Clatsop County, Oregon

Assessment and Plan to Implement Governor's Reopening Oregon Framework



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Section 1: Purpose

Introduction

The COVID-19 pandemic has impacted every resident of Clatsop County. The historical dimensions of this crisis continue to manifest in terms of economic, social, education, health care and other broad public policy considerations.

The Governor recently introduced a framework for Reopening the Oregon Economy. The framework provides a measured and phased approach to allow expansion and contraction of reopening measures based on the conditions on the ground. As the Public Health Authority, Clatsop County is tasked with confirming preparedness in supporting the Governor's Prerequisites Checklist (Appendix A). Each of the prerequisites must be met before a county or region can enter phase one of reopening. The decision of when a county or region enters phase one rests exclusively with the Governor.

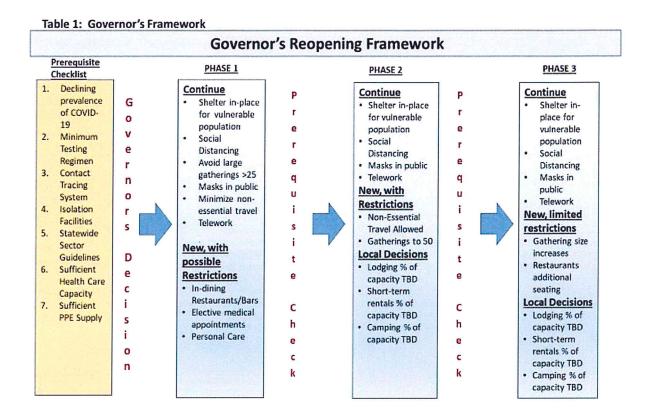
The north coast, including Clatsop County, has a number of unique conditions that place an emphasis on cross jurisdiction and sector coordination and collaboration:

- Tourist economy
 - o More than 2 million potential visitors within 100 miles.
 - o State and federal parks, beaches, and amenities that attract visitors.
 - o Significant reliance on employment related to the hospitality sector with an attendant high rate of unemployment claims due to COVID-19.
- Surging summer population associated with day trippers, second homeowners, short-term rentals, hotels/motels and camping.
- Limited government and first responder response capacity.
- Limited supply chain and medical infrastructure.

Clatsop County is committed to working with partners/stakeholders to implement the Governor's Framework and to serve the statutory role of Local Public Health Authority (LPHA).

Governor's Reopening Strategy

The Governor's Framework includes 1) a prerequisite checklist of criteria that must be met before reopening and transitioning from one phase to another; and 2) a preliminary list of sectors to be included for reopening by phase. Non-essential travel is restricted until Phase 2; which allows Phase 1 to focus on businesses and services that predominately serve local residents. Phase 2 and subsequent phases, will include the gradual reopening of lodging and short-term rentals (restricted by local Emergency Orders) and other types of businesses more difficult to ensure social distancing (i.e. theaters).



Section 2. Scope and Concept

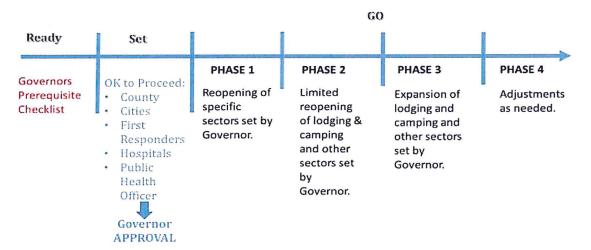
A Whole County Framework

Clatsop County's implementation of the Governor's Reopening Framework is designed to identify the roles, responsibilities and strategies of Clatsop County, Cities, and other local cooperating organizations as they undertake the process of relaxing restrictions on economic activity that have been established to manage the impacts of the COVID-19 illness. The guiding principle of this framework is that Clatsop County is stronger and more effective when we collaborate. It emphasizes partnership with individual residents, organizations, and the many sectors of our community.

The Clatsop County Reopening Assessment and Plan is nested within the guidance of federal and state plans. As additional federal and state guidance are released, amendments to this plan will be issued to maintain the necessary alignment.

Table 2 illustrates a phased approach to reopening Clatsop County.

Table 2: Example of County Reopening Process



Phased Approach

This plan presents a three-stage process of reopening economic activity:

<u>Stage 1: Ready</u> – In this stage the County assesses readiness to fully implement the Governor's Prerequisite Checklist. At the conclusion of this phase County government will be prepared to seek input and support for its guidelines to a wider audience.

