreak, Lane County Public Health will provide testing supplies and facilitate submission of tests to OSPHL or to one of the local hospital labs for analysis. Public Health will ensure that infection control measures are in place, using guidelines from OHA’s LTCF COVID-19 toolkit. Should there be a need for individuals to isolate/quarantine outside the facility, Public Health will assist in coordinating transport to the River Ave location.

Respite shelters
Lane County is currently operating three respite sites for persons experiencing homelessness. Two of the sites are for those who are symptom-free. The third site, with clinical staff available to conduct assessments is for those experiencing symptoms or those awaiting test results. For those who test positive, there are 10 tiny homes and, after May 15 a new county property will be available for isolating those who test positive. Currently, Lane County Public Health is conducting surveillance testing at the three sites in order to find and respond to cases in this population. If a case is discovered, Lane County will deploy a contact tracing team and implement isolation and quarantine as described in OHA’s guidelines.

5. Statewide Sector Guidelines

Each sector must adhere to Oregon Health Authority statewide guidelines to protect employees and consumers, make the physical workplace safer and implement processes that lower risk of infection in the business.

Public Health staff will work with County Community and Economic Development staff, City staff and local Chambers of Commerce to ensure that sector specific guidance are distributed and communicated to local employers, businesses and the general public. Lane County will use the COVID-19 website, telephone hotline and dedicated COVID-19 email address, to facilitate these communications and respond to questions from the community.

Lane County Public Health will also continue to communicate to the business community and the general public, in both English and Spanish, about the importance of good hygiene and continued physical distancing to limit the spread of the virus:

- wash hands with soap and water or use hand sanitizer, especially after touching frequently used items or surfaces
- avoid touching your face
- sneeze or cough into a tissue, or the inside of your elbow
- disinfect frequently used items and surfaces as much as possible
- consider using face coverings while in public, particularly when social distancing is not easy to maintain or when using the bus system
- If you have any symptoms or are not feeling well, stay home until you are symptom-free for 3 days

6. Sufficient Health Care Capacity

County able to accommodate a 20% increase in hospitalizations

Lane County hospitals have surge response plans and are actively communicating to ensure they can respond quickly to increased need for COVID-19 cases to be treated in the hospital and in the ICU.

7. Sufficient PPE supply

Hospitals reporting daily supply in HOSCAP

Current PPE reported in HOSCAP (5/7/2020, 8AM)

<table>
<thead>
<tr>
<th>PPE Type</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>N95 Respirators On Hand</td>
<td>19873</td>
</tr>
<tr>
<td>Surgical Masks On Hand</td>
<td>32809</td>
</tr>
<tr>
<td>Reusable Respirators On Hand</td>
<td>119</td>
</tr>
<tr>
<td>PPE Category</td>
<td>Quantity</td>
</tr>
<tr>
<td>-------------------------------</td>
<td>----------</td>
</tr>
<tr>
<td>Face Shields On Hand</td>
<td>3861</td>
</tr>
<tr>
<td>Gloves On Hand</td>
<td>209044</td>
</tr>
<tr>
<td>Gowns On Hand</td>
<td>5779</td>
</tr>
</tbody>
</table>

**Hospitals have a 30 day supply of PPE**

Hospital administrators from both of Lane County’s hospital systems have submitted attestations that they have a 30-day supply of PPE.

McKenzie-Willamette Hospital submitted on 5/1/2020

PeaceHealth Hospitals submitted on 5/5/2020

**County has sufficient PPE for 1st responders**

On May, 5, 2020 Lane County’s Board of Commissioners certified that the County has a sufficient 30 day supply for first responders.

On May 6, 2020 the University of Oregon announced that they have secured a Battelle decontamination system that can re-sterilize N-95 masks for re-use and they will provide this service for free to the healthcare sector, ensuring that local health care providers will have access to sufficient N-95 masks.
Hospital Attestation to Resume Non-Emergent or Elective Procedures

On April 27, 2020, the Governor issued Executive Order 20-22, that allowed hospitals to resume non-emergent or elective procedures, by May 1, 2020 at the earliest, if a hospital is in compliance with Oregon Health Authority (OHA) guidance. The guidance issued by OHA on April 29, 2020, requires hospitals to have adequate personal protective equipment (PPE) on hand and to attest to OHA prior to resuming non-emergent or elective procedures, that the hospital meets OHA standards.¹

This attestation form must be signed by an individual with legal authority to act on behalf of the hospital or health system.

I, _______ David Elgarico _______ (printed name), on behalf of McKenzie-Willamette Medical Ce (name of hospital or health system), attest to the following (please check any of the boxes that apply and supply any additional information):

- [ ] The hospital or health system intends to resume non-emergent or elective procedures by (insert date) May 01, 2020

- [ ] The hospital or hospitals within the health system have adequate medical grade PPE supplies that meet applicable National Institute for Occupational Safety and Health and U.S. Food and Drug Administration regulations for performing non-emergent or elective procedures.

- [ ] As a large hospital (as defined in OHA guidance) the hospital has an adequate 30-day supply of PPE on hand that is appropriate to the number and type of procedures to be performed or an open supply chain, as that is defined in OHA's guidance.

- [ ] As a small hospital (as that is defined in OHA guidance), the hospital has an adequate 14-day supply of PPE that is appropriate to the number and type of procedures to be performed on hand or an open supply chain, as that is defined in OHA's guidance.

¹ The guidance can be found at https://sharedsystems.dhsoha.state.or.us/DHSForms/Served/le2322u.pdf.
☐ As a health system, PPE supplies on hand were calculated at a health system level and the PPE requirements can be met for each of the hospitals within the health system listed below.

If a health system is submitting this attestation, please list all of the hospitals in the system for which this attestation applies:
Not Applicable

I certify that the responses in this attestation are accurate and complete. I understand that if OHA determines that a hospital is not in compliance with the PPE requirements, OHA may require the hospital to cease performing non-emergent or elective procedures for a specified period of time.

David Elgarico, CEO
Printed name and title

04/30/2020
Date

Signature
Hospital Attestation to Resume Non-Emergent or Elective Procedures

On April 27, 2020, the Governor issued Executive Order 20-22, that allowed hospitals to resume non-emergent or elective procedures, by May 1, 2020 at the earliest, if a hospital is in compliance with Oregon Health Authority (OHA) guidance. The guidance issued by OHA on April 29, 2020, requires hospitals to have adequate personal protective equipment (PPE) on hand and to attest to OHA prior to resuming non-emergent or elective procedures, that the hospital meets OHA standards.¹

This attestation form must be signed by an individual with legal authority to act on behalf of the hospital or health system.

