



**WORK SAFE, STAY HOME, THIRD AMENDMENT TO ORDER NO. 8
BY THE COUNTY JUDGE OF EL PASO COUNTY, TEXAS**

DELIA BRIONES
COUNTY CLERK
EL PASO COUNTY, TEXAS

DATE ORDER ISSUED: MAY 21, 2020

WHEREAS, on May 18, 2020, Texas Governor Greg Abbott announced plans to further re-open sectors of Texas effective May 18, 2020, May 22, 2018, and May 31, 2020; and

WHEREAS, Governor Abbott also announced El Paso County would delay the opening of businesses set to reopen throughout Texas as of May 22, 2020 until May 29, 2020; and

WHEREAS, this Amendment (“Amendment No. 3”) is intended to align with Governor Abbott’s Executive Order No. 23 (“GA-23”) and the Governor’s Open Texas Checklists, as revised; and

WHEREAS, this Amendment No. 3 addresses services to be reopened according to GA-23; businesses may not reopen until their respective reopen date as stated in this Order; and

WHEREAS, all other provisions in Order No. 8, including the First Amendment and Second Amendment to the same, that have not been amended shall remain in full force and effect; and

NOW THEREFORE, I, COUNTY JUDGE FOR EL PASO COUNTY, TEXAS PURSUANT TO THE AUTHORITY VESTED BY TEXAS GOVERNMENT CODE CHAPTER 418, HEREBY FIND AND ORDER:

1. That SECTION 2 (Restricted Activities), Paragraph b be amended to read as follows:
 - b. **County Facilities.** The following describe outdoor areas and activities that are closed and therefore restricted until further directed by El Paso County: all parks and recreational areas and facilities, including tennis courts, basketball courts, public swimming pools, water parks, splash pads, zoos, public museums and public libraries. The area near Socorro Independent School District Student Activities Complex (“SAC”) located near 1300 Joe Battle Boulevard remains closed and is therefore restricted. The use of any type of recreational vehicle at any outdoor area listed in this paragraph is prohibited. For clarity, County parks will remain closed except for use of designated paths adjacent to streets, parks, or within public parks.
2. That SECTION 2 (Restricted Activities), Paragraph d be amended to read as follows:
 - d. Interactive amusement venues such as video arcades, amusement parks, and water parks **shall remain closed, except to the extent any of the businesses referenced in this Order offer reopened services permitted in Section 4, such as restaurant services, or carry on Minimum Basic Operations as defined in this Order.**

3. That SECTION 4 (Re-Opening of Businesses and Retail to Go), Paragraph a (Reopening of Businesses), sub-paragraph 2 be amended to read as follows:
 2. The below businesses may operate as follows:
 - a. Non-CISA retailers that operate at up to 25 percent of the total listed occupancy of the retail establishment. See **Exhibit G**, Minimum Standard Health Protocols for Retailers and Retail Customers, County Judge Order No. 8.
 - b. Dine-in restaurant services, for restaurants that operate at up to 25 percent of the total listed occupancy of the restaurant; provided, however, that (a) this applies only to restaurants that have less than 51 percent of their gross receipts from the sale of alcoholic beverages, (b) the occupancy limits do not apply to customers seated in outdoor areas of the restaurant, and (c) valet services are prohibited except for vehicles with placards or plates for disabled parking. **Effective 12:01 a.m. on Friday, May 29, 2020**, the occupancy limitation increases to 50% of the total listed occupancy inside the restaurant. See **Exhibit H**, Minimum Standard Health Protocols for Restaurants and Restaurant Customers, County Judge Order No. 8.
 - c. Movie theaters that operate at up to 25 percent of the total listed occupancy of any individual theater for any screening. See **Exhibit I**, Minimum Health Standard Protocols for Movie Theaters and Movie Theater Customers, County Judge Order No. 8.
 - d. Shopping malls that operate at up to 25 percent of the total listed occupancy of the shopping mall; provided, however, that within shopping malls, the **food court dining areas, play areas, video arcades and interactive displays and settings must remain closed**, until further ordered or directed.
 - e. Office-based services. Non-CISA services provided by office workers in offices that operate at up to the greater of (i) ten individuals, or (ii) 25 percent of the total office workforce; provided, however, that the individuals maintain appropriate social distancing. See **Exhibit U**, Minimum Standard Health Protocols for Office-Based Employees, Third Amendment to County Judge Order No. 8.
 - f. Golf course operations. See **Exhibit E**, Guidance on Golf Course Operations, County Judge Order No. 8.
 - g. Local government operations, including county and municipal governmental operations relating to permitting, recordation, and document filing services, as determined by the local government.
 - h. Wedding venues and the services required to conduct weddings; provided, however, that for weddings held indoors other than