Lake County
Reopening Plan

Prepared based on Governor Kate Brown’s

Public Health Framework for Reopening Oregon
Purpose

The purpose of this document is to provide guidance for Oregon’s Phased Reopening and give information that will need to be addressed in the implementation of Lake County’s individual plan.

The Lake County Board of Commissioners created and convened the Lake County Reopening Committee for the purpose of outlining a County plan for Phase 1, 2 and 3 of Reopening Oregon. The Lake County Board of Commissioners approved this plan on 4/30/2020.

The Committee consisted of our Incident Commander, Public Health Director, Public Health Medical Officer, Emergency Manager, Medical Providers/Doctors and a County Commissioner.

Due to the ever changing nature of our fluid situation, information associated with COVID-19 guidelines will be handled as an adaptive management plan and/or living document.
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Section I: Overview

Lake County is a rural/frontier county in the south-central region of Oregon. As of the 2010 census, the population was 7,895. Lake County has a total area of 8,358 square miles, making it the 3rd largest county in the state with more than one square mile per resident. The County seat is Lakeview, which is Lake County’s largest city with a population of 2,294. Paisley is Lake County’s only other incorporated city with a population of 243. The majority of the population lives outside of the urban growth boundaries in extremely rural communities.

Lake County is in the high desert region known as the Oregon Outback, on the northwestern edge of the Great Basin. The communities outside of Lakeview and Paisley consist of Westside, Plush, Adel, Valley Falls, Christmas Valley, Fort Rock, Silver Lake, Summer Lake, and New Pine Creek.

The Lake County economy consists largely of agriculture and natural resource management and extraction. It is home to many large cattle ranches, hay farms, and timber holdings (both public and private), as well as several frontier towns and early 20th-century homesteads. Although lumber was once a primary economic driver in Lake County, today only one mill remains.

As of April 28th, Lake County has been fortunate to have had 0 confirmed cases for COVID-19. Our Local County Government and County partners are very proud of their quick and organized response to the COVID-19 crisis, as well as the sacrifices and efforts our communities have made in their individual lives to protect our at-risk population. Lake County has made every effort in following all Federal, State and OHA guidelines, with special attention to CDC guidance for limiting potential spread of a virus. The County has provided public information kiosks throughout all our communities to keep our population informed and up to date with the situation.

We have seen and watched in sorrow as our fellow counties across Oregon and our Nation struggle to comply with the sound and practical efforts to control exposure and contamination through self-isolation, social distancing, sanitization and all other precautionary safety measures, appropriate and relevant to maintaining community public safety.

However, we also recognize and see within our own County communities, the heartache, despair, uncertainty and fear caused by the efforts to slow or stop the spread of this virus through the shutdown of non-essential business and commerce. With the favorable health condition and downward trajectory of influenza-like illnesses that exists in Lake County, relative to COVID-19, the devastating economic impact to our County seems even more extreme and detrimental to the overall health of our communities. Relief and assistance to the mental health needs in our County, along with additional pressure and impacts on public safety issues and our law enforcement require as much attention as continuing disease mitigation efforts.
Section II: Gating Criteria & Preparedness

A. Gating Criteria
   1. Symptoms
      (Downward trajectory of influenza-like illnesses (ILI) AND COVID-like syndromic cases reported
      within a 14-day period)

   2. Cases
      (Downward trajectory of documented cases within a 14-day period OR positive tests as a percent of
      total tests within a 14-day period (flat or increasing volume of tests))

Current Status
Lake County has shown a downward trajectory of influenza-like illnesses reported within a 14-day
period, according to data from Lake District Hospital. Lake County has also been fortunate to have no
confirmed cases of COVID-19 as of April 28, 2020.

We have seen very slow growth in the nearby counties with positive cases. The health and safety of
our community is our priority, and this trend of slow or no growth must continue. However, it would be
naive to think that we will never get a case. Lake County has created a Lake County Reopening
Committee in the Incident Command Structure to continuously monitor the situation and identify
Management Action Point metrics as part of an information-based, phased approach to reopening.

Plan for Reopening
A phased approach to reopening our economy will keep the COVID-19 positive growth rate curve or
line relatively flat. If no management action points are reached within a two-week period, which would
be the incubation period of the virus, then it would be permissible to move to the next phase. Taking
small, calculated steps will allow the economy to start reopening through a strategic approach that
protects the health of the community.

The Reopening Committee will monitor the situation throughout the reopening process. This group
consists of the Incident Commander, Public Health Director, Public Health Medical Officer, Emergency
Manager, Medical Providers/Doctors, and a County Commissioner. This Committee will continuously be
evaluating the numbers of tests done, positive tests and the information collected during contact
tracing. They could change the Management Action Points based on information, such as positive
COVID tests from healthcare workers or residents and/or staff of a Long Term Care Facility (LTCF).

In consultation with the Public Health Branch of the Incident Command Structure, a consensus was
reached on the following management action points should positive cases occur.

Management Action Points:  Positive Cases per week: 7
                           Hospitalized Cases: 7
                           Patients on a Ventilator: 2
If these management action points are reached, a HOLD (described in Section III) may be placed on moving forward with any other business sector reopening and allow time for contact tracing to occur. Based on the data provided through contact tracing and testing, the Lake County Reopening Committee and Incident Command Team will recommend to the County Board of Commissioners the need to continue a hold, or take steps backward, until we reach a steady state.

3. Hospitals
   (Treat all patients without crisis care AND robust testing program in place for at-risk healthcare workers)

Current Status
Lake County medical providers at Lake Health District along with the Medical Officer for Lake County Public Health believe that all patients can be treated without crisis care, given Lake District Hospital's increased and current capacity.

Robust testing has been defined for the State of Oregon as 15,000 tests per week. Based on Lake County's population, our testing requirements would be up to 26 tests per week for those that meet the criteria set by Oregon Health Authority (OHA).

Plan for Reopening
Lake Health District has a robust testing program in place for at-risk healthcare workers, including emerging antibody testing. This includes 409 serology tests, 194 RP2 kits, 54 Abbott tests, and 226 collection kits as of April 28, 2020. Lake County has enough tests to meet the requirements of the current robust testing program.

Lake County Emergency Operations Center (EOC) will continue to use the state’s existing Ops Center to make requests for testing media from the state.

B. Core State Preparedness
   1. Testing & Contact Tracing
   - Screening and testing for symptomatic individuals
   - Test syndromic/influenza-like illness-indicated persons
   - Ensure sentinel surveillance sites are screening for asymptomatic cases (sites operate at locations that serve older individuals, lower-income Americans, racial minorities, and Native Americans)
   - Contact tracing of all COVID+ cases

Lake District Hospital is currently screening and testing for symptomatic individuals, as well as testing for syndromic/influenza-like illness-indicated persons. As of April 30, 2020, Lake County has performed 95 COVID-19 tests, 91 negative and 4 pending.
Lake County Public Health will conduct all contact tracing and case investigations. Their investigation team is comprised of five staff members which includes two bilingual Spanish speakers.
Lake County has a ratio of 5 per 7,500 people that exceeds the ration set forth by the Oregon Health Authority of 15 per 100,000. Should additional support be needed, Lake County Public Health will contact OHA Acute and Communicable Disease Program for additional assistance.