I, Richard DeCarlo (printed name), on behalf of PeaceHealth (name of hospital or health system), attest to the following (please check any of the boxes that apply and supply any additional information):

☑ The hospital or health system intends to resume non-emergent or elective procedures by (insert date) TBD

☑ The hospital or hospitals within the health system have adequate medical grade PPE supplies that meet applicable National Institute for Occupational Safety and Health and U.S. Food and Drug Administration regulations for performing non-emergent or elective procedures.

☐ As a large hospital (as defined in OHA guidance) the hospital has an adequate 30-day supply of PPE on hand that is appropriate to the number and type of procedures to be performed or an open supply chain, as that is defined in OHA's guidance.

☐ As a small hospital (as that is defined in OHA guidance), the hospital has an adequate 14-day supply of PPE that is appropriate to the number and type of procedures to be performed on hand or an open supply chain, as that is defined in OHA's guidance.

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As a health system, PPE supplies on hand were calculated at a health system level and the PPE requirements can be met for each of the hospitals within the health system listed below.

If a health system is submitting this attestation, please list all of the hospitals in the system for which this attestation applies:

- PeaceHealth Sacred Heart Riverbend
- PeaceHealth Sacred Heart University District
- PeaceHealth Cottage Grove
- PeaceHealth Peace Harbor

I certify that the responses in this attestation are accurate and complete. I understand that if OHA determines that a hospital is not in compliance with the PPE requirements, OHA may require the hospital to cease performing non-emergent or elective procedures for a specified period of time.

Richard DeCarlo System EVP, COO
Printed name and title

Signature

May 4, 2020
Date

Click here to submit form
BEFORE THE BOARD OF COMMISSIONERS OF LANE COUNTY, OREGON

ORDER 20-05-05-01

IN THE MATTER OF APPROVAL OF A CERTIFICATION OF SUFFICIENT PPE FOR FIRST RESPONDERS AND DELEGATING AUTHORITY TO THE COUNTY ADMINISTRATOR TO SIGN ANY CERTIFICATION

WHEREAS, the World Health Organization has declared COVID-19 a global pandemic; and

WHEREAS, the President of the United States has declared COVID-19 to be a national emergency; and

WHEREAS, the Governor of Oregon has declared COVID-19 a statewide public health emergency; and

WHEREAS, the Lane County Board of Commissioners has declared COVID-19 a Lane County public health emergency on March 17, 2020 with Board Order 20-03-17-6; and

WHEREAS, Governor Brown signed Executive Order 20-12 requiring Oregonians to stay at home, closing specified retail businesses, requiring social distancing measures for other public and private facilities and imposing requirements for outdoor areas and licensed childcare facilities.

WHEREAS, Governor Brown has now released Reopening Oregon: A Public Health Framework for Restarting Public Life and Business; and

WHEREAS, this framework requires a vote of the County governing body Boards vote to certifying PPE for first responders is sufficient; and

WHEREAS, the presentation on opening up Oregon and Lane County presented evidence that there is sufficient PPE for first responders and a plan for acquiring additional PPE for first responders if needed;

WHEREAS, Lane County has declared a state of emergency throughout all of Lane County;

NOW, THEREFORE the Board of County Commissioners of Lane County ORDERS as follows:

1. It is certified by a vote of the Lane County Board of Commissioners, the governing body of Lane County, that County staff have made inquiries of Lane County first responders and have a good faith belief that PPE for first responders is sufficient based upon the current conditions. The Lane County Board of Commissioners reserves the right to revoke this certification based upon a change in conditions.
2. The County Administrator is delegated authority to sign any documents related to Lane County's request to the Governor to proceed with re-opening.

ADOPTED this 5TH day of May, 2020

Heather Buch, Chair
Lane County Board of Commissioners
Lane County Plan Overview

Governor Brown’s Stay Home, Save Lives Executive Order was instituted on March 23, 2020 to slow the spread of COVID-19 as a critical non-pharmaceutical intervention. This decision came in the face of significant increases in persons testing positive for COVID-19, and concern that the existing health care system would quickly be overwhelmed with a lack of equipment, PPE, and bed capacity. Upon early analysis, it appears as though in Lane County the timing of this order relative to the county’s first known case slowed what would have been an exponential growth curve, and resulted in an overall flattening. We believe that overall flattening occurred on or around April 15 and have subsequently observed a steady and consistent reduction from that day forward.

To move away from a reliance on the Stay Home, Save Lives order as a primary tool, Lane County needs robust data about the spread of the disease in the community, a strong healthcare system that can respond quickly to increased disease, strong and clear recommendations about individual and organizational level physical distancing within relaxed restrictions, and a commitment to quickly re-deploying stay-at-home advisories in hot spots where transmission is rapidly occurring. As such, Lane County’s overall blueprint is designed around 7 key criteria outlined by Lane County’s Senior Public Health Officer and is specifically geared towards identifying numerical thresholds for the primary considerations for relaxation and phases thereof. In terms of detailing individual considerations for businesses, other organizations, and events Lane County will defer to Governor Brown’s framework and plan for restriction relaxation, with an acknowledgement that some local considerations may need to be made on a case by case basis.

General Framework for Opening Oregon

Governor Brown has released *Reopening Oregon: A Public Health Framework for Restarting Public Life and Business*, which serves as a statewide guide for how and when communities in Oregon will relax restrictions put in place in response to the COVID-19 pandemic. The framework includes specific gating criteria and preparedness strategies that must be met prior to moving through the three phases of lifting restrictions. Those criteria and strategies are incorporated into Lane County’s Blueprint, and include declining numbers of people with symptoms and disease, adequate hospital capacity, robust testing and contact tracing, healthcare system capacity (PPE and surge), and plans for health and safety. Once those are met, the restrictions would be eased in three phases with at least 21 days (a full incubation period) between each phase.

- **Phase 1**: Individuals would be expected to practice good hygiene, consider use of face coverings in public, and stay home if sick. Employers would develop appropriate policies for social distancing, protective equipment, temperature checks, sanitation, and monitoring employees for symptoms. Vulnerable individuals would be advised to stay home, social gatherings would be limited to no more than 10 people, non-essential travel would be limited, and telework would continue where possible.

- **Phase 2**: After at least 21 days, if the gating criteria are met, gatherings could increase to no more than 50 people, non-essential travel could resume, schools and gyms could open under physical distancing requirements.
- **Phase 3**: After at least 21 days, if the gating criteria are met, gatherings could increase, worksites could have unrestricted staffing, visitors to nursing homes would be allowed, and restaurants and bars can have more seating.