<u>Stage 2: Set</u> – When the County determines it has met the intent of the ready stage it will proceed to incorporate observations, and input from Cities, First Responder Agencies and Healthcare partners, and other Community Partners. During this process the county will also meet the requirements of the Governor's Reopening Framework (April, 20, 2020), including meeting guidelines currently being developed by the Oregon Health Authority and the Governor's Medical Advisory Panel. At the conclusion of this phase the County will be prepared to begin specific, gradual re-opening activities.

<u>Stage 3: Go</u> – This stage is further sub divided into multiple "phases" that define specific activities and levels of activities that may restart. The state and County will continuously monitor the prerequisite checklist metrics and adjust as necessary. At the conclusion of this stage the County will have fully reopened all of the social and economic sectors that have been impacted by the COVID-19 illness.

The Governor's Framework is designed to have flexibility to reduce the likelihood of relapse to a previous phase and avoid threats that may prevent movement into the next phase. This means the guidelines for each phase may be adjusted as the understanding of local transmission changes over time. Mid-phase adjustments will reduce the likelihood of needing to revert to previous phases. We rely on our community

to partner with us on using mid-phase adjustments to prevent relapse to previous phases and prolonged stalls within a phase.

Application

This Plan applies to:

- Businesses and enterprises in Clatsop County, its residents, and visitors to the jurisdiction.
- Cities and special districts within Clatsop County.
- Community and Partner organizations.
- All departments and staff of Clatsop County.
- Response structures that have been activated to respond to the COVID-19 illness (PH-IMT, EOC)

<u>Section 3: Ready Stage – Governor's Prerequisite Checklist</u>

Prerequisite Checklist

There are seven prerequisites defined in the Governor's Framework that must be met before the County can proceed with reopening (which is ultimately the decision of the governor). Some of these prerequisites will be measured across the Hospital Preparedness Organization Region 1 (HPO-R1). The six counties in this region are Washington, Multnomah, Clackamas, Columbia, Tillamook and Clatsop. As a result, the Governor's metrics will be measured as a part of the greater Portland Metro Area.

Initially, and before proceeding into phase one of the reopening framework, Clatsop County and in some cases the HPO R-1 will need to observe positive indications that these benchmarks are being met.

Declining Prevalence of COVID-19

Prerequisites

Health Region #1 and Clatsop County will need to meet the following indices defined by the State:

- a. 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.
- b. A 14-day decline in COVID-19 hospital admissions.

Current Capacity

Health Region #1 meets these criteria – the data is available at Oregon Health Authority.

Clatsop County has not experienced any hospital admissions to date – and meets the criteria.

As we advance through this plan, the County anticipates the possibility that we may see an increase in the rate of infection (daily or weekly cases) due to the low number of initial active cases. The focus of the benchmarks outlined in this document is on assessing the local ability to manage an increase in cases while preventing the unobstructed growth of transmission and by extension hospital admissions. Our low initial active case counts and the minor impact to our hospital capacity might mean we may not obtain a downward trend in prevalence until late in the reopening process.

Declining prevalence of COVID-19 as measured by Emergency Department visits and Hospital admits is a difficult metric for a small county to meet. Clatsop County to date, has not had a single COVID-19 admit. A strict enforcement of this metric will mean that a single admit will render us incapable of meeting the prerequisite. The metric makes sense for a larger population and a higher initial prevalence of infection. However, since this metric is not pinned to the HPO-R1 where we might measure against a broader population there is a chance that Clatsop County will have difficulty meeting this prerequisite as we move through the phases.

Testing

Prerequisites

The HPO – R1 will need to meet the following testing requirements defined by the State:

- a. Regions must be able to administer COVID-19 testing at a rate of 30 per 10,000 people per week. Regions must implement a testing regimen that prioritizes symptomatic persons and individuals who came into contact with a known COVID-positive person and includes testing of all people in congregate settings when there is a positive test. This includes long term care facilities and county jails among others. The plan must include frequent tests of frontline and essential workers and industries where workers may not be able to practice optimal physical distancing (e.g., agricultural processing, meat packing).
- b. Regions must maintain an appropriate number of testing sites to accommodate its population and must fully advertise where and how people can get tested. The region must work with local public health and OHA to use the collected data to track and trace the spread of the virus. Testing must be accessible to low-income and underserved communities.
- c. This metric is measured at the Health Region level, not at the county level. An individual county cannot move into phase one if regional hospital capacity is beneath that level.

