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OFFICE OF The Director

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ORDER OF THE HEALTH OFFICER OF THE COUNTY OF CONTRA COSTA

MANDATING EMPLOYERS OF SPECIFIED EMERGENCY FIRST RESPONDERS AND NON-EMERGENCY MEDICAL TRANSPORT WORKERS TO OBTAIN WEEKLY TESTING FOR SARS-COV-2 OR DOCUMENT THEIR FULLY VACCINATED STATUS, WITH SPECIFIED EXEMPTIONS

ORDER NO. HO-COVID19-53

DATE OF ORDER: AUGUST 13, 2021

Summary of the Order

This Order of the Health Officer requires law enforcement agencies, fire protection agencies, emergency medical response entities, and non-emergency medical transport entities to require certain workers who respond to emergency calls for assistance at specified health care and other high risk facilities in Contra Costa County ("County"), or provide non-emergency medical transport services involving patients at these facilities, as part of their usual duties, to either undergo routine testing for the virus that causes Coronavirus Disease 2019 ("COVID-19") or prove they are fully vaccinated with a COVID-19 vaccine, effective as of September 17, 2021.

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

1. <u>Basis for Order</u>. On July 26, 2021, the State Public Health Officer issued an order ("State Order") that requires workers in specified health care or congregate settings who "have the potential for direct or indirect exposure to patients/clients/residents or SARS-CoV-2 airborne aerosols" to undergo routine diagnostic screening testing weekly testing for SARS-CoV-2 (the virus that causes COVID-19) or document their Fully Vaccinated status. Workers to whom the State Order applies include nurses, nursing assistants, physicians, technicians, therapists, phlebotomists, pharmacists, students and trainees, contractual staff not employed by the health care facility, and persons not directly involved in patient care but who could be exposed to infectious agents that can be transmitted in the health care settings (e.g., clerical, dietary, environmental services, laundry, security, engineering and facilities management, administrative, billing, and volunteer personnel). The settings described in the State Order



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include hospitals, skilled nursing facilities, detention centers, homeless shelters and other health care facilities.

I have reviewed the State Order and have determined that it does not reach all of the individuals who work in the types of health care and residential facilities described in the State Order and who potentially could expose patients, clients, or residents of those facilities to SARS-CoV-2. Specifically, the State Order does not apply to emergency first responders or non-emergency medical transport personnel who regularly enter these types of facilities in the course of their duties. Of the top 15 locations in the County where emergency first responders were dispatched in 2020, 13 were facilities described in the State Order. The number one location for emergency responses was the Veterans Administration Hospital in Martinez, with 378 calls in that year. In total, there were 2,499 emergency dispatches to these 13 facilities in 2020. Non-emergency ambulance workers, who routinely transport patients to and from these types of facilities, are also not covered by the State Order. Over the course of pandemic, there have been COVID-19 outbreaks involving law enforcement, fire and ambulance personnel, and there is a current outbreak at one fire station in the County. If infected, when these workers enter high-risk facilities, they too could pose an exposure risk to the vulnerable patients and residents inside.

There is a high risk of transmission of SARS-CoV-2 in health care and congregate settings located in the County, and the risk of outbreaks in high-risk settings that begin with workers and spread to patients or residents is increasing, due to increasing rates of community spread of COVID-19. Many of the patients and residents at these facilities are at high risk of severe illness and death from COVID-19 due to age, medical conditions or weakened immune systems, as evidenced by the number of cases at high-risk facilities during the course of the COVID-19 pandemic. For example, as of August 10, 2021, there have been 224 COVID-19 outbreaks. 3.498 outbreak-related COVID-19 cases, 769 COVID-19-related hospitalizations and 330 COVID-19-related deaths in County long term care facilities - primarily skilled nursing facilities and assisted living facilities for the elderly. At the time of issuance of this Order, there are two outbreaks in skilled nursing facilities, one in a substance abuse treatment facility and a fourth in a residential care facility for the elderly. There are also 18 probable outbreaks. 11 in residential care facilities and seven in skilled nursing facilities. There have also been 439 COVID-19 cases in adult detention facilities and seven COVID-19 cases in vouth detention facilities in the County as of August 10, 2021. Recently, there have been outbreaks at the County detention facilities in Martinez, Richmond, and Clayton. As of August 11, 2021, since the first of the outbreaks began on July 24, 2021, at least 115 inmates and 69 staff have tested positive for SARS-CoV-2, including at least 60 custody staff (22 of whom were fully vaccinated) and six health workers (five of whom were fully vaccinated). Although no COVID-19 deaths were reported in County detention facilities, 235 inmates in California prisons have died with COVID-19 as of August 10, 2021. There have been 519 COVID-19 cases in acute care hospital staff in the County as of August 10, 2021. Outside the County, including in other Bay Area counties, COVID-19 outbreaks that led to multiple staff and patient deaths in hospitals were traced to staff. There were 92 COVID-19 cases in homeless individuals residing in a homeless shelter as of August 10, 2021. Due to the rapid depopulation of congregate homeless shelters in the County and moving residents into hotel



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rooms, the County avoided large outbreaks in these settings that occurred in other counties in the Bay Area as well as nationwide. Congregate shelters have recently reopened, however, exposing residents to the risk of outbreaks.