**Lane County Considerations for Relaxing Restrictions and Advancing to Next Phase**

1. **Falling COVID Cases over 14 days.** Each incubation period lasts 14 days, so the phased plan requiring communities to wait 21 days at each phase would take into account any changes over an incubation period plus a week to assess the current status prior to moving to the next phase. In Lane County we have not had significant growth of cases during the pandemic, and the graph below indicates the number of cases based on the date of symptom onset (not the date that the lab result was received), and shows the flattening of the curve in this community. (See triggers section later in this document for more information about how changes in this data might impact future restrictions).

![Cumulative COVID-19 cases, Lane County](image)

**Lane County appeared to be on a trajectory for cases to double every 5-6 days when the stay home executive order was issued on 3/23/2020**

![Status](image)

**Status**

**Green**

2. **Testing and Availability of Local Laboratory Testing.** In order to quickly detect any changes in the growth rate or localized outbreaks, the community needs access to widespread testing, particularly in the event that cases are increasing on the disease curve. Based on the total population in Lane County, the minimal number of testing each day should average 500, representing approximately 1% of the population being tested each week. Optimal levels would be closer to 1,000 tests per day administered to residents of Lane County. Lane County is monitoring the actual tests completed, as well as ensuring sufficient capacity to process needed tests in the event of an outbreak. As testing resources become more available, the state is relaxing the guidelines for who is eligible for testing—when the testing resources were scarce, access was limited to only those who were most ill or had other specific risk factors. While testing capacity has increased
significantly in Lane County, the number of tests is still lagging as the community adjusts to increased availability.

Lane County is expecting to have each of the local labs processing at least 100 tests per day, with the balance covered by the Oregon State Public Health Lab and commercial labs.

While this is the minimum needed to begin relaxing restrictions, ultimately the community also needs expanded sentinel and surveillance testing. In addition to testing for those who are symptomatic, Lane County Public Health needs access to sufficient testing for higher-risk populations and/or settings through local labs. This would be achieved by agreement from the two local hospital labs to make available each day 50 tests for groups identified by Lane County Public Health.

<table>
<thead>
<tr>
<th>Lab</th>
<th>Total tests per day</th>
<th>Status</th>
<th>Target Daily Av.</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>PeaceHealth</td>
<td>***</td>
<td></td>
<td>At least 50/day available for Public Health</td>
<td>Green</td>
</tr>
<tr>
<td>McKenzie</td>
<td>***</td>
<td></td>
<td>At least 50/day</td>
<td>Green</td>
</tr>
</tbody>
</table>
3. **Sufficient Contact Tracing Resources.** Contact tracing involves identifying and reaching out to the contacts of someone who tests positive for an infectious disease. Contacts are then tested and, for those who test positive, the process is then repeated for their contacts, and so on, until the chain of transmission is interrupted. In the case of COVID-19, until recently only very sick people meeting strict criteria were referred for testing. As testing becomes more widely available, Public Health will implement more extensive contact tracing, which is expected to include isolation and quarantine of known and suspected cases. In some cases, people who are isolated or quarantined at home will need support and resources, such as groceries, laundry, and prescription medicines. Those who are unhoused or unable to return to their homes will additionally need accommodation. It is not yet clear how widespread infection is in Lane County, therefore, it is difficult to estimate the resources that will be needed locally.

Lane County’s plan includes six-person contact tracing teams led by a nurse or Disease Investigation Specialist (DIS) who conducts the initial case investigation. Teams also include four contact tracers and two community service workers who provide support to those in isolation. Three teams share an epidemiologist and supervisor. The number of teams needed depends on the number of positive test results, the concentration of contacts, and the supports needed for isolation. The state estimates 15 FTE/100,000 population needed for COVID-19 contact tracing, which translates to about 57 full-time staff. Below are the best estimates that take the number of active cases into consideration.

<table>
<thead>
<tr>
<th># Active Cases</th>
<th># Teams Needed</th>
<th># Total FTE Needed</th>
<th># Current FTE Available</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td>1</td>
<td>8</td>
<td>8</td>
<td>Green</td>
</tr>
<tr>
<td>50</td>
<td>3</td>
<td>20</td>
<td>20*</td>
<td>Green</td>
</tr>
<tr>
<td>100</td>
<td>6</td>
<td>40</td>
<td>20**</td>
<td>Yellow</td>
</tr>
</tbody>
</table>

* Includes surge capacity from University of Oregon and volunteers
** In the event that case numbers surged significantly, Lane County would request additional support from OHA and volunteers, and would divert other Lane County H&HS staff to this work.

4. **Plans for Rapid Scale-up in Case of a Second Wave.** According to the Roadmap for Reopening by the American Enterprise Institute, one of the triggers for reinstituting stay-at-home orders is a doubling of cases every 3-5 days. Because the virus is so contagious, it’s critical that the situation is closely monitored (see triggers below), and that the healthcare system is able to quickly respond in the event that increased disease is detected. This means that hospitals need to have capacity for severe cases, health care providers need sufficient PPE, and that the community needs to be prepared to activate stay-at-home strategies if needed to combat a significant outbreak.

<table>
<thead>
<tr>
<th>Response Item</th>
<th>Available Unused Capacity</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Capacity for 20% Increase in Hospital Beds</td>
<td>Yes</td>
<td>Green</td>
</tr>
<tr>
<td>Ventilators</td>
<td>122 Capacity; 19</td>
<td>Green</td>
</tr>
</tbody>
</table>
Additional indicators of preparedness include local surge response plans, currently in place in local hospitals, police/fire/EMS, and the University of Oregon.

5. **Sufficient Personal Protective Equipment (PPE).** In order to protect first responders and health care workers, communities need to maintain sufficient supplies of PPE on hand, and ultimately demonstrate that regular supply chains are online to meet any emerging needs. As part of Oregon’s emergency response, counties are designated as local clearinghouses for PPE supplies from the state and national stockpile and distribute as needed across the community. Additionally, the ability to clean and recycle N95 masks will be available in Lane County which will support health care providers and others’ ability to maintain an adequate supply on hand.

The Chair of the Lane County Fire Defense Board will be monitoring levels of PPE available to the fire and EMS providers across the County, and weekly certifying to the County whether or not there is a sufficient 30 day supply on-hand for the first responders.

<table>
<thead>
<tr>
<th>Fire Defense Board Certifies Current 30-day supply of PPE</th>
</tr>
</thead>
</table>

Lane County manages the local clearinghouse that can be available to support healthcare providers in the event of a significant surge or an interruption in the supply chain. Generally, providers are expected to establish their own supply chains. The below is meant to estimate supply needs with comparison to current clearinghouse levels as of April 27, 2020.