Current capacity

Health Region #1 meets these criteria – the data is available at Oregon Health Authority.

Although not a County criterion, Clatsop County is prepared to perform testing and meet the criteria in partnership with the state.

Robust, reliable community-wide testing by public health and private providers needs to be prioritized in order to provide an accurate portrayal of the impacts of the COVID-19 illness in Clatsop County. Given the current national supply chain challenges, testing has been limited to those with symptoms, people who have been in close contact with a confirmed case, suspected cases in congregate living sites and health care workers.

The PH-IMT testing plan recommends that County should test 10% of the population of the county to establish a baseline picture for the infection rate in the county. After that, Clatsop County could proceed with a testing program that meets the 0.3% testing rate indicated in the State's pre-requisites.

According to the pre-requisites defined above, Clatsop County would need to conduct 120 test per week. Currently, the PH-IMT can staff a testing operation of sufficient size to meet this requirement given that the

testing supplies are made available. However, with the limited availability of testing kits the county has conducted a total of 486 tests since the beginning of this pandemic (As of 5/1/20).

Contact Tracing System

Prerequisites

Clatsop County will need to meet the following contact tracing capacity requirement defined by the State:

a. Counties must have a minimum of 15 contact tracers for every 100,000 people. Every county must be prepared to contact trace 95% of all new cases within 24 hours, with OHA certifying a county's readiness. The contract tracing workforce must be reflective of the region and be able to conduct tracing activities in a culturally appropriate way and in multiple languages as appropriate for the population.

Current Capacity

Clatsop County currently meets this criterion.

The Public Health IMT has the resources to conduct rapid and effective investigations and monitor cases and contacts effectively. The team currently has six (6) staff members trained to conduct investigations and is prepared to bring on additional county staff to monitor cases and contacts, enter data, and provide data analysis if needed. This includes the ability to consistently interview all (100%) new cases within 24 hours of notification and provide initial notification to contacts within 48 hours. If necessary, the IMT can make additional arrangements with medical facilities and local Medical Reserve Corps volunteers to assist with contact tracing and monitoring for the benefit of the public.

The Public Health Department is prepared to address the culture and language needs of our rural community. The County has bilingual staff and additional community-based resources available on an as needed basis. Providing culturally competent services and access is a fundamental value and priority of Clatsop County. Clatsop County has demonstrated this capability and commitment in our response to an outbreak at a local processing plant.

Isolation Facilities

Prerequisites

Clatsop County will need to meet the following Isolation Facilities requirement defined by the State:

- a. Counties must have hotel rooms available for people who test positive for COVID-19 and who cannot self-isolate. The Department of Public Health at the Oregon Health Authority will provide support to local public health to identify needs and help with resources.
- Counties provide a narrative of how they will respond to three different outbreak situations in the county. (e.g. nursing home, jail, food processing facility, farmworker housing, other group living situation)

Current Capacity

Clatsop County currently meets this criterion.

Quarantine plan and capacity

Clatsop County Public Health has arranged with a local hotel to provide rooms to individuals who have no means to otherwise isolate themselves away from others, including family. The current capacity is 42 rooms. If necessary the County will make similar arrangements with additional facilities.

Clatsop County has developed an Isolation and Quarantine plan to guide the PH-IMT's response to a potential COIVD-19 outbreak. The plan provides guidance and structure for the PH-IMT and local partners regarding initiation, continuance and release from those activities. It further describes the circumstances, authority and events that may necessitate specific leadership decisions, response actions, and communications mechanisms. The purpose of the plan is to:

- Establish the decision-making criteria to be used by the Local Health Officer (LHO) to determine when I&Q is required
- Describe procedures for accomplishing I&Q, both voluntary and involuntary.
- Describe specific procedures for supporting home-based I&Q of small and large numbers of individuals in the county.
- Describe procedures for staffing and provisioning a dedicated facility for &Q of persons who cannot stay at their homes or who do not have a suitable home environment.
- Define roles and responsibilities for I&Q activities.

Outbreak Scenarios

Clatsop County is vulnerable to outbreaks of COVID-19 illness in specific facilities and settings. The possibility exists that the county may be at higher risk of outbreaks as we move into a phased reopening. In response, the Public Health Incident Management team has established Testing and Contact Tracing groups in its Incident Action Plan.