2. Healthcare System Capacity
   - Sufficient Personal Protective Equipment (PPE)
   - Ability to surge ICU capacity

Personal Protective Equipment
PPE supply and the current supply chain is adequate for the needs identified in the phases described below in Section III. Currently, Lake County has a 30 day supply on hand. All PPE is stored in a centralized location and distributed to the medical facilities, long term care facilities, public safety agencies, and other users as necessary. The table below shows the amount of PPE on hand and the average burn rate.

<table>
<thead>
<tr>
<th>PPE Type</th>
<th>Amount on Hand</th>
<th>Burn Rate per Day</th>
<th># of Days of PPE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gloves</td>
<td>57800</td>
<td>1000</td>
<td>58</td>
</tr>
<tr>
<td>Gowns</td>
<td>25899</td>
<td>130</td>
<td>199</td>
</tr>
<tr>
<td>N95</td>
<td>3788</td>
<td>90</td>
<td>42</td>
</tr>
<tr>
<td>Face Shields</td>
<td>1146</td>
<td>15</td>
<td>76</td>
</tr>
</tbody>
</table>

Surge Plans
Lake County is prepared to handle several hospitalized COVID-19 patients at a time and the surge capacity of Lake District Hospital is sufficient. Lake District Hospital has developed a detailed Surge Plan that will serve as a guide for COVID-19. While the hospital is licensed for 24 in-patient beds, in the event of a "surge" of patients with known or suspected COVID-19, Lake District Hospital has increased its capacity through a multi-tiered response plan overseen by the Hospital’s Incident Command structure. Lake County is fortunate that Lake District Hospital had recently undergone a major remodel and the former long-term care spaces had been converted to business offices, and has now been converted back to patient beds, increasing hospital capacity to 47 beds. These offices are easily converted back to patient bed areas, allowing the hospital to increase its current bed capacity by 183%, resulting in a total of 44 in-patient beds. A copy of the Lake County Hospital Surge Plan is included in Appendix A.

Lake County Public Health
Public health services in Lake County is provided through Lake County Public Health, which is a division of Lake Health District. Lake County Public Health has been working closely with the Oregon Health Authority, local emergency management, the hospital and medical providers to monitor the 2019 Novel Coronavirus (COVID-19) outbreak.

Alternative Care Site
The A.D. Hay School gymnasium is on standby for use as an alternate care site for lower acuity hospital patients transferred from the hospital.
Ambulance Care Providers:
*Emergency Response Transport Air Ambulances (Rotary-wing & Fixed Wing)*
  - AirLink Critical Care Transport
  - Life Flight Network

*Emergency Response Transport Ground Ambulance Resources*
- Lakeview Disaster Unit: 5 transport vehicles
- Paisley Disaster Unit: 2 transport vehicle
- North Lake EMS: 2 transport vehicles
- Silver Lake Fire & Rescue: 2 transport vehicles

**Mutual Aid Agreement**
Mutual Aid agreements between the various emergency response jurisdictions is critical for a medical surge event since any one Lake County agency/department may not have the human and equipment resources to respond to multiple calls for service.

**Public Information**
Medical care messages will be collaborated with the partnering agencies in a surge event. This will be done through a Joint Information Center (JIC). The messages from each partner agency will be shared with the other so a common message can be shared from the Public Information Officers (PIOs) to the public. PIOs from Lake County, Lake County Public Health, and Lake District Hospital will work together in distributing the messages to the public.

3. **Plans**
   - Protect the health and safety of workers in critical industries
   - Protect the health and safety of those living and working in high-risk facilities (e.g. senior care facilities)
   - Protect employees and users of mass transit
   - Advise citizens regarding protocols for social distancing and face coverings
   - Monitor conditions and immediately take steps to limit and mitigate any rebounds or outbreaks by restarting a phase or returning to an earlier phase, depending on severity

The Lake County Reopening Committee feels that our local community and businesses are taking every precaution to protect the health and safety of workers in our critical industries. See attached business plans in Appendix B.

While Lake County does not have any mass transit, we do offer demand response public transportation. Drivers and passengers are screened for symptoms before each trip. The drivers disinfect the vehicle between rides. Three people are allowed on our larger buses to maintain physical distancing protocol. The drivers utilize PPE during the trip and encourage the riders to do the same.
The Committee feels that cloth masks should be recommended or strongly encouraged while out in public. Lake County will continue to advise citizens regarding social distancing, hand washing, and face coverings. Lake District Hospital requires masks at all times.

Lake County will continue to closely monitor conditions working in cooperation with our Incident Command structure and medical staff. If necessary, we will take steps to limit and mitigate any rebounds or outbreaks by restarting a phase or returning to an earlier phase, depending on severity.

Lake County will provide educational resources to the public for best practices for individual and employee health through Lake County Public Health.

Lake County is communicating with bordering counties, including Modoc County, California. Modoc County is located directly south of Lake County. The county seat for Modoc County is Alturas, which is only 52 miles south of Lakeview. With these two communities being in close proximity, we find many citizens commuting between them on a daily basis for work or essential services. Lake Health District also operates a clinic located in Alturas. Modoc County is reopening all services while adhering to social distancing guidelines effective May 1, 2020. Modoc County has zero confirmed positive COVID-19 cases. Lake County will be working closely with Modoc County to monitor how the reopening affects both counties. A copy of Modoc County’s reopening plan is included in Appendix C.
Section III: Reopening Phases

Phase One

- Guidelines for Individuals
  - Practice good hygiene
  - Strongly consider wide use of face coverings in public
  - All individuals, WHEN IN PUBLIC (e.g., parks, outdoor recreation areas, shopping areas), should maximize physical distance from others
  - Stay home if sick
  - Avoid groups of more than 10 people
  - Vulnerable individuals should shelter in place
  - Minimize non-essential travel
  - Offer resources for education on safe and healthy communities through public information outlets

- Guidelines for Employers
  - Develop and implement COVID 19 policies and procedures in accordance with OHA Guidelines.
  - Monitor workforce for indicative symptoms
  - Consider contact tracing procedure for keeping record of name, date/time of visits. Businesses should inform customers/visitors of the reason the information is being collected and how the information will be used. Example language: This business is collecting basic information to share with public health in the event a COVID-19 case is identified associated with this business.
  - Encourage working remotely if possible
  - Minimize non-essential travel
  - Make reasonable accommodations for vulnerable individuals
  - Encourage limited fraternization in break areas
  - Limit customers to maximize physical distancing, set up staging areas
  - Stagger shifts if possible
  - Host remote access meetings for staff when appropriate
  - Separate work stations to comply with physical distancing, provide barriers if necessary/possible
  - Provide educational resources through public information outlets

- Schools and organized youth activities
  - Will remain closed with exceptions for childcare reopening in Phase One in accordance with the guidelines established by the Oregon Board of Education.

- Visits to hospitals and senior living facilities
  - Hospital currently only allows visitors for the following:
    - **Child Birth**: 1 visitor allowed, generally significant other.
    - **Dying**: No more than 2 visitors a day can come visit.
• Large Venues (sports, theaters, churches):
  • The committee agrees with churches opening with caution while following strict physical distancing and sanitation protocols, as deemed appropriate during Phase One.