<table>
<thead>
<tr>
<th>Type</th>
<th>On-hand Lane Co. Clearinghouse HOCSAP E/S Fire</th>
<th>30-day Target (non-COVID)</th>
<th>30-day Target 2 ICU patients/20 ward patients</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Procedure Masks</td>
<td>216,350</td>
<td></td>
<td></td>
<td>Green</td>
</tr>
<tr>
<td>N95 Respirators</td>
<td>48,452</td>
<td>31,800</td>
<td>6,000/7,200</td>
<td>Green</td>
</tr>
<tr>
<td>Gowns</td>
<td>12,576</td>
<td>4,500</td>
<td>6,000/7,200</td>
<td>Yellow</td>
</tr>
<tr>
<td>Face Shields</td>
<td>5,949</td>
<td>6,750</td>
<td>4,560/6,600</td>
<td>Red</td>
</tr>
<tr>
<td>Gloves</td>
<td>265,244</td>
<td>92,000</td>
<td>11,040/15,600</td>
<td>Green</td>
</tr>
</tbody>
</table>

6. **Blueprint on the Process of Restriction Relaxation.** This blueprint is designed to create clarity for policy makers, healthcare providers, community partners, and the general public about the thresholds that will be used to begin relaxing current restrictions, and those triggers that might indicate a need for slowing or reversing that relaxation of restrictions.
This document reflects the data that Lane County officials will use to begin the relaxation of restrictions, and to monitor the situation throughout the period of re-opening Lane County. Until there is a widely available vaccine, Public Health Officials must be vigilant in watching for, and preparing for, a potential second wave of disease in our community. The attached guidelines developed by the Governor’s Office will be critical to ensure that restrictions are relaxed in a way that still maintains safety and public health, while moving forward with the important reopening of community businesses and services.

7. **OHA Support for Restriction Relaxation.** Because the SAS CoV-2 virus does not acknowledge city or county boundaries, a coordinated statewide framework is important to support this work. Governor Brown has provided a roadmap for Oregon, taking into account data with a clear eye toward protecting the health of Oregonians, and Lane County will move forward within the guidelines included in that plan. The components of the statewide roadmap include:
   - **Gating Criteria**
     - Symptoms
     - Cases
     - Hospitals
   - **Core State Preparedness**
     - Testing & Contact Tracing
     - Healthcare System Capacity
     - Plans
   - **Phased Approach Guidelines**

The County intends to defer to the Governor’s guidance and Executive Orders for employers and the public, as well as for specific sectors (see Appendices). This will help provide clarity and limit confusion for the community as we all work together to carefully reopen Lane County.

**Data Triggers to Monitor for Future Action**
One role for Public Health during this process of reopening the community will be to monitor for any impacts the changes have on disease levels, and to initiate any appropriate responses quickly. Each day additional data is released about this virus, how it spreads, and how it might be contained. The triggers listed below are not stand-alone indicators that relaxation should be halted or reversed, but would be flags that signal an immediate assessment should be conducted to determine the best course of action.

- Significant increases in number of cases: More than 3 new cases in a day that are not epidemiologically linked
- Number of people hospitalized for COVID-like illness
- Significant outbreaks in individual communities or specific settings may necessitate targeted action in that area or setting.
Appendix A: State Guidance for Employers and General Public

- [Guidance for the General Public](#)
- [Guidance for Employers](#)
Phase One Reopening Guidance

Governor Kate Brown’s framework for Reopening Oregon will help Oregonians restart public life and business while maintaining healthy Oregon communities. The framework outlines actions Oregonians must take to move forward safely.

As the state reopens, it's important to remember the risks. We must all do our best to protect ourselves and one another. If we all follow these actions, we will help save the lives of our colleagues, neighbors, friends, and family members.

**These actions include:**

- Stay home if you are sick.
- To avoid exposure to COVID-19, people who are at risk for severe complications (over age 60 or have underlying medical conditions) should stay home even if you feel well.
- If you become symptomatic (cough, fever, shortness of breath) while in public, please return home and self-isolate immediately. Contact your health care provider if you need medical attention.
- Practice good hand hygiene with frequent handwashing for at least 20 seconds or use hand sanitizer (60-95% alcohol content).
- Cover coughs/sneezes with elbow or tissue. If you use a tissue, immediately discard tissue in garbage and your wash hands.
- Avoid touching your face.
- Practice physical distancing of at least six (6) feet between you and people who you do not live with.
- Use cloth, paper or disposable face coverings in public. As Oregon is reopening and restrictions are being lifted on businesses and public spaces, it may be difficult to ensure that you can stay six (6) feet away from others at all times.
- Stay close to home. Avoid overnight trips and minimize other non-essential travel, including recreational day trips to destinations outside the community where you live. Travel the minimum distance needed to obtain essential services; in rural areas, residents may have to travel greater distances for essential services, while in urban areas, residents may only need to travel a few miles for those services.

You can get this document free of charge in other languages, large print, braille or a format you prefer. Contact Mavel Morales at 1-844-882-7889, 711 TTY or OHA.ADAModifications@dhsoha.state.or.us.
May 7, 2020

Oregon General Guidance for Employers on COVID-19

General considerations for your workplace:

- Comply with any of the Governor’s Executive Orders that are in effect.
- Know the signs and symptoms of COVID-19 and what to do if employees develop symptoms at the workplace.
- Understand how COVID-19 is transmitted from one person to another—namely, through coughing, sneezing, talking, touching, or via objects touched by someone with the virus.
- Make health and safety a priority by implementing safeguards to protect employees and the public. Federal and state guidelines, including sector-specific guidance, will help you determine which safeguards are recommended or are required, for example, use of personal protective measures such as face coverings or masks.
  - CDC has detailed general guidance to help small businesses and employees prepare for the effects of COVID-19.
  - Oregon’s specific guidelines for the following sectors can be found at (https://govstatus.egov.com/OR-OHA-COVID-19#collapseOHAGuidance):
    - Health care
    - Transit
    - Retail
    - Childcare/Early childhood education
    - Personal services
    - Outdoor recreation
    - Restaurants
- Consider modifying employee schedules and travel to reduce unnecessary close physical contact (physical distance of less than (6) six feet between people).
- Be aware of protected leave requirements and plan ahead for any anticipated workforce adjustments.
Modification of employee schedules and travel

Considerations for modifying employee schedules and travel as feasible:

- Identify positions appropriate for telework or partial telework, including consideration of telework for employees who are at higher risk for severe COVID-19 complications due to underlying medical conditions identified by the CDC.

- Stagger or rotate work schedules or shifts at worksites to ensure employees are able to sufficiently maintain physical distancing.

- Limit non-essential work travel.

Workplace safety

Implement workplace safeguards as feasible or when required. See also sector-specific guidance here.

- Implement physical distancing measures consistent with the Governor’s Executive Orders and state guidance.

- Increase physical space between workers. This may include modifications such as markings on the floor demonstrating appropriate spacing or installing plexiglass shields, tables or other barriers to block airborne particles and maintain distances. Review and follow any sector-specific guidance issued by the state that recommends or requires specific physical distancing measures.