The SARS-CoV-2 Delta variant has become the dominant strain of the SARS-CoV-2 virus in the United States, including the County. This variant is more contagious and may cause illness that is as or more severe than previous strains of SARS-CoV-2. The amount of Delta variant virus in the nasal passages of infected unvaccinated persons was reported to be about 1,000 times higher than was seen in unvaccinated persons infected with strains of the virus prevalent in 2020. Additionally, with the easing of COVID-19 prevention restrictions since June 15, workers in high-risk settings now have potentially more exposure risk outside the workplace while shopping, going to restaurants or socializing in crowded settings where many individuals may not be wearing face coverings when eating or drinking. The presence of this more contagious variant, coupled with increased opportunities for transmission in the community, compels the need for heightened measures to protect patients and residents at high-risk facilities from exposure to workers who may be infected with SARS-CoV-2.

Vaccination against COVID-19 remains the most effective means of preventing infection with the COVID-19 virus, with vaccination reducing the risk of infection with the Delta variant by 70 percent to 90 percent.

Vaccination also appears to reduce the risk of transmission by an infected person. Although the risk of transmission of the Delta variant by a vaccinated person appears to be higher than the transmission risk associated with virus strains prevalent in 2020, recent studies show that a vaccinated person is less likely than an unvaccinated person to transmit the Delta variant. The combination of reduced infection risk and reduced transmission risk provides a very high level of protection for patients and residents who are in close proximity to a worker who is vaccinated. When persons are unvaccinated, other measures, including the wearing of face coverings, social distancing, testing, quarantining and isolation of persons who become infected, can reduce the risk of infection and the risk of transmission. The wearing of face coverings, for example, can reduce the risk of transmission by an infected person by up to 70 percent. The combination of face coverings and regular testing, along with the isolation of individuals who test positive, may approach the level of efficacy that vaccination provides in terms of reduction of transmission risk.

Data from routine testing of both residents and staff at long-term care facilities suggests that testing as a mitigation measure is effective. Routine testing of residents and staff at these facilities was mandated under Health Officer Order No. HO-COVID19-15, issued on May 29, 2020, and effective July 31, 2020. The number of active and monitored outbreaks in these facilities dropped more than 50 percent, from 25 just before the order took effect to 12 on September 25, 2020. Additionally, the percentage of COVID-19 deaths in the County that was associated with residents of long-term care facilities declined from 56 percent in July 2020 to 28 percent in September 2020.



Based on the above, I have determined that emergency first responders and non-emergency medical transport worker should be required to undergo weekly testing for SARS-CoV-2, with exceptions for fully vaccinated workers and other workers who should not be tested under current guidance by the U.S. Centers for Disease Control and Prevention.

- 2. <u>Definitions</u>. For purposes of this Order, the following terms have the meanings given below.
 - a. CDC. "CDC" means the U.S. Centers for Disease Control and Prevention.
 - b. <u>COVID-19 Test</u>. "COVID-19 Test" means a nucleic acid or antigen test to detect infection of a person with SARS-CoV-2, the virus that causes COVID-19.
 - c. <u>COVID-19 Vaccine</u>. "COVID-19 Vaccine" means a vaccine to prevent COVID-19 that is (1) administered under an emergency use authorization from the FDA; (2) approved by the FDA; or (3) listed for emergency use by the World Health Organization.
 - d. <u>DHHS</u>. "DHHS" means the U.S. Department of Health and Human Services.
 - e. Employer. "Employer" means any of the following:
 - The Contra Costa County Sheriff's Office, a police department of a city or town in the County, or other local law enforcement or police protection agency with jurisdiction in the County.
 - (2) A fire protection district or municipal fire department with jurisdiction in the County.
 - (3) A business entity that provides emergency medical response services in the County.
 - (4) A business entity that provides non-emergency medical transport services in the County.
 - f. <u>Facility</u>. "Facility" means a health care or congregate facility in Contra Costa County that is described in Exhibit A attached hereto.
 - g. FDA. "FDA" means the U.S. Food and Drug Administration.
 - h. <u>Fully Vaccinated</u>. "Fully Vaccinated" means a person's status two weeks following the person's receipt of a single-dose COVID-19 Vaccine or the second dose of a two-dose COVID-19 Vaccine.
 - i. <u>High-Risk Setting</u>. "High-Risk Setting" means an area inside a Facility (1) where care is provided to patients, or (2) to which patients or residents have access for any purpose.