• Sit-down Dining
  • Sit down dining to open during Phase One while maintaining social distancing of six feet by using less than every other booth/table and not to exceed 50% of normal capacity. Physical barriers may increase capacity. Contact tracing will be recommended and will contain patron data of name, contact information, time in and time out of facility. Cleaning/Disinfectant requirements of commonly touched surfaces and in between each set of patrons of booths and tables. Physical barriers should be implemented at cashier locations. Employees in contact with patrons will wear a cloth face mask.
  • Prohibit customer self-service operations, including buffets, salad bars, soda machines and growler refilling stations.
  • Encourage outdoor seating where social distancing can be more easily achieved.
  • Disinfect customer-contact surfaces at tables between each customer/dining party including seats, tables, menus, condiment containers and all other touch points.
  • Follow all State guidelines.

• Gyms
  • May open with strict physical distancing, sanitation and safety protocols, with suggestions for limited hours, and a recommendation for masks and screening.

• Bars
  • Prohibit counter and bar seating. This applies to all facilities including bars, breweries and tasting rooms. Counter and bar ordering is acceptable if the operation finds that this decreases worker exposure. 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.
  • All on-site consumption of food and drinks, including alcoholic beverages must end by 10 p.m.

• Non-emergency Medical Procedures
  • Will resume as clinically appropriate.

• Retail stores
  • Limit the number of customers in the retail store and focus on maintaining at least six (6) feet of distance. Store management should determine maximum occupancy to maintain at least six feet of physical distancing, taking into consideration areas of the store prone to crowding such as aisles, and limit admittance accordingly.
• Post clear signage (available at healthoregon.org/coronavirus) listing COVID-19 symptoms, asking employees and customers with symptoms to stay home.
• Frequently clean and sanitize work areas, high-traffic areas, and commonly touched surfaces in both customer/public and employee areas of store.
• Strongly encourage all employees and customers to wear cloth face coverings. If a store sets a policy that all employees and customers are required to wear cloth face coverings, store management should consult with their legal counsel to determine whether or not such a requirement can be enforced and whether they will provide cloth face coverings for those who do not bring their own.
• 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.
• Use signage to encourage physical distancing and encourage one-way flow with marked entrances and exits, but do not block egress for fire exits. Use signage to direct one-way flow of traffic.

• Personal Services
  • Beauty Salons and Barbers may open if only seeing one client at a time per person, with recommendations for both parties wearing a mask when possible, washing hands between each customer and implementing sanitation protocols.

For people that will be with the public less than 6 feet spacing for over 15 minutes and did not use medical grade PPE prior to the pandemic, use a cloth face mask. If you used medical grade PPE please see optimization/reuse guidelines.

Cloth face masks will be required (by provider and public). Appointments will be required and contact tracing will be done through appointment logs. Frequent cleaning/disinfection of commonly touched surfaces will also be required.
Phase Two

- **Guidelines for Individuals**
  - All vulnerable individuals should continue to shelter in place. Members of households with vulnerable residents should be aware that by returning to work or other environments where distancing is not practical, they could carry the virus back home. Precautions should be taken to isolate from vulnerable residents.
  - All individuals, when outside of their homes (e.g., parks, outdoor recreation areas, shopping areas) should maximize physical distance from others. Social settings of more than 50 people, where appropriate distancing may not be practical, should be avoided unless cloth face masks are used.
  - Non-essential travel can resume.

- **Guidelines for Employers**
  - Continue to encourage telework, whenever possible and feasible with business operations.
  - Close common areas where personnel are likely to congregate and interact, or enforce moderate social distancing protocols.
  - Non-essential travel can resume.
  - Strongly consider special accommodations for personnel who are members of a vulnerable population. This would include physical barriers and the use of cloth face masks when social distance cannot be maintained.

- **Bars**
  - Maintain social distancing of 6 feet. Every other booth/table or approximately 50% of normal capacity, however, physical barriers may increase capacity. Contact tracing will be recommended and will contain patron data of name, contact information, time in and out of facility. Cleaning/disinfectant requirements of commonly touched surfaces and in between each set of patrons of booths and tables. Physical barriers should be implemented at cashier locations. Employees in contact with patrons will wear a cloth face mask. All employees will self-monitor for influenza-like illnesses (ILI). No bar seating will be available unless it meets the social distancing measure of 6 feet from the bartender.

- **Others (Sports, Theater, Pools, …)**
  - Maintain social distancing of 6 feet, recommend the use of cloth face masks if social distancing cannot be done, frequent cleaning of commonly touched surfaces, encourage employees to self-monitor for influenza-like illnesses (ILI) and COVID-like signs and symptoms Contact tracing would be recommended for sessions longer than one hour and when social distancing cannot be maintained. (Special circumstances will be considered for those in this group)
Monitor for two weeks checking against any Management Action Points.

**Move Forward** – If after two weeks there is no change in the Gating Criteria or the Core State Preparedness and the review unit advises that reopening steps are continue, Lake County will move to repeat Phase Two at a social distancing of 3 feet.

**Hold** – This would mean that an additional one to two weeks is required to adequately determine if the Gating Criteria and Core State Preparedness requirements are able to be met/maintained.

**Reduction of Phase Two** – Use contact tracing to determine which sector may be contributing to increase of COVID-19 cases. The review unit will review the data collected from contact tracing to identify possible contributing factors and institute new guidance for the sector that is suspected of contributing to an increase of COVID-19 cases. For example, if pools are contributing to the increase, open swim may be postponed and lap swim continue.
Phase Three

Phase 3 Step 1

- Guidelines for Individuals
  - Vulnerable individuals can resume public interactions, but should practice physical distancing, minimizing exposure to social settings where distancing may not be practical, unless precautionary measures are observed.
  - Low-risk populations should consider minimizing time spent in crowded environments.

- Guidelines for Employers
  - Resume unrestricted staffing of worksites.

Monitor for two weeks checking against any Management Action Points. Should the Management Action Points be checked the Reopening Committee will advise the following:

Move Forward – If after two weeks there is no change in the Gating Criteria or the Core State Preparedness and the Reopening Committee advises that reopening steps can continue onto Phase 3 Step 2.

HOLD – This would mean that an additional one to two weeks is required to adequately determine if the Gating Criteria and Core State Preparedness requirements are able to be met/maintained.

Reduction of Phase 3 Step 1 - Reduce gatherings based on Reopening Committee recommendations.

Phase 3 Step 2

Allow visitation to Long Term Care Facilities, Adults in Custody (AIC) and congregate settings to occur. Visitors will wear cloth face masks unless physical barriers are in place. Prior to entry visitors wash their hands at a handwashing station and will be screened for influenza-like illnesses (ILI) AND COVID-like signs and symptoms and temperatures logged. Employees in contact with residents will follow the LTCF Tool Kit guidance. All employees will follow the LTCF guidance for screening for influenza-like illnesses (ILI) AND COVID-like signs and symptoms prior to entry to the building.
Requests

Outdoor Recreation Sites
Request that all outdoor recreation sites could open as long as social distancing guidelines are followed in conjunction with state and federal partners. This includes, but is not limited to, boat ramps, trailheads, and campgrounds. Lake County does not generally have high use numbers at our recreation sites because of our remoteness.