- Restrict use of any shared items or equipment and require disinfection of equipment between uses.

- Reinforce that meticulous hand hygiene (frequent and proper handwashing) is of utmost importance for all employees. Ensure that soap and water or alcohol-based (60-95%) hand sanitizer is provided in the workplace. Consider staging additional hand washing facilities and hand sanitizer for employees (and customer use, if applicable) in and around the workplace.

- Regularly disinfect commonly touched surfaces (workstations, keyboards, telephones, handrails, doorknobs, etc.), as well as high traffic areas and perform other environmental cleaning.

- Employers may encourage or require employee use of cloth or disposable face coverings as indicated by sector-specific guidance. If employers require use of cloth face coverings, employers must provide cloth or disposable face coverings for employees.

- Consider upgrades to facilities that may reduce exposure to the coronavirus, such as no-touch faucets and hand dryers, increasing fresh-air ventilation and filtration or disinfection of recirculated air, etc. Consider touchless payment method when possible and if needed.
• Limit the number of employees gathering in shared spaces. Restrict use of shared spaces such as conference rooms and break rooms by limiting occupancy or staggering use.

• Restrict non-essential meetings and conduct meetings virtually as much as possible. If in-person meetings are necessary, follow physical distancing requirements.

• Consider regular health checks (e.g., temperature and respiratory symptom screening) or symptom self-report of employees, if job-related and consistent with business necessity.

• Train all employees in safety requirements and expectations at physical worksites.

**Employee leave and health insurance**

Be aware of federal and state protected leave and paid leave laws (if applicable) and requirements for health insurance coverage:

• Advise employees to stay home and notify their employer when sick.

• Review and comply with any applicable requirements for maintaining employee health insurance coverage.

• Healthcare provider documentation is generally not required to qualify under federal and state leave laws due to COVID-19 related circumstances or to return to work.

• Review and comply with any applicable required federal and state leave law protections for employees who are unable to work due to COVID-19 related circumstances.

• Determine whether your business can extend paid or unpaid leave and if feasible adopt a temporary flexible time off policy to accommodate circumstances where federal or state law does not provide for protected or paid leave.

• Develop an action plan consistent with federal and state guidance if an employee develops symptoms while in the workplace, tests positive for COVID-19 or is determined to be presumptively positive by a public health authority.

**Downsizing and layoffs**

If downsizing or other workforce adjustment measures are necessary, adhere to applicable state and federal requirements regarding notice of layoffs and recalls for affected workers:

• Determine whether alternatives to layoff may be feasible such as furloughs or reduced schedules.

• Refer employees to resources including filing for unemployment benefits and community services.

• Create a plan for recalling employees back to work.
Union workplaces

If you have a unionized workforce, determine obligations to bargain with the union or unions which represent your employees.

Links to additional information:

For the most up to date information from Public Health and the CDC:

- https://sharedsystems.dhsoha.state.or.us/DHSForms/Served/LE2356.pdf

For COVID-19 Guidance from the State and Federal Sources:

Resources for businesses and employers to plan, prepare, and respond to COVID-19, which is available in English, Spanish, Chinese, Vietnamese and Korean: www.cdc.gov/coronavirus/2019-ncov/community/organizations/businesses-employers.html

- Workplace cleaning and disinfecting recommendations, including everyday steps, steps when someone is sick, and considerations for employers: www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html
- Safety practices for exposures in the workplace:
OSHA guidance on preparing workplaces for COVID-19:

- Oregon OSHA: https://osha.oregon.gov/Pages/re/covid-19.aspx (English and Spanish links)


- COVID-19 insurance and financial services information: https://dfr.oregon.gov/insure/health/understand/Pages/coronavirus.aspx

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Appendix B: State Sector-Specific Guidance

- Guidance for Retail Stores
- Guidance for Restaurants, Bars, Breweries, Brewpubs, Wineries, Tasting Rooms and Distilleries
- Guidance for Outdoor Recreation
- Guidance for Personal Services Providers
- Child Care
Phase One Reopening Guidance

Sector: Retail

Specific Guidance for Retail Stores:

**Retail stores are required to:**

- Limit the number of customers in the retail store and focus on maintaining at least six (6) feet of distance between people and employees in the store. Store management should determine maximum occupancy to maintain at least six (6) feet of physical distancing, considering areas of the store prone to crowding (like aisles) and limit admittance accordingly.

- Post clear signs (available at healthoregon.org/coronavirus) listing COVID-19 symptoms, asking employees and customers with symptoms to stay home, and listing who to contact if they need assistance.

- Use signs to encourage physical distancing.

- Frequently clean and disinfect work areas, high-traffic areas, and commonly touched surfaces in both customer/public and employee areas of store. Wipe down changing room doorknobs, walls and seating between each customer use.

- Require all employees to wear cloth or disposable face coverings. Businesses must provide cloth or disposable face coverings for employees.

**To the extent possible, retail stores should, but are not required to:**

- Strongly encourage all customers to wear cloth or disposable face coverings. If a store sets a policy that all customers are required to wear cloth or disposable face coverings, store management should consult with their legal counsel to determine whether such a requirement can be enforced.

- Consider placing clear plastic or glass barriers in front of cashiers or customer service counters, or in other places where maintaining six (6) feet of physical distance between employees and customers is more difficult.

- Encourage one-way flow with marked entrances and exits, but do not block egress for fire exits. Use signs to direct one-way flow of traffic.

- Use signs and tape on the floor to maintain physical distancing while waiting for cashiers.

- Prohibit customers from trying on items that are worn on the face (cloth masks, scarves, headbands, eyewear).

- Decide whether to re-open fitting rooms. If fitting rooms are re-opened, customers should wash hands or use hand sanitizer before and after trying on clothes. Retailers...
should provide hand sanitizer or hand washing stations near fitting rooms. Note: There are no scientific data to indicate that clothing items are a major means of spread of the coronavirus. Any risk from this exposure is likely to be very low. Items that have been in a fitting room can be set aside for a day or longer if the retailer is concerned about perceived risks from clothing that has been tried on by customers.

- When processing returns, employees should wash hands or use hand sanitizer before and after handling items. Retailer may set items aside for a day or longer if concerned about perceived risks of exposure.
- Consider offering alternative order ahead and pick up options, such as curbside pickup as appropriate and applicable.
- Review and implement General Guidance for Employers, as applicable.

Specific Guidance for Shopping Centers and Malls:

Shopping center and malls must:

- Keep any common area settings such as food courts and seating areas configured to support at least six (6) feet physical distance between parties (chairs, benches, tables).
- Determine maximum occupancy within the shopping center or mall to maintain at least six (6) feet physical distancing and limit admittance accordingly.
- Post signs at entrances, exits and common areas (seating areas, food courts, etc.) to discourage groups from congregating, and remind customers and employees to keep six (6) feet of physical distance between individuals or parties while waiting.