Below are explanations of how the county intends to respond to outbreaks in three types of facilities; food processing plants, the county jail and nursing homes.

Food Processing Facility

In early May an outbreak occurred in a local seafood processing facility. While the county responded to the outbreak successfully, it nevertheless allowed the Public Health IMT to further improve plans to respond to outbreaks. The response to the outbreak also provided confidence that the team could, if required, respond to equally large events in the future without additional support. Should an Influenza Like Illness (ILI) be reported at another food processing facility the Public Health Incident Management Team will take the following actions.

- 1. If, during the course of an investigation for a COVID 19 positive individual it is found that they work for a food processor, the PHD staff will notify the processor.
- 2. The PHD staff will notify the State Epi of the situation and gain an outbreak number if merited.
- 3. The PHD will meet with the company leadership and recommend testing all staff, or at least symptomatic staff and all contacts identified during contact tracing. PHD will also recommend the plant close for cleaning, and remain closed until test results return.
- 4. The company will be asked to provide a list of all employees with name, address, phone number, date of birth, position in the plant to expedite contact tracing, testing and or cross checking who was tested if they company chooses to use an outside testing agency.

- 5. After the testing results are received, PHD will investigate all contacts, and provide information on quarantine. Contacts will be monitored daily for 2 weeks.
- 6. Additional guidance on maintaining closure will be determined based on the number of employees affected.
- 7. The safety officer will evaluate the plant and recommend best practices for preventing further spread.
- 8. Workers will not be allowed to return to work until they have not had symptoms for 72 hours.

County Jail

Security considerations and protocols will complicate normal testing procedures in the corrections setting. In addition, protecting corrections department staff is critical to ensure the continued function of the facility. In the event that Clatsop County experiences a single case of Influenza Like Illness (ILI) at the county jail the Public Health Incident Management Team in coordination with the Sherriff's Office will take the following actions:

- 1. Immediately act to isolate and quarantine, and test the affected adult in custody. If a staff member, immediately isolate and test.
- 2. PH IMT will immediately notify OHA, and County Management regarding potential outbreak; and acquire an outbreak number if merited.
- 3. If a test indicates a positive result, the IMT will immediately move to test all inmates and staff. The Testing group will coordinate with the Sherriff to ensure that appropriate security measures are in place during testing, and that inmates are socially distanced or isolated after testing. All testing process will be examined by the Safety officer to protect Public Health and Sherriff's Office staff from exposure.
- 4. Contact tracing for all affected staff will be conducted within 24 hours of positive result.
- 5. The County will suspend all transfers of incarcerated/detained persons to and from other jurisdictions and facilities (including work release where relevant), unless necessary for medical evaluation, medical isolation/quarantine, or extenuating security concerns.
- 6. The County will increase isolation all new intakes from 7 to 14 days before they enter the facility's general population.
- 7. The County will continue daily screening for COVID-19 symptoms and more frequent temperature checks on staff and inmates who test negative.
- 8. The County will immediately design and implement a process to "deep clean" the jail facility. In addition to these immediate measures the County will act in full accordance with CDC Interim Guidance on Management COVID-19 in Correctional and Detention Facilities, and with any guidance offered by OHA.
- 9. The County will only book and house defendants with Measure 11 crimes or mandatory arrests such as domestic violence.

Nursing Homes and Long-Term Care Facilities (LTCF)

1. COVID 19 presents an increased risk to certain demographics including elderly patients, and given the high risk of spread once COVID-19 enters a LTCF, facilities and Public health must act immediately and in coordination to protect residents and staff. Maintaining heightened situational awareness and plans for a rapid response are important to allow LTCF's to continue to