Feedback
If this plan is not accepted, please refer back to the Lake County Board of Commissioners with changes, deficiencies and/or other recommendations.
Purpose
The purpose of this Surge Plan is to develop a systematic approach toward providing patient care services during surge events that may affect our community and hospital. As a leader in patient care services, we are in the best position to respond to a community-wide medical crisis.

For this reason, we have developed a surge plan that outlines how we intend to respond to support such an event.

Our goal is to assess, plan, and implement operational strategies and processes outlined within this document that would enable us to support a Surge event.

Assumptions
The development of and implementation of this plan is based on the following assumptions:

1. Surge occurs when we have achieved maximum census (Licensed Bed Levels) for either Inpatient or Emergency Department Services.
2. A Surge event will require the Hospital to declare an Internal Disaster, therefore initiating elements of our Emergency Management Program.
3. Standards that outline Life Safety Codes and other Environment of Care will be deviated from in order to set-up Alternative Patient Care Sites. (NOTE: The intent of assumption 3 is not to degrade patient care services, but to provide exceptions that would allow lifesaving medical services to be provided during emergency crisis situations.)
4. The Hospital is not directly affected by an emergency event (fire, bomb, etc.) and is physically capable of providing basic utility services (Water, Sewage, and Electricity).
5. Adequate staffing is available as determined by Administration.
6. The Hospital may exceed the surge plan levels reflected within this document only if capable before declaring a level III surge.

Definitions

<table>
<thead>
<tr>
<th>Alternative Patient Care Location</th>
<th>Designated or non-designated locations where a patient care bed will be set-up that is not designated as a licensed care location.</th>
</tr>
</thead>
<tbody>
<tr>
<td>EOC</td>
<td>The Emergency Operations Center (EOC) – the location established by each jurisdiction to centralize coordination of all aspects of a disaster response.</td>
</tr>
<tr>
<td>HAN</td>
<td>Health Alert Network (HAN) – Oregon’s HAN connects hospitals, clinics, laboratories, public safety, EMS and many other public health partners via secure web applications that facilitate information sharing throughout Oregon and SW Washington.</td>
</tr>
<tr>
<td>HCC</td>
<td>Hospital Command Center (HCC). An area established in a healthcare facility during an emergency that is the facility’s primary source of administrative authority and decision-making.</td>
</tr>
<tr>
<td>HICS</td>
<td>Hospital Incident Command System (HICS). The incident command structure developed to meet the needs of the hospital response to a disaster.</td>
</tr>
</tbody>
</table>
Rationale: Stress to staffing resources because normal staffing does not meet our full capacity. Normal staffing is for average census.

Surge Level Activation

Level I Surge

1. **Triggers:**
   a. >30 minute delay in Emergency Department triage; or
   b. >30 minute delay in Ambulance turn-around times at ED; or
   c. Determination by the Nurse Manager designee and Administrator that Level I is necessary.

2. **Activation:**
   a. ED Staff shall immediately notify the Nurse Manager designee when any of the above triggers have been met.
   b. The Nurse Manager designee shall assume the role of Incident Commander and notify the Nurse Administrator on-call of the Level I Surge.

3. **Determine Size and Scope:**
   a. The Nurse Manager designee shall work with the Nurse Administrator on-call to complete a high-level assessment of the potential operational impact on the facility and determine the need to activate the Hospital Command Center (HCC).
   b. Nurse Manager or designee shall determine the risk and need for a facility-wide lockdown and work in collaboration with Plant Operations to ensure immediate actions to implement the lockdown.
   c. The Nurse Manager shall conduct regularly scheduled meetings with ED and Inpatient staff to address patient throughput issues and assess needs.

4. **Internal Alert:**
   a. The Nurse Manager or designee shall contact the Unit Secretary, providing any pertinent information about the announcement to be made.
   b. The Unit Secretary will announce THREE TIMES over the public address system: (Note: If a Drill, please identify as a “Drill.”) “CODE TRIAGE: INTERNAL LEVEL I.”

5. **Staffing:**
   a. The Nurse Manager shall immediately assign available staff to support the Emergency Department
   b. Consider activation of staff call-back
   c. Consider implementation of staffing ratio flex

6. **Bed Capacity:**
   a. Additional beds and rooms shall be designated as Emergency Department space by the Nurse Manager.

7. **Communicate ED/Hospital Status:**
   a. ED Staff shall update HOSCAP with current hospital/ED status, and keep updated as status/resources change (at least every hour).
   b. ED staff or the Nurse Manager shall contact neighboring hospitals to assess levels of saturation and communicate the current hospital status.
   c. ED staff shall notify Ambulance Dispatch of the Level I Surge.
7. Communicate Status:
   a. ED Staff shall update HOSCAP with current hospital/ED status, and keep updated as status /resources change (at least every hour).
   b. ED Staff or the Nurse Manager shall contact neighboring hospitals to assess levels of saturation and communicate the current hospital status.
   c. Nurse Administrator shall notify the Administrator on-call of the Level II Activation.

8. Communicate Resource Needs:
   a. The Incident Commander (or designee) shall work in collaboration with the Public Health designee to ensure that adequate resource needs are being assessed on an ongoing basis and necessary resources acquired to address the needs.

Level III Surge

1. Triggers:
   a. Determination by the Incident Commander that the hospital has reached maximum surge levels and is unable to meet the medical needs of the public without intervention or mitigation of regional or state resources.
   b. Facility has exceeded both its licensed bed capacity and its surge bed capacity.

2. Activation:
   a. Only the Public Health Officer or designee is authorized to activate a Level III Surge.
   b. The HCC shall be fully activated.
   c. Hospital may be required to send an Incident Management Team to the County to plan for the activation of external Alternative Care Sites within Lake County.
   d. Incident Management Team Requirements:
      i. Incident Commander
      ii. Medical Branch Leader
      iii. Infrastructure Branch Leader
      iv. Logistics Branch Leader
      v. Security Branch Leader

3. Determine Size and Scope:
   a. The Incident Commander shall complete a high-level assessment of the potential operational impact on the facility.

4. Internal Alert:
   a. The Incident Commander or designee shall contact the Unit Secretary, providing any pertinent information about the announcement to be made.
   b. Unit Secretary will announce THREE TIMES over the public address system: (Note: If a Drill, please identify as a “Drill”.) “CODE TRIAGE: INTERNAL LEVEL III.”
   c. Unit Secretary will contact other departments which do not have overhead paging available.
   d. Unit Secretary will contact associated clinics, if open, informing them of the Level III Surge.

5. Staffing:
   a. Implement staffing ratio increase up to 10:1 in order to meet the needs of the patient population.
   b. Request additional staffing from any potential outside agency.
c. Implement re-assessment, transfer, or discharge of patients according to Austere Alternate Medical protocols approved by the HCC.

7. Communicate ED/Hospital Status:
   a. ED staff shall update HOSCAP with current hospital/ED status, and keep updated as status/resources change (at least every shift).