To the extent possible, shopping centers and malls should:

- Designate specific entrances and exits to the shopping center or mall to constrain traffic flow and encourage physical distancing between customers. For entrances with a single door or single pair of doors, consider designating it entrance only or exit only if another entrance/exit exists and one-way flow through the area is feasible. Do not block egress for fire exits.

Additional Resources:

- OHA Guidance for the General Public
- OHA General Guidance for Employers

Additional State Resources Needed:

- Reopening checklist
- Symptoms and resource signs
- Signs to discourage gathering

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Phase One Reopening Guidance

Sector: Restaurants/Bars/Breweries/Tasting Rooms/Distilleries

Specific Guidance for Restaurants, Bars, Breweries, Brewpubs, Wineries, Tasting Rooms and Distilleries

Distancing and Occupancy:

Businesses must:

- Determine maximum occupancy to maintain physical distancing requirements and limit number of customers on premises accordingly.
- Ensure tables are spaced at least six (6) feet apart so that at least six (6) feet between parties is maintained, including when customers approach or leave tables.
  - Businesses will need to determine seating configuration to comply with these physical distancing requirements.
  - Remove or restrict seating to facilitate the requirement of at least six (6) feet of physical distance between people not in the same party.
  - If booth seating is back-to-back, only use every other booth.
- Limit parties to 10 people or fewer. Do not combine parties/guests at shared seating situations who have not chosen to congregate together. People in the same party seated at the same table do not have to be six (6) feet apart.
- If a business is unable to maintain at least six (6) feet of distance, except for brief interactions (for example, to deliver food to a table), it may operate only as pick up/to go service. This applies to both indoor and outdoor seating.

Employees:

Businesses must:

- Minimize employee bare-hand contact with food through use of utensils.
- Reinforce that meticulous hand hygiene (frequent and proper handwashing) is of utmost importance for all employees, including chefs, line cooks and waitstaff.
- Have employees wear gloves when performing cleaning, sanitizing, or disinfecting activities. Please note that for non-cleaning activities, non-Oregon Department of Agriculture (ODA) licensed facility employees are not required to wear gloves. Wearing gloves for activities that might overlap with food handling can foster cross-contamination. If businesses choose to have employees use gloves, they must provide non-latex gloves and employees must prevent cross-contamination by replacing gloves.
after touching faces or changing tasks (e.g., food preparation versus taking out garbage). See attached OHA guidance regarding glove use.

- Require all employees to wear cloth, paper or disposable face coverings. Businesses must provide cloth, paper or disposable face covering for employees.

**Additional requirements for facilities licensed by the ODA:**

- No bare-hand contact with food is permitted per their licensing requirements.

**Operations:**

**Businesses must:**

- Adhere to guidance outlined in this document, as well as all applicable statutes and administrative rules to which the business is normally subject.
- End all on-site consumption of food and drinks, including alcoholic beverages by 10 p.m.
- Prohibit customer self-service operations, including buffets, salad bars, soda machines and growler refilling stations.
- Disinfect customer-contact surfaces at tables between each customer/dining party including seats, tables, menus, condiment containers and all other touch points.
- Provide condiments, such as salt and pepper, ketchup, hot sauce and sugar, in single-service packets or from a single-service container. If that is not possible, condiment containers should not be pre-set on the table and must be disinfected between each customer or dining party. Disinfection must be done in a way that does not contaminate the food product. For example, do not use a spray device on a saltshaker.
- Not pre-set tables with tableware (napkins, utensils, glassware).
- Prohibit counter and bar seating unless the counter faces a window or wall and at least six (6) feet of distance is maintained between parties. This applies to all facilities including bars, breweries and tasting rooms. Counter and bar ordering are acceptable if the operation finds that this decreases worker exposure. The counter ordering approach requires that food and alcohol are taken to a table that meets distancing requirements for consumption and at least six (6) feet of physical distance is maintained among customers and employees during the ordering process.
- Ensure customers/parties remain at least six (6) feet apart when ordering.
  - Signs should be posted as necessary to ensure that customers meet the requirements of this guidance.
  - Mark designated spots on the floors must have designated spots where customers will wait in line.
- Frequently disinfect all common areas and touch points, including payment devices.
- Use menus that are single-use, cleanable between customers (laminated), online, or posted on a whiteboard or something similar in order to avoid multiple contact points.
- Prohibit use of karaoke machines, pool tables, and bowling.
- For use of juke box and coin-operated arcade machines, the same protocols should be followed as outlined for Video Lottery Terminals below.
To the extent possible, businesses should, but are not required to:

- Assign a designated greeter or host to manage customer flow and monitor distancing while waiting in line, ordering, and during the entering and exiting process. Do not block egress for fire exits.

- Limit the number of staff who serve individual parties. Consider assigning the same employee to each party for entire experience (service, busing of tables, payment). An employee may be assigned to multiple parties but must wash hands thoroughly or use hand sanitizer (60-95% alcohol content) when moving between parties.

- Assign employee(s) to monitor customer access to common areas such as restrooms to ensure that customers do not congregate.

- Strongly encourage all customers to wear cloth, paper or disposable face coverings. Customers do not need to wear face coverings while seated at the table. If a business sets a policy that all customers are required to wear cloth, paper or disposable face coverings, business management should consult with their legal counsel to determine whether such a requirement can be enforced.

- Encourage reservations or advise people to call in advance to confirm seating/serving capacity. Consider a phone reservation system that allows people to queue or wait in cars and enter only when a phone call, text, or restaurant-provided “buzzer” device, indicates that a table is ready.

- Consider providing hand-washing facilities for customer use in and around the business. Hand sanitizer is effective on clean hands; businesses may make hand sanitizer (at least 60-95% alcohol content) available to customers. Hand sanitizer must not replace hand washing by employees.

- Post clear signs (available at healthoregon.org/coronavirus) listing COVID-19 symptoms, asking employees and customers with symptoms to stay home, and listing who to contact if they need assistance.

**Video Lottery Terminal (VLT) Operations:**

**Businesses must:**

- Place VLTs at least six (6) feet apart, if there is space to do so. If VLTs cannot be spaced at least six (6) feet apart, the Oregon Lottery may turn off VLTs in order to maintain required physical distance between operating machines and players.

- Require individuals to request VLT access from an employee before playing; an employee must then clean and disinfect the machine to allow play. A business must not allow access to VLTs or change VLTs without requesting access from an employee.

- Consider a player at a VLT machine the same as a customer seated for table service.

- Limit one player at or around a VLT.