- function. Should an Influenza Like Illness (ILI) be reported at an LTCF the Public Health Incident Management Team will take the following actions.
- The LTCF will call the PHD to notify them of every staff or resident that has an elevated temperature or symptoms. All facilities are currently performing daily checks, or multiple checks daily.
- 3. If a resident is ill the PHD will contact the State Epi to discuss and acquire an outbreak number if
- 4. The facility will isolate the resident and notify DHS as outlined in their guidance documents.
- 5. PHD will arrange for testing of any symptomatic staff or residents through the OSPHL. Sample collection kits and requisition forms will be delivered to the facility and the facilities nursing staff will collect samples unless facility requests that PHD staff collect samples.
- 6. If samples are positive contact tracing will be performed by PHD staff within 24 hours. More testing will be arranged for residents and staff. Staff who are positive will be quarantined as will their contacts. Eliminate shared staff between LTC facilities
- 7. The PH-IMT will coordinate with Local Hospitals to provide accurate information regarding the outbreak and its potential impact to Healthcare capacity.
- 8. In addition to these immediate measures the County will act in full accordance with CDC Guidance on Considerations for the Public Health Response to COVID-19 in Nursing Homes, and with any guidance offered by OHA.

Finalized Statewide Sector Guidelines

Prerequisites

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

Current Capacity

Clatsop County references the sector guidelines as part of local plan.

Please refer to Appendix B for links to OHA's statewide guidelines.

Sufficient Health Care Capacity

During the initial wave of this pandemic the Public Health IMT has worked closely with Columbia Memorial Hospital and Providence Seaside Hospital to develop and support additional surge capabilities.

<u>Prerequisites</u>

The HPO – R1 will need to meet the following sector guidelines requirement defined by the State:

- a. To maintain the phased reopening plan, each region must be able to accommodate a 20% increase in suspected or confirmed COVID-19 hospitalizations compared to the number of suspected or confirmed COVID- 19 hospitalizations in the region at the time Executive Order No. 20-22 was issued.
- b. This metric is measured at the Health Region level, not at the county level. An individual county cannot move into phase one if regional hospital capacity is beneath that level.

Current Capacity

Health Region #1 meets these criteria and Clatsop County is ready to support local hospitals as needed.

The most important measure of our ability to cope with a surge of infections is the capacities of our two hospitals, it is therefore imperative that the county remain within current and forecasted surge capacity, and that we maintain the ability to transfer patients to Portland Metro area hospitals to minimize pressure on local hospital capacity if necessary. To do this the Clatsop County Public Health IMT has developed a hospital capacity tracking dashboard to ensure availability of both local and regional hospital beds, ICU beds, ventilators, and PPE/supplies to ensure that they are adequately available if cases surge.

Sufficient Personal Protective Equipment (PPE) Supply

Prerequisites

The HPO – R1, County Hospitals, and Clatsop County will need to meet the following PPE Supply requirements defined by the State:

- a. All hospitals in the health region must report PPE supply daily to OHA's Hospital Capacity system. Large hospitals and health systems in the region must attest to a 30-day supply of PPE, and rural hospitals must have a 14-day supply. This metric is measured at the Health Region level, not at the county level.
- b. Counties must attest to sufficient PPE supply for first responders in the county.

Current Capacity

Health Region #1 meets the criteria and OHA monitors on behalf of the state.

Clatsop County meets self-imposed minimal requirements (21-day supply) for first responders and is still working towards the goal of 14-day working supply and 30-day reserve.

Clatsop County has developed a minimal definition for "sufficient PPE" for first responders as a 21-day supply. The preferred goal, however, is to have a 14-day working supply and 30-days in reserve. This measure is critical for Clatsop County agencies and organizations to ensure they can maintain operations without a loss of capability, or can adjust to increased usage in the case of a spike in active cases of infection. Clatsop County has been building toward the preferred goal but has not yet established a consistent and reliable supply. The County meets or exceeds the 21-day minimum.

Considering the difficulty in obtaining PPE during this pandemic, its procurement and distribution has been the number one priority of the Public Health IMT. Though there have been some recent advancements in the levels of PPE through mutual aid with HPO-R1 and State ECC push allocations, normal distribution channels have not yet come back online for any partner agencies, organizations, or hospitals in a meaningful way.

The PH-IMT Logistics Section has and will continue to track the on-hand supply and burn rate of the following PPE categories for all partner agencies:

- N95 Masks
- Surgical Masks
- Goggles
- Face Shields

- Tyvek Coveralls
- Gowns
- Gloves
- Face Shields

The PH-IMT has distributed conservation guidelines to its partner agencies in the hope of slowing the burn rate of otherwise consumable PPE. Until the supply chain is fully back to normal, these conservation guidelines will remain in effect. This will also include the use of the Battelle disinfection system that has been offered for use by the state.