8. Communicate Resource Needs:
   a. The Incident Commander (or designee) shall work in collaboration with the Public Health Officer to ensure that adequate resource needs are being assessed on an ongoing basis and necessary resources are acquired to address the needs.

9. Participate in Operational Area/regional/statewide Planning Sessions:
   a. Coordinate any public information with the county EOC and Public Health Officer.
   b. Consider implementing disaster hotline for the public (triage, nurse call line).

Planning Factors for Determining Alternative Patient Care Sites
Alternative Patient Care Site is a designated location for providing inpatient and triage medical care services that would not normally be used for such services. Examples with the hospital facility would include visitor waiting areas, hallways, conference rooms, or an outpatient medical office building. Examples outside the hospital facility would include tents, school buildings or gymnasiums, or commercial buildings.

Do we have or can we provide:

1. □ Temperature and ventilation exhaust control to the space?
2. □ Access control/security?
3. □ Electrical power?
4. □ Emergency back-up power?
5. □ Patient care process flow that allows accessible supervision and services?
6. □ Waste disposal?
7. □ Sprinkled building (Fire Suppression System)?
8. □ Same level emergency egress with access widths not less than 45 inches?
9. □ Personal hygiene capabilities (hand washing, changing, and bathroom resources)?
10. □ Communications-telephonic and/or overhead capabilities?

Evacuation: Since a 24-hour stay would be expected for inpatient, we need to ensure the evacuation of patients could occur during a fire related event, therefore should consider evacuation impacts when setting up Alternative Care Sites on multi-level floors.

Storage of Flammable Liquids and Ignition Sources: Storage of these items would need to be assessed and controlled to reduce fire potential in non-hospital building occupancy classifications.
LDH Acute Patient Care Surge Flow

Surge Capacity = 44 total patients

Objective:
- All pts can be physically housed @ LDH
- Unit 3 Opening will require outside staff resources

Possible Triggers
- Max Capacity 16-19 pts
- 24 total Beds full
- Staffing Limitations

Planning for Unit 2
- Consider B.O. Move
- Where will Rehab Move
  - Or move now
- Order Beds
- Check O2 Flow Meters
- Plan 2nd Unit Staffing
- Plan 2 RT Staffing
- Plan Unit 2 Crash Cart
- Unit 2 Room/Bed System
- Need IT Devices (4)
- Add CPSI Beds
- Med Room/Med Cart
  - Amidon's Office
- Alarms (Bells)

Stand Up Unit #2
Possible Mix of Clean (main hall) & Dirty (OP Obs in "Old OB" hall) pts
- Move Rehab
- Set up 20 beds
- Stand up 2 shifts in Laundry
- Add Supplies/Meds
- Add Staffing for this Unit

Max Capacity ______

Planning for Unit 3
(Outside Resources to Staff)
- Housing
- Staging
- Food svc
- EVS
- Transportation
- PPE
- Supplies
- Laundry
- Security
- Maintenance
- External Restrooms

Open Unit 3 West Wing

Required Outside Resources
- Staff – RN's & RT's

3/25/2020
St. Patrick Catholic Church of Lakeview, Inc.

Re-Opening Plan

We have two Masses on the weekend in our Lakeview Church (St. Patrick’s) and one Mass each Sunday, on a rotating monthly schedule, at our Missions at 11:30 a.m..

St. Patrick Church, in Lakeview OR, has seating capacity for 200 people and a typical weekend Mass attendance of 100 total. Typical weekend attendance is approximately 25-30 people on Saturday evening at 6:00 p.m. and approximately 60-75 people attend on Sunday morning at 9:00 a.m.

Parish Missions:

St. John Mission, in Paisley OR, has seating capacity for 72 with typical Sunday attendance of 15-20 people at Mass every 1st and 3rd Sunday of the month.

St. Thomas Mission, in Plush OR, has seating capacity for 60 with typical Sunday attendance of 8 people at Mass every 2nd Sunday of the month.

St. Richard Mission, in Adel OR, has seating capacity for 60 with typical Sunday attendance of 6 people at Mass every 4th Sunday of the month.

Upon re-opening, we will implement social distancing and sanitation practices aligned with CDC and State recommendations.

At St. Patrick Church in Lakeview, we plan to seat from 2 up to 8 people to a pew, every other pew as follows: One single individual on the end of each pew OR two household members at the end of each pew OR a family of up to 8 household members are allowed. The adjacent pew behind these pews will be vacated and roped off to keep the proper 6’ social distance. Overall attendance at each Mass will be limited to 50 individuals. If we have to turn people away due to our maximum allowable attendance, an additional Mass will be added on Sunday evening which will follow the same protocol. Additionally, the same preventative protocols will be followed at each Mission church.

Planned COVID-19 Preventative Protocols

Sanitation: Masks or facial coverings will be required of all individuals upon entry into the church building. Parishioners are expected to bring their own coverings as masks are limited for church distribution. Hand sanitizer will be located at the entrance of the church. Each parishioner will be required to use sanitizer upon entry under the guidance of parish Ushers. Pews will be wiped down with disinfectant before and after each Mass. Bathrooms and toilets, along with hard surfaces, including doorknobs and pews will be cleaned before and after each Mass.

Social Protocols: Families may request a dedicated pew, in advance, through priest or parish office. Upon entrance, seating will be guided by Ushers to appropriately marked pews available at each Mass that meet the 6’ distancing protocol. Dismissal will also be guided by Ushers to keep proper 6’ distancing. No gathering in groups prior to or upon dismissal from Mass is allowed. No Coffee hour gatherings after Mass. No group meetings or social events allowed until further notice.

In order to avoiding touching of door handles, entrance doors will be opened in advance and kept open until parishioners are released at the end of Mass.
During Mass there will be no sign of peace or shaking hands with one another. No physical greetings are allowed before and after Mass. Holding hands during the “Our Father” is no longer allowed. Liturgical norms state it is appropriate for only the priest to raise his hands during this prayer. When the Mass has ended, Ushers will release those seated in pews one row at a time, maintaining a 6’ distancing between parishioners.

No Holy Water will be placed in the fonts. No Missals or Music Issues will be available in pews. Parishioners are allowed to bring their own individual Missal to Mass with them and will be provided one upon request.

**Communion:** Parishioners will approach the Altar in one-line, single file with a 6’ distance between them. Communion will be given only in the form of bread. The priest will distribute communion from his fingers to recipients’ fingers as they hold their palm under their hand, so that he will not touch people in between one another. Ushers will guide parishioners up to the Altar one at a time to receive Holy Communion, keeping a 6’ distance between individual parishioners.

Eucharistic Ministers will not be used to distribute communion at Mass or other places. There will be no communion distributed to shut-ins or nursing home residents.

**Lectors:** Lectors will approach Altar, individually, for their particular reading, returning to their seat, each reading at a time.

**Altar Servers:** Servers must keep a 6’ distance between them unless they are members of the same household. There will be no use of pattens at Mass in order to keep a 6’ distance from others. Parishioners are to place their open palm under the hand accepting the host.

**Offertory Counters:** Counting will take place in the Rectory meeting room where counters can keep proper 6’ social distancing. Counters will wash hands before and after handling the offertory. Counters will wear masks during the count session.