- Note: Oregon Lottery will not turn on VLTs until the agency is satisfied that all conditions have been met.

- Review and implement [General Guidance for Employers](#), as applicable.
Additional Resources:

- OHA Guidance for the General Public
- OHA General Guidance for Employers

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Phase One Reopening Guidance

Sector: Outdoor Recreation

Specific Guidance for Outdoor Recreation Organizations:

**Outdoor recreation organizations are required to:**

- Prior to reopening after extended closure, ensure all parks and facilities are ready to operate and that all equipment is in good condition, according to any applicable maintenance and operations manuals and standard operating procedures.
- Prohibit parties (a group of 10 or fewer people that arrived at the site together) from congregating in parking lots for periods longer than reasonable to retrieve/return gear and enter/exit vehicles.
- Reinforce the importance of maintaining at least six (6) feet of physical distance between parties (a group of 10 or fewer people that arrived at the site together) on hiking trails, beaches, and boat ramps through signs and education.
- Keep day-use areas that are prone to attracting crowds (including but not limited to playgrounds, picnic shelters/structures, water parks and pools, sports courts for contact sports like basketball) and overnight use areas closed.
- Prohibit contact sports.
- Thoroughly clean restroom facilities at least twice daily and, to the extent possible, ensure adequate sanitary supplies (soap, toilet paper, hand sanitizer) throughout the day. Restroom facilities that cannot be cleaned twice daily should be kept closed or a sign should be posted stating that the restroom is unable to be cleaned twice daily.
- Frequently clean and disinfect work areas, high-traffic areas, and commonly touched surfaces in both public and non-public areas of parks and facilities.
- Post clear signs (available at healthoregon.org/coronavirus) listing COVID-19 symptoms, asking employees, volunteers, and visitors with symptoms to stay home and who to contact if they need assistance.
- Keep any common areas such as picnic tables not in shelters/structures, day-use shelters, and buildings open to the public arranged so there is at least six (6) feet of physical distance between parties (chairs, benches, tables). Post clear signs to reinforce physical distancing requirements between visitors of different parties.

**To the extent possible, outdoor recreation agencies should, but are not required to:**

- Consider closing alternating parking spots to facilitate at least six (6) feet of physical distance between parties.
Consider opening loop trails in a one-way direction to minimize close contact between hikers. Designate one-way walking routes to attractions if feasible.

Encourage all employees, volunteers and visitors to wear cloth, paper or disposable face coverings when around others.

Encourage the public to visit parks and recreation areas during off-peak use times as defined and publicized by park or recreation area management.

Encourage the public to visit parks and recreation areas close to home, avoid overnight trips and minimize travel outside their immediate area for recreation. Especially caution the public to not travel outside of their home area if they live in an area with a high number of reported COVID-19 cases to prevent asymptomatic COVID-19 positive individuals from inadvertently bringing the virus into an area with many fewer cases.

Consider opening private, municipal, county and federal campgrounds as long as physical distancing requirements can be maintained. Oregon State Parks may make a separate determination on opening state campgrounds depending on readiness, ability to maintain physical distancing requirements and consultation with the Governor.

Consider opening skate parks as long as physical distancing requirements can be maintained.

Encourage visitors to bring their own food, water bottles and hygiene supplies (including hand sanitizer), as well as to take their trash with them when they leave.

Encourage the public to recreate with their own household members rather than with those in their extended social circles.

Encourage the public to recreate safely and avoid traveling to or recreating in areas where it is difficult to maintain at least six (6) feet from others not in their party.

Position staff to monitor physical distancing requirements, ensure groups are no larger than 10 people, and provide education and encouragement to visitors to support adherence.

Provide handwashing stations or hand sanitizer in common areas such as picnic areas, day-use shelters, and buildings open to the public.

Consider placing clear plastic or glass barriers in front of cashiers or visitor center counters, or in other places where maintaining six (6) feet of physical distance between employees, volunteers and visitors is more difficult.

Review and implement General Guidance for Employers, as applicable.

**Additional Resources:**

- OHA Guidance for the General Public
- OHA General Guidance for Employers
- CDC’s Guidance for Administrators in Parks and Recreational Facilities

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Phase One Reopening Guidance

Sector: Personal Services

Specific Guidance for Personal Services Providers:

**Client Screening:**

Providers are required to:

- Contact client prior to appointment and ask:
  - Have you had a cough?
  - Have you had a fever?
  - Have you had shortness of breath?
  - Have you been in close contact with anyone with these symptoms or anyone who has been diagnosed with COVID-19 in the past 14 days?

- Reschedule an appointment if client answers “yes” to any of the questions above until client’s symptoms (cough, fever and shortness of breath) have been resolved, and fever has been resolved without medication for at least 72 hours, or at least 14 days after contact with a person sick with cough, fever, or diagnosed COVID-19.

- Review information about how COVID-19 is spread from one person to another: namely, through coughing, sneezing, touching, or via objects touched by someone with the virus.

- Record client contact information, date and time of appointment and provider for each client. If there is a positive COVID-19 case associated with the business, public health may need the business to provide this information for a contact tracing investigation. Unless otherwise required, this information may be destroyed after 60 days from the appointment.

To the extent possible, providers should, but are not required to:

- Consider using touchless infrared thermometers to check temperature of each client who enters the business.

- Explain to any client who has a temperature above 100.3 degrees Fahrenheit that services cannot be provided, and the appointment will be rescheduled until at least 72 hours after fever and other symptoms have resolved without medication. If the client must wait for a ride home, provide a space where the client may self-isolate away from employees and other clients.
Operations:

Providers are **required** to:

- Immediately send home any employee with COVID-19 like symptoms (cough, fever, shortness of breath, etc.) and not allow the employee to return to work until at least 72 hours after fever and other symptoms have resolved without medication.

- Adhere to the requirements outlined in this guidance, as well as all applicable statutes and administrative rules to which the provider is normally subject.

- Determine, in cooperation with business management as necessary, the maximum occupancy of the business to maintain at least six (6) feet of physical distancing between clients and limit admittance accordingly.

- Limit the overall number of providers and clients in the business (including waiting areas) at any one time and focus on maintaining at least six (6) feet of physical distance between people in the facility except when required to provide services such as massage, haircuts, etc.

- Have clients wait in their car or outside to be contacted when the provider is ready for the appointment.

- Limit visits to scheduled appointments. Provide curbside pick-up arranged ahead of time for product purchases outside of scheduled service appointments.

- Assign one provider per client throughout the encounter.

- Ensure at least six (6) feet of physical distance between pairs of provider/clients. If necessary, use limited number of stations and stagger shifts to adhere to physical distance requirements. Maintain at least six (6) feet of distance between provider and client unless providing service that requires provider to be within six (6) feet of client.