Section 4: Set Stage – Working with our Partners

When the County determines it has met the Governor's Prerequisite Checklist it will proceed to incorporate input from cities, first responder agencies and healthcare partners, and other community partners. The guiding principle of this framework is that our community is stronger and more effective when we collaborate. In these challenging and uncertain times, no single entity can perfectly forecast the challenges ahead. This stage of the planning process is designed to emphasize partnership with individuals, organizations and the many sectors of our community in order to find common agreement in the effort to reopen Clatsop County.

During this process the county will also meet the requirements of the Governor's Reopening Framework which provides additional prerequisites for opening a county in Oregon:

- A formal request to the Governor.
- Letter from the CEOs and CMOs of hospitals within the county committing to daily PPE reporting to OHA, PPE supply chain reliability and hospital bed surge capacity.
- Recommendation letter from the County Public Health Officer.
- Vote of the County governing body certifying PPE for first responders is sufficient.

At the conclusion of this phase the County will be prepared to begin specific, gradual reopening activities.

Section 5: Go Stage - Phases of Reopening

During the "GO" Stage restrictions on certain social and business activities will be partially relaxed. This stage is sub divided into three "phases" that define specific activities and levels of activities that may restart. At the beginning of and during phases the County will continuously monitor the prerequisites to identify if activities during each phase are creating renewed impacts and must be scaled back. At the conclusion of this stage the County will have fully reopened all the social and economic sectors that have been impacted by the COVID-19 illness.

By design, decisions about how to move through the phases will not be made based on any one number or figure. Decisions will be made by looking at multiple data points and trends, along with developments in science and technology. In addition, capacities to manage the inevitable rise in caseloads and the resultant impacts to the health care system must be monitored. All of these factors must be considered when determining when and how to proceed through the reopening process.

Phase 1

The Governor has preliminarily identified six potential sectors for inclusion in Phase 1 reopening initiatives, including: restaurants, retail, child care, personal care, transit and outdoor recreation. The actual list will be provided by the Governor's Office. Each sector scheduled for reopening will be guided by a state approved set of guidelines (Appendix B).

During Phase 1, restrictions on non-essential travel remain in place. The local restrictions on lodging (hotels, bed and breakfasts, short-term rental and camping) are scheduled to be eased beginning in Phase 2. A more detailed plan for this sector will be developed and incorporated as an amendment to this plan. See Phase 2 for more detail.

State Guidance and reopening activities

Specific Phase 1 actions are based on the Governor's draft guidance, but likely include the six sectors listed above.

Clatsop County specific Guidance and reopening activities

Beach access control

The closure of beach access will be based upon real time observation of activity and the adherence to physical distancing guidance by visitors.

Concluding Phase 1 activities

If the State's prerequisites suggest COVID-19 is manageable, expansion to the next Phase will be considered by local, county and state stakeholders. This process is purposefully designed to be gradual, with designated windows (21 -days) for evaluation and recalibration as needed.

If the prerequisites are *not* being met then Clatsop County will immediately consider if certain activities should be restricted to suppress the spread of the infection, current phase 1 actions extended or the entire phase reconsidered.

Phase 2

State Guidance and reopening activities

Specific Phase 2 actions will be based on the Governor's guidance, which have not yet been released. As that guidance is released it will be incorporated into this plan. At this time, the Governor's Phase 2 Framework contemplates an increase in gatherings (up to 50) and resumption of non-essential travel.

Clatsop County specific Guidance and reopening activities

Clatsop County will implement additional, local, phase 2 actions for the following industries.

Lodging Businesses

The incremental reopening of Lodging capacity is designed to both reduce the chance of spread of the infection at individual facilities, and reduce the chances that a spontaneous influx of visitors creates conditions that produce increased infection rate across the county. Dependent on the timing of the lifting of non-essential travel restrictions by the Governor, the unimpeded access to visitation to the North coast could create conditions that severely stress our medical capacity.

- Provided that they have taken measures to meet the guidance to implement basic precautionary
 measures, Hotels/Motels will be permitted to take reservations for and fill a yet to be determined
 percent of their total capacity as measured by the number of rooms in their facility. The rooms
 made available for occupancy should be spread out through the entire facility to encourage
 increased social distancing.
- 2. Food Service will be permitted at lodging businesses as long as the Governor's Phase One reopening guidelines for Guidance for Restaurants/Bars/Breweries/Tasting Rooms are met.
- 3. Campgrounds will also be permitted to fill a yet to be determined percent of their total capacity as measured by the number of spaces available. As with Hotels/Motels, campgrounds must distribute the available campsites throughout their entire facility in order to maximize physical distancing best practices.
- 4. Short Term rentals will be allowed to reopen at some point during the phase assuming they have met the guidance to implement basic precautionary measures.
- 5. Lodging businesses that maintain public bathing facilities will not be permitted to open those facilities to their customers.

Public Bathing Facilities

Because of the continuing risk to public health these establishments will not be reopened during Phase 2. Instead these establishments are being requested to prepare for opening in Phase 3.

Beach access control

The closure of beach access will be based upon real time observation of activity and the adherence to physical distancing guidance by visitors.

Concluding Phase 2 activities

If the State's prerequisites suggest COVID-19 is manageable, expansion to the next Phase will be considered by local, county and state stakeholders. This process is purposefully designed to be incremental, with designated windows (21-days) for evaluation and recalibration as needed.

If the prerequisites are *not* being met then Clatsop County will immediately consider if certain activities should be restricted to suppress the spread of the infection, current phase 2 actions extended or the entire phase reconsidered.

Phase 3

State Guidance and reopening activities

Specific Phase 3 actions will be based on the Governor's guidance, which have not yet been released. As that guidance is released it will be incorporated into this plan. At this time, the Governor's Framework anticipates Phase 3 will increase gatherings size; more seating in restaurants and bars, visitors to nursing homes allowed and worksites have unrestricted staffing.

Clatsop County specific Guidance and reopening activities

Clatsop County has tentatively assigned the following unique local decisions to these phases 3 actions:

Lodging Businesses

Assuming that the Phase 2 opening actions have not generated concerning impacts to the county, the following actions will be applied – the actual plan will be formalized with the input of stakeholders and incorporated into the Plan as a Phase 3 amendment.

- Provided that they continue to meet the guidance to implement basic precautionary measures, and that the Public Health department has ascertained that health metrics meet the governor's prerequisites, Hotels/Motels will be permitted to take reservations for and fill a yet to be determined expansion of their total capacity as measured by the number of rooms in their facility. The rooms made available for occupancy should be spread out through the entire facility to encourage increased social distancing.
- 2. Food Service will be permitted at lodging businesses as long as the Governor's Phase One reopening guidelines for Guidance for Restaurants/Bars/Breweries/Tasting Rooms are met.
- 3. Campgrounds will also be permitted to fill a yet to be determined expansion of their total capacity as measured by the number of spaces available. As with Hotels/Motels, campgrounds must distribute the available campsites throughout their entire facility in order to maximize physical distancing best practices.
- 4. Short Term rentals will be allowed to reopen assuming they have met the guidance to implement basic precautionary measures.
- 5. Lodging businesses that maintain public bathing facilities will be permitted to open those facilities to their customers.

Public Bathing Facilities

- 1. Provided that they have taken measures to meet the guidance to implement basic precautionary measures, all Public bathing facilities will be permitted to open.
- 2. Large facilities (city pools) will take special precautions not to permit so many bathers to enter their facility simultaneously that appropriate social distancing measures cannot be enforced.
- 3. Before opening Public Health will inspect the facilities to ensure that increased sanitation measures are in place.

Beach access control

Similar to Phase 1 and 2 the closure of beach access will be based upon real time observation of activity and the adherence to physical distancing guidance by visitors.

Concluding Phase 3 activities

If the State's prerequisites suggest COVID-19 is manageable, expansion to the next Phase will be considered by the stakeholders. This process is purposefully designed to be gradual, with designated windows (21-days) for evaluation and recalibration as needed.

If the prerequisites are *not* being met then Clatsop County will immediately consider if certain activities should be restricted to suppress the spread of the infection, current phase 3 actions extended or the entire phase reconsidered.

Phase 4 – Only if Necessary

Clatsop County specific Guidance and reopening activities

Specific Phase 4 actions will be based on the local guidance, unless the state develops additional. If that guidance is released it will be incorporated into this plan. Clatsop County has assigned the following unique local decisions to these phases four actions:

Lodging Businesses

Assuming that the Phase 3 opening actions have not generated impacts to the county, the following actions will be applied

1. Provided that they continue to meet the guidance to implement basic precautionary measures, and that the Public Health department has ascertained that health metrics meet the governor's prerequisites, businesses and enterprises will be permitted to open to their full extent.