**Choir:** Members will keep 6’ social distancing in the choir loft away from other parishioners. Microphones or musical instruments will be sanitized after each individual use.

**Attendance:** High risk individuals and the most vulnerable, such as older people and those with serious underlying health conditions-like heart disease, lung disease and diabetes and/or sick individuals shall stay home. Dispensation of all the faithful in the Diocese of Baker is likewise extended indefinitely.
April 20, 2020

To whom it may concern:

PLAN TO REOPEN

Regarding the Covid-19 epidemic, our church willingly suspended all in-person gatherings at both of our campuses in Lakeview and Bly on March 22, 2020. While we have a constitutional right to gather for religious purposes regardless of the epidemic, we did not believe it wise to exercise that right out of an abundance of caution and the public relations challenges we expected to face if we remained open.

Whether history will say the response to “shut down” most of our society was effective or an overreaction is a matter of opinion. Regardless, Lake County has had zero confirmed cases of Covid-19. The death toll for the state as of the date of this letter is 72, less than every other major category of fatalities measured in a calendar year. It is quite possible the measures taken by the state, along with the tremendous sacrifice of the people to comply with social distancing measures, have indeed reduced this figure.

For the sake of the financial, emotional, mental, spiritual, and physical well-being of the people of Oregon, it is time to shift the focus to reopening the economy and getting people out of their homes in a thoughtful and cautious manner.

We expect to reopen soon but plan to do so wisely. No one can prevent every disease or accident, but we can reduce risk in reasonable ways. Here is our plan for keeping our people safe:

1. Assign dedicated ushers to open the outside doors so only one person touches each door. Greeters will have masks and gloves on. If possible, doors will be propped ajar before and after the service to reduce touching the doors at all.

2. Seating will be arranged so no household is directly next to another. We have enough space in our facilities to maintain a six-foot distance between families.
3. No meet and greet time.

4. Worship team members will not share equipment and will be spaced six feet apart.

5. Offerings will be handled by ushers wearing gloves and masks. Offerings will sit in a safe for several days before being processed to reduce the risk of virus transfer. Offerings will be processed with gloves.

6. Kids ministry will observe the same practices regarding doors and spacing of family members.

7. These precautions put people in a safer situation than going to the grocery store or gas station.

While this is our plan, it is subject to change at our discretion. We rely on volunteers and cannot be held liable for a flawless execution of this plan, but in a spirit of cooperation and concern for our community, we will do our best.

We understand that certain essential businesses have been allowed to remain open during the pandemic. While the government has not deemed churches essential, I would remind our government officials that for people of faith, our faith is more essential than food and gas. A brief overview of our history clearly demonstrates that Christians are willing to be imprisoned and killed for their faith. We have complied with the guidelines to this point and wish to continue to do so, provided they are reasonable.

It is time to begin the reopening process, and we expect our government leaders to not abuse the willingness the American people have demonstrated to observe the guidelines and orders. Thank you for your consideration.

Sincerely yours,

[Signature]

Pastor Joel Morris
Lead Pastor
From: Donna Newcombe <donnanewc@gmail.com>
Sent: Monday, April 20, 2020 4:32 PM
To: Mark Albertson <malbertson@co.lake.or.us>
Subject: Church startup.

[EXTERNAL]
Speaking for Lakeview Ministries I would say we begin small. Allow our groups of less than 15 to meet. This would include prayer groups, Celebrate Recovery, Bible studies. Suggest those with compromised health and over 80 remain at home. When able to meet in larger groups and the weather is good we could meet outside in a backyard. We do communion so would use the disposable cups that contain juice and bread. I am not big on masks but if required we could do that except for speakers and those leading worship. That it it for now.

Thanks for doing this. I am concerned for our community.

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April 20, 2020

To: Mark Albertson

From: Casey Thames, Preschool Director and Church Office Manager

Business: Little Ones Christian Preschool, a ministry of First Baptist Church, 910 N. 2nd Street, 541-947-2614.

Business information: A Private Preschool program. Twenty enrolled students. Three teachers. Hours are from 8:00-11:30 a.m. Tuesdays, Wednesdays, and Thursdays.

Plan: For the first 2 weeks ten children will come on Monday and Tuesday, then the other ten would come on Wednesday and Thursday. Surfaces and toys would be sanitized between classes. Children are already supervised for good hygiene practices. At dismissal time we would take the kids outside for pick up.

After initial 2 weeks classes would resume as normal.

We already have a policy in place for not sending a child to school that is sick or that has an immediate family member that is sick.

Business: First Baptist Church

Business information: Church services are held on Sunday mornings with an average attendance of 100 people.

Plan: Our church will follow reasonable guidelines provided by Federal, State and local authorities for restarting our ministries. We will encourage our people to use good common sense: wash your hands on a regular basis and stay home if you are sick.
From: Joseph Juvenal <josephjuvenal@aim.com>
Sent: Monday, April 20, 2020 10:44 AM
To: Mark Albertson <malbertson@co.lake.or.us>
Subject: Opening.

[EXTERNAL]
Mark.
Our church, Lakeview Trinity Baptist Church, will simply spread people out, both as they enter and as they are seated. We will also mail and email instructions and announce via Social Media, for entering, separating, washing hands and have sanitizers readily available. There will in addition, be advisories to STAY HOME if they have symptoms. All team members and staff will practice separation.

Thanks,
Pastor Joseph R Juvenal

[EXTERNAL]: This message came from outside our organization. Please exercise caution when clicking on any links or attachments. If you are concerned about a message, please email support@co.lake.or.us
Mark thank you so much for your effort to get our economy going again. We have suffered over $26,000 in lost revenue from just our motel trade in just three weeks. This does not include our restaurant business. As you well know most small businesses in Lake County are suffering great financial hardships and I fear if we do not get our county back on track very soon we will have several businesses go bankrupt. So I urge you to, as much as is possible apply the most amount of pressure onto the Governor's office to get our state opened back up. Current models are not coinciding with the reality of Lake County. I believe each county knows what they need to open up and be safe.

So, onto our specific business plan to re-open:

First I must tell you we have been in operation for over 26 years and have not had a single violation or complaint filed on our operation.

Our motel is currently in operation and we are following CDC guidance for this type of business operation. All of our rooms are scrubbed and sanitized after each guest(s) stay. We also dry all blankets and spreads to the CDC guidance for killing viruses on bedding (28 minutes on temperature setting of HIGH) along with the bedding after it is washed. All hard surfaces such as door knobs, sinks and handles, remotes etc. are sprayed with a CDC approved disinfectant and wiped down as well. Our room cleaners use disposable gloves for each room cleaning and the outside door knob is again disinfected upon finishing the room. All door keys are run through a commercial dishwasher and sanitized.