- Post clear signs listing COVID-19 symptoms, asking employees and clients with symptoms to stay home, and who to contact if they need assistance.

- Remove all unnecessary items such as magazines, newspapers, service menus, and any other unnecessary items such as paper products, snacks, and beverages.

- Provide training, educational materials (available at [healthoregon.org/coronavirus](http://healthoregon.org/coronavirus)), and reinforcement on proper sanitation, handwashing, cough and sneeze etiquette, and using other protective equipment and measures to all employees.

- Ensure breakrooms are thoroughly cleaned and disinfected and that employees do not congregate in them.

- Thoroughly clean restroom facilities at least once daily and ensure adequate sanitary supplies (soap, toilet paper, hand sanitizer) throughout the day.

- Review and implement [General Guidance for Employers](http://healthoregon.org/coronavirus), as applicable.

To the extent possible, providers should, but are not required to:

- Consider using plastic covers for cloth-covered seating because they cannot be properly cleaned and disinfected.

- Consider discontinuing use of paper appointment books or cards and replace with electronic options.
• Limit the exchange of cash, and wash hands thoroughly after each transaction. Credit/debit it/debit transactions or other electronic means of payment are preferred, using touch/swipe/no signature technology.

**Personal protective measures:**

Providers are **required** to:

• Provide and wear cloth, paper or disposable face coverings when providing direct client services.

• Drape each client in a clean cape, if applicable, for the service. Businesses may consider using disposable capes for one-time use.

• Wear a clean smock with each client. Businesses may consider using disposable smocks/gowns for one-time use.

• Wash hands with soapy, warm water, for a minimum of 20 seconds between each client service.

• Request that clients wash hands with soapy, warm water, for a minimum of 20 seconds prior to receiving service.

• Wash hands after using the telephone, computer, cash register and/or credit card machine, and wipe these surfaces between each use.

• Ensure all sinks in the workplace have soap and paper towels available.

• Post handwashing signs in restrooms.

To the extent possible, providers should, but are not required to:

• Consider using touchless infrared thermometers to check temperature of each employee before their shift begins. Immediately send home any employee who has a temperature above 100.3 degrees Fahrenheit and do not allow the employee to return to work until at least 72 hours after fever and other symptoms have resolved without medication.

• Wear medical grade masks when providing services that require close contact (within 6 feet), such as in the case of a haircut, massage or pedicure.

• Wear face shields in addition to a face covering for face-to-face services, such as mustache trims and brow waxing.

• Provide employees medical grade masks and face shields if provider is requiring their use for certain services.

• Have clients wear cloth, paper or disposable face coverings, as appropriate for the service. Some services may not require the client to wear face covering; for example, a client does not need to wear a face covering when face-down on a massage table. Some services, such as mustache or beard trims, may require the cloth, paper or disposable face covering to be temporarily removed.

• Wear disposable gloves when providing client services and change gloves between each client.

• Ask clients to wash their own hair prior to arriving for their appointment.
• Avoid face-to-face contact within six (6) feet of clients.
• Change into clean clothes between clients if providing services that require extended close client contact such as massage therapy and tattoo artistry.
• Change into clean clothes before leaving the business each day.

Cleaning and Disinfection:

Providers are **required** to:

• Thoroughly clean and disinfect all areas of business prior to reopening after extended closure. Disinfect all surfaces, tools, and linens, even if they were cleaned before the business was closed.

• Use disinfectants that are Environmental Protection Agency (EPA)-registered and labeled as bactericidal, viricidal and fungicidal. No product will be labeled for COVID-19 yet, but many will have human coronavirus efficacy either on the label or available on their website. The EPA has a list of disinfectant products that meet EPA criteria for use against the virus that causes COVID-19. If in doubt of the product’s effectiveness, check the EPA website.

• Mix and change disinfectant for immersion of tools daily and replace sooner if it becomes contaminated throughout the workday. Disinfectant only works on a clean surface, so clean all surfaces and tools with hot soapy water, other appropriate cleaner or cleaning wipes (if using wipes, be sure to cover surface thoroughly) before disinfecting.

• Observe contact time on the label so disinfectant will work. Contact time refers to how long the disinfectant is visibly wet on the surface, allowing it to thoroughly destroy pathogens. Typical contact time for immersion/sprays is ten (10) minutes, for disinfectant wipes, time is two (2) to four (4) minutes.

• Clean and disinfect all workstation and treatment room surfaces, including countertops, cabinets and doorknobs, chairs, head rests and arm rests. Clean and disinfect all reusable tools and store in airtight container. Clean and disinfect all appliances (including cords), shears, clippers, clipper guards, clippies, rollers, combs, brushes, rolling carts and any other items used to provide client services.

• Check to make sure all products at workstations, such as lotions, creams, waxes, scrubs, and any other similar supplies have always been in a closed container. If not, discard and replace. Remove and discard any products that could have been contaminated by unsanitary use and replace with new product.

• Clean and disinfect hard non-porous surfaces, glass, metal and plastic, including work areas, high-traffic areas, and commonly touched surfaces in both public and employee-only areas of the business.

• Only use porous/soft surfaces (such as cardboard files, buffers, drill bits, etc.) once and then discard because they cannot be disinfected.

• Launder all linens, blankets, towels, drapes, and smocks in hot soapy water and dry completely at the warmest temperature allowed. Store in an airtight cabinet after each client use. Store all used/dirty linens in an airtight container.
• Clean and disinfect all linen hampers and trash containers and only use a container that can be closed and use with liners that can be removed and discarded.

• Clean and disinfect all retail areas at least daily, including products. Try to keep clients from touching products that they do not plan to purchase.

• Provide hand sanitizer and tissues for employees and clients, if available.

• Clean and disinfect ALL restroom surfaces including floors, sinks, and toilet bowls. Store paper products in a closed cabinet and provide hand soap. Place trashcan by the door. Remove anything that does not have to be in the restrooms.

• Clean and disinfect all bowls, hoses, spray nozzles, foist handles, shampoo chairs and arm rests between each use. Wipe down all back-bar products and shelves. Discard and replace any products that have not been stored in a closed container prior to reopening after extended closure.

• Empty all wax pots and disinfect before refilling them with new wax prior to reopening after extended closure. Purchase new single-use applicators that can be disposed of in an airtight trash can. The airtight trash can must have a lid and be lined with a disposable plastic bag.

To the extent possible, providers should, but are not required to:

• Provide hand sanitizer at all work locations for employees and clients.

Additional Resources:

• OHA Guidance for the General Public
• OHA General Guidance for Employers

You can get this document free of charge in other languages, large print, braille or a format you prefer. Contact Mavel Morales at 1-844-882-7889, 711 TTY or OHA.ADAModifications@dhsoha.state.or.us.