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- j. <u>Worker</u>. "Worker" means an individual who is an employee, contractor or volunteer of an Employer, and meets both of the following criteria:
 - (1) The individual is assigned by the Employer to perform public-facing field duties. Such individuals may include, but are not necessarily limited to, sheriff's deputies and police officers assigned to patrol duties, firefighters, paramedics and emergency medical technicians.
 - (2) The person's usual duties include one of the following:
 - (a) Entering High-Risk Settings at Facilities in response to 911 system dispatches to provide emergency services at Facilities; or
 - (b) Entering High-Risk Settings at Facilities in response to requests for nonemergency medical transport of patients to or from these Facilities.
- k. <u>WHO</u>. "WHO" means the World Health Organization.

3. Testing Requirements.

- a. Except as set forth in Section 3.b. or Section 4 of this Order, an Employer shall require its Workers to do the following:
 - (1) Receive a COVID-19 Test at least once a week; and
 - (2) Promptly provide the results of each COVID-19 Test to the Employer unless test results are sent directly to the Employer.
- b. Exception. If a Worker tests or has tested positive for SARS-CoV-2, the Worker should not undergo another COVID-19 Test until 90 days have passed since the date of the positive test. An Employer shall communicate this exception to its Workers, and shall exempt a Worker from the testing requirement for the applicable period of time upon request of the Worker if the Worker proves that he or she is qualified for the exception. A Worker may prove that he or she is qualified for the exception if:
 - (1) The Worker attests in writing that he or she has no symptoms of COVID-19, and provides the written attestation to the Employer; and
 - (2) The Worker shows the Employer a copy of the report of the positive COVID-19 Test that shows the date of the test, and the date falls within the 90-day timeframe describe above.
- 4. <u>Fully Vaccinated Workers</u>. An Employer may exempt a Worker from the COVID-19 testing requirements set forth in Section 3 of this Order if the individual first presents to the Employer one of the following:



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- a. The original DHSS CDC vaccination card issued to the individual following administration of the COVID-19 Vaccine ("CDC Card").
- b. The original WHO International Certificate of Vaccination or Prophylaxis issued to the individual following administration of the COVID-19 in a foreign country "WHO Yellow Card");
- c. A paper photograph or photocopy of the CDC Card or WHO Yellow Card;
- d. An electronic image of the CDC Card or WHO Yellow Card;
- e. A digital copy of the individual's COVID-19 Vaccine record, obtained through the following portal: <u>https://myvaccinerecord.cdph.ca.gov/;</u> or
- f. Documentation from a healthcare provider that the individual is Fully Vaccinated.
- 5. <u>Record-Keeping Requirements</u>. An Employer must keep and maintain a record of the following information for the purpose of inspection by an authorized representative of the Health Officer:
 - a. For Workers who provide the Employer with documentation of Fully Vaccinated status in accordance with Section 4 of this Order: (1) Full name and date of birth; (2) COVID-19 Vaccine manufacturer; and (3) date of COVID-2 Vaccine administration (first dose, and if applicable, second dose).
 - b. For other Workers: (1) COVID-19 Test results.
- 6. Effective Date and Time. This Order takes effect at 8:00 a.m. on September 17, 2021.
- 7. <u>Copies; Contact Information</u>. Copies of this Order shall promptly be: (1) made available at the Office of the Director of Contra Costa Health Services, 1220 Morello Avenue, Suite 200, Martinez, CA 94553; (2) posted on the Contra Costa Health Services website (<u>https://www.cchealth.org</u>); and (3) provided to any member of the public requesting a copy of this Order. Questions or comments regarding this Order may be directed to Contra Costa Health Services at (844) 729-8410.

IT IS SO ORDERED:

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

Attachment: Exhibit A

Dated: August 13, 2021



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EXHIBIT A To Health Officer Order No. HO-COVID19-53

FACILITIES

Acute Health Care and Long-Term Care Settings:

General Acute Care Hospitals Skilled Nursing Facilities (including Subacute Facilities) Intermediate Care Facilities

High-Risk Congregate Settings:

Adult and Senior Care Facilities Homeless Shelters Local Detention Centers

Other Health Care Settings:

Acute Psychiatric Hospitals Adult Day Health Care Centers Adult Day Programs Licensed by the California Department of Social Services PACE (Program of All-Inclusive Care for the Elderly) Centers Ambulatory Surgery Center Chemical Dependency Recovery Hospitals Clinics & Doctor Offices (including behavioral health, surgical) Congregate Living Health Facilities Dental Offices Dialysis Centers Hospice Facilities Pediatric Day Health and Respite Care Facilities Residential Substance Use Treatment and Mental Health Treatment Facilities