Public Bathing Facilities

No new actions

Beach access control

Similar to previous phases, the closure of beach access will be based upon real time observation of activity and the adherence to physical distancing guidance by visitors.

Concluding Phase 4 activities

If the State's prerequisites suggest COVID-19 is manageable, expansion to the next Phase will be considered by the stakeholders. This process is purposefully designed to be gradual, with designated windows for evaluation and recalibration as needed.

If the prerequisites are *not* being met then Clatsop County will immediately consider if certain activities should be restricted to suppress the spread of the infection, current phase 4 actions extended or the entire phase reconsidered.

Additional Phases

As necessary this plan will extend to incorporate additional phases in order to more finely distribute re opening actions across an increased number of incubation periods. This action may be necessary to ensure that the county does not experience any situation where retrograde actions to re-close the county is necessary. At the conclusion of all phases of this plan, Clatsop County will resume all normal economic and social function.

Appendix A – Clatsop County Status on Governor's Prerequisites

1. Declining prevalence of COVID-19		
a. The percentage of emergency department visits for		
COVID-19-like illnesses (CLI) are less than the historic	HPO-R1 currently meets this standard.	
average for flu at the same time of year.		
b. A 14-day decline in COVID-19 hospital admissions.	Clatsop County currently meets this standard	
2. Minimum Testing Regimen		
Regions able to administer testing at a rate of 30 per 10k	HPO-R1 currently meets this standard	
per week	The Al Currently meets this standard	
Sufficient testing sites accessible to underserved	HPO-R1 currently meets this standard	
communities		
3. Contact Tracing System		
County has 15 contact tracers per 100k people	Clatsop County currently meets this standard	
County contact tracing workforce is reflective of the county	Clatsop County currently meets this standard	
and able to work in needed languages		
County is prepared to trace 95% of all new cases within 24	Clatsop County currently meets this standard	
hours		
4. Isolation Facilities		
Counties have hotel rooms available for those who cannot	Clatsop County currently meets this standard	
self-isolate	,	
Counties provide a narrative of how they will respond to		
three different outbreak situations in the county (e.g.	Clatsop County currently meets this standard	
nursing home, jail, food processing facility, farmworker		
housing, other group living situation)		
5. Finalized Statewide Sector Guidelines -	Cuidalines finalized by state	
Guidelines finalized by state		
6. Sufficient Health Care Capacity		
Region must be able to accommodate a 20% increase in	HPO-R1 currently meets this standard	
hospitalizations		
7. Sufficient PPE Supply		
Hospitals in region are reporting PPE supply daily through HOSCAP	HPO-R1 currently meets this standard	
Hospitals in region must have a 14- or 30-day supply of PPE		
depending on their size and whether they are a rural hospital.	HPO-R1 currently meets this standard	
Counties must have sufficient PPE for first responders.	Clatsop County currently meets this standard	

Appendix B – Statewide Guidelines for Sector Reopening (by sector)

Governor's Office Guidance for Phase 1 opening

- Updated Presentation on Phases for Reopening: https://youtu.be/1zSz5tb5SMw
- General OHA updates and guidance: https://govstatus.egov.com/OR-OHA-COVID-19
- Guidelines Regarding Face Covering Use in Public: https://sharedsystems.dhsoha.state.or.us/DHSForms/Served/le2288K.pdf
- Phase One Reopening Guidance for the Public: https://sharedsystems.dhsoha.state.or.us/DHSForms/Served/le2342D.pdf
- General Guidance for Employers: https://sharedsystems.dhsoha.state.or.us/DHSForms/Served/le2342C.pdf
- Sector Guidance
 - o RETAIL: https://sharedsystems.dhsoha.state.or.us/DHSForms/Served/le2342A.pdf
 - o RESTAURANTS/BARS/BREWERIES/TASTING ROOMS/DISTILLERIES: https://sharedsystems.dhsoha.state.or.us/DHSForms/Served/le2342B.pdf
 - o OUTDOOR RECREATION: https://sharedsystems.dhsoha.state.or.us/DHSForms/Served/le2342E.pdf
 - o PERSONAL SERVICES: https://sharedsystems.dhsoha.state.or.us/DHSForms/Served/le2342F.pdf

Note - Refer to Oregon Health Authority (OHA) website for link to all sector guidance documents