Restaurant: Our restaurant has a 40 seat capacity. We also have a 20 seat separate meeting room. Our plan is to open the main dining room to no more than 15 by reservation only. We will move our tables to provide at least 10 feet spacing between each table and have a central table for food distribution to the patrons. Our servers will have the proper CDC guidance PPE on and when the order is ready they will take the plates out to the food distribution table and advise the patron that their order is ready, keeping the "social distancing" guidance in place. Server will disinfect food distribution table and make it ready for the next order. Chefs will continue to use the established best practice industry standards for food preparation. We will accommodate walk in guests by seating them in our meeting room. This meeting room has it's own entrance and exit so "social distancing" can still take place. Same set up will be available in the meeting room to distribute food orders.

Credit card purchases will be encouraged and "social distancing" will occur at the cash register as well, much like the retail stores are accomplishing now. We will don and doff disposable gloves for each transaction.
If you have any questions give me a call
541-219-1790 or email me

Thanks again for your efforts!!

Gary Brain

[EXTERNAL]: This message came from outside our organization. Please exercise caution when clicking on any links or attachments. If you are concerned about a message, please email support@co.lake.or.us
Hi Mark. My name is Dorothy Anderson and I am a co-owner of The Lodge restaurant/bar in Christmas Valley. Our plan once we are able to re-open is to limit our seating capacity to no more than 10 people (will increase that number when given permission to). Will remove tables and chairs and keep a limited amount in the restaurant and bar. We will continue as we have all along to keep sanitizing every area of the building (kitchen equipment, counters, tables, seats, bathrooms, door handles, etc.) Will use gloves while preparing food and if need be wear masks or some other item to cover mouth and nose. If you feel that we need to do more, please let me know. Thank you!!

[EXTERNAL]: This message came from outside our organization. Please exercise caution when clicking on any links or attachments. If you are concerned about a message, please email support@co.lake.or.us
Sent from Mail for Windows 10

Dear Mark,

Thank you for the opportunity to express my views on some essential/non-essential businesses.

As the licensed owner and sole operator of Outback Hair Co. I would like to address the fact that hair and nail salons are not always non-essential businesses.

I have an older clientele, several of whom are physically unable to shampoo their own hair or trim their own toenails. Many of these people have no assistance at home and Home Health organizations are not interested in performing these services alone. This presents it’s own set of health issues, one of the most dangerous being infection from open sores caused by scratching of itching scalps or rubbing of untrimmed toenails on skin.

As licensed hair/nail techs we have been very well trained in different levels of sanitation and how to deal with each circumstance. We already practice these essential sanitation measures faithfully throughout each working day as a means of preventing spread of infection and disease.

I believe most adults in this country are aware of the dangers of any type of infection in the elderly. Those of us working in these professions need only add a few simple steps to insure our clients safety. We already sanitize any tools and implements that touch the client. It would be a short step to add things like sanitizing door knobs, arms of chairs, and anything else the client touches, along with the possible use of masks in the salon.

We love our clientele and NONE OF US want to be responsible for their illness, or even possibly their death. Many of them desperately need our help. Please consider allowing us to reopen.

Sincerely,
[EXTERNAL]: This message came from outside our organization. Please exercise caution when clicking on any links or attachments. If you are concerned about a message, please email support@co.lake.or.us
From: Mark Albertson  
Sent: Tuesday, April 28, 2020 5:53 PM  
To: Daniel Tague  
Subject: Fw: The Mane Event-Shelby Sutfin

From: shelby warner <llrocket01@yahoo.com>  
Sent: Monday, April 20, 2020 5:42 PM  
To: Mark Albertson <malbertson@co.lake.or.us>  
Subject: The Mane Event-Shelby Sutfin

[EXTERNAL]
Hello! With my salon Kit & I will be wearing masks, disinfecting after each client, getting rid of magazines, and only having 1 client each in the shop at a time. Clients will be asked to stay home if they have any symptoms of sickness. As of right now this is all we can think of but once we can get back to work we may come up with more & better ideas. Thank You!

Sent from Yahoo Mail on Android

[EXTERNAL]: This message came from outside our organization. Please exercise caution when clicking on any links or attachments. If you are concerned about a message, please email support@co.lake.or.us
Custom & Blank Apparel / Promo Products

To: Mark Albertson, Lake Co. Commissioner

This is what we will do to keep ourselves and our customers safe when visiting our store.

Wipe down our front door & counters with disinfectant before we open and after customers leave. We also will practice social distancing (avoiding direct contact) when there are more than three (3) customers in the store. We will continue to disinfectant all packages delivered to us. The store will be open from 10AM to 4PM - 1 hour for lunch.

With the above practice, we feel confident we can serve our customers safely

We have had very little business since the start of this virus as we have been closed...we must be able to open or our future is in question.

Thank You
Darryl & Beverly Bender
Owner
From: Amanda O'Bryan <shamrockranch1@gmail.com>
Sent: Monday, April 20, 2020 4:34 PM
To: Mark Albertson <malbertson@co.lake.or.us>
Subject: 5 Corner Feed & Supply Safety Steps

[EXTERNAL]

Good Afternoon Mark,

Thank you so much for working on a county wide plan to get more businesses up and going again. While the feed store has been able to stay open, it has not been without challenges. Some have involved politics, and some have involved company policies of catering to larger businesses over smaller Mom and Pop shops, a problem that I think negatively effected small businesses throughout the state and country (I also have the corporate emails that show this policy). But as far as health and Safety goes, we have made some adjustments but due to the nature of our business we really didn’t have to make too many changes. Below are the things we are doing and or have always done to help maintain healthy but reasonable business practices. If there is a * at the end of the item, it is a practice that has always been done.

- Credit card machine, pens and counter tops are wiped down more frequently, usually after every customer but when things get really crazy, it doesn't happen each time.*
- All door handles and edges of doors are wiped down throughout the day.
- Hand sanitizer is out on the counter and available to anyone who wants it. *
- Customers are able to call in their orders or message what they would like, Card transactions can be taken over the phone if desired.*
- On nice days, the doors are left open.*
- We have expanded the days we deliver from Wednesdays to Wednesdays and Thursdays.
- For those not comfortable with coming in or coming by after hours, if they call in their orders we can either set it out for them outside the door or deliver it. *
- If an employee is not feeling well, they are encouraged to go home.*
- Limiting the number of customers and employees in each building to no more than 10 in each building, to increase if restrictions and or guidelines allow.
- Tape has been put down on the floors to demonstrate what 6’ apart from each other are, however, please see below for further on that matter.

As for the tape matter, this will only be temporary as we are getting ready to put new flooring down and we will not be putting tape down on the brand new flooring. Additionally considering the rancher mentality, we will not be actively enforcing this guideline if it appears that the customers are comfortable with each other. Or choose to sit and have a cup of coffee with their fellow rancher. I am not asking my employees to wear masks. They are more than welcome to if it makes them more
comfortable, however for me personally, they make me feel extremely claustrophobic and I have a hard
time breathing in them so for that reason, I would not require that from someone else. If I am not
comfortable others may not be as well.

We have a grafting class scheduled for May 2nd, I am thinking I might have to postpone it but would
rather not if I don’t have too, so I would like to know your opinion (I won’t hold you to it) on whether or
not you think some of these restrictions will be lifted by then. We will have about 30 people and it will
be held outside so for the most part, the 6 feet of social distancing can be maintained. The only time it
won’t is when I am helping individual participants with their grafts.
Kind Regards,
Amanda O’Bryan

Virus-free. www.avg.com

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or attachments. If you are concerned about a message, please email support@co.lake.or.us
From: meghan kness <megkness@gmail.com>
Sent: Monday, April 20, 2020 10:46 AM
To: Mark Albertson <malbertson@co.lake.or.us>
Subject: Affordable Fitness

[EXTERNAL]
Plan to re-open

10 (or whatever the limit is) people only every hour by appointment / drop in if space allows it

I will be there during hours of operation (instead of 24 hour access )

Everyone will get their own bottle and towel to sanitize

I will clean and sanitize between hourly appointments

Waivers that they haven’t felt sick or been around anyone sick (probably just need to sign once a week or so?)

This is going to be super hard with the kids home as well but Hopefully short lived for now.

You do know that there is rarely ever more then 10 people on the gym at one time anyways!

Thank you for all your help Mark! Your the greatest

---

Meghan Kness
541-892-8331
Affordable Fitness

[EXTERNAL]: This message came from outside our organization. Please exercise caution when clicking on any links or attachments. If you are concerned about a message, please email support@co.lake.or.us.
REOPENING MODOC COUNTY STRATEGIC PLAN

Supported by Modoc County Health Officer, Modoc County Board of Supervisors, Modoc County Health Services, Modoc County Office of Emergency Services and Modoc County Sheriff’s Office

Modoc County has coordinated with partners to strategically plan a staged reopening of the County. Support from our communities, social obligation and personal responsibility is critical for the success of the reopening plan. The safety and health of Modoc County residents is the most important decision-making guide during the MODOC COVID-19 Incident and remains our number one objective.

As of May 1, 2020, Modoc County will implement the following guidelines and steps to reopen to a pre-COVID-19 state. Modoc County has zero confirmed cases.

All residents must adhere to:

- Proper social distancing with 6 feet of space between one another in public.
- Washing hands frequently and thoroughly.
- Staying home if sick or not feeling well.
- Proper sanitation practices and protocols are followed at all facilities.
- All residents 65 or older or having underlying health conditions should continue to self-isolate.
- No large gatherings where proper social distancing cannot be maintained.

Beginning May 1, 2020,

- All businesses non-essential and essential may open but must be able to adhere to the above guidelines.
- Schools, churches and private and government sectors may also return if above guidelines can be followed.
- Public transit companies may return to operations if social distancing guidelines above can be followed.
- Restaurants and bars may open inside dining but may only be at half-capacity of their maximum occupancy with frequent cleaning and proper sanitation.
- Dental services and routine medical may resume services under the advised PPE guidelines.

Residents currently living in the County equal to or older than 65 years of age or residents with underlying health conditions are being asked to stay in their place of residence and must at all times follow the above guidelines to the greatest extent feasible. Such residents may leave for essential business only.
Non-essential travel is strongly discouraged. Residents traveling out of county should do so for essential purposes only. Extra preventative measures should be practiced. Similarly, travel from out of County residents into Modoc County is strongly discouraged.

Residents are encouraged to participate in outdoor recreation activities daily. Travel for these activities should be kept to a minimum and within Modoc County.

The CDC is recommending that residents wear cloth face masks in public in an effort to prevent transmission of COVID-19. Wearing a mask does not reduce your risk of exposure to the virus. Wearing a mask reduces the transmission of COVID-19.

Modoc County has resources to perform contact investigations on all confirmed COVID-19 cases, capabilities to handle medical surge as needed and adequate supplies to test for COVID-19.

The Modoc County Health Officer along with Modoc County Health Services, Modoc County Office of Emergency Services and the Modoc County Sheriff have set up determined trigger points and appropriate actions to those points.

As we move through this staged approach to reopen our County we will include reasoning where we may need to reinitiate previous measures. Guidelines will be assessed and rescinded as necessary, but businesses will remain open at the discretion of the County Health Officer.

Examples of reasons to revert to previous measures may be:

- Confirmation of 2+ confirmed cases of COVID-19 in County.
  - Number of positive cases will be based on findings of contact investigation and the amount of exposure risk to residents.
- Medical surge that overloads County medical facilities and resources.
- Substantially increased death rate within County.

Residents in that vulnerable population should stay at home until May 15th. If on May 15, 2020, Modoc County remains with zero confirmed cases of COVID-19 the stay at home order for the vulnerable population will be reevaluated. If after two weeks of continued zero or minimal exposure of a positive case, social distancing guidelines in place would be reevaluated June 1, 2020. The County Health Officer will reassess and have new guidelines to abide by as necessary by May 15, 2020 and June 1, 2020.

The health and safety of Modoc County residents is and continues to be our number one priority. This Reopening plan was made in the best interest of residents physical, mental and economic health. If you have questions about preventative measures or proper steps to follow the guidelines within your business, organization or office, please call 233-1350.

All County guidance will follow orders directed at the state and federal level at all times. This plan may be subject to change as direction from state and federal levels are updated.
Reopening Modoc County Strategic Plan
Dated: April 28, 2020
April 30, 2020

The Lake County Board of Commissioners, Public Health Director, Public Health Officer, and Lake County Emergency Manager all approve of the Lake County Reopening Plan based on the Governor's Public Health Framework for Reopening Oregon.

Sincerely,

Bradley J. Winters
Lake County Chair

James Williams
Lake County Vice Chair

Mark Albertson
Lake County Commissioner

Judy Clarke
Public Health Director

Spencer Clarke
Public Health Officer

Daniel Taque
Lake County Emergency Manager
April 30, 2020

Commissioners of Lake County
513 Center Street
Lakeview, OR 97630

Dear Commissioners,

I received an email from Lesa Cahill, FNP today representing the Medical Staff of Lake Health District. She indicates that the doctors approved your submitted draft for the Reopening Plan for Lake County without changes. They did recommend that, “people with chronic illnesses (significant pulmonary history, diabetes, heart disease) and people over the age of 70 continue to self-isolate.” I don’t think that advice can be overstated. Although we have not yet had any positive cases in Lake County, our neighbors to the north and west have. It is only a matter of time before we start seeing positive cases here. As a public health office, we understand the economic needs of our community and hope to find a balance with the health and wellbeing of its citizens. As such, Lake County Public Health is following the recommendations of the Medical Staff of Lake Health District in approving the submitted Reopening Plan for Lake County.

Spencer Clarke, MD
Medical Officer, Lake County Public Health
100 N D Street, Suite 100
Lakeview, OR 97630
LDH Medical Staff
Address to Lake County Residents
RE: COVID - 19

The Lake County Medical community’s update on COVID – 19: 4/30/20

Again, the medical staff would like to thank all of Lake County for your great work in social distancing and wearing of face masks while in public. We still do not have any confirmed cases in Lake County.

We are moving forward and anticipate following the Governor’s plan and believe we have met the criteria for Phase 1 of the plan. We do recommend that people with chronic illnesses (significant pulmonary history, diabetes, heart disease) and people over the age of 70 continue to self-isolate.

Again, thank you for all your help and cooperation during these trying times. Please keep up the good work!

Dr. Steven Hussey
Dr. Tim Gallagher
Dr. Matt Foster
Dr. Scott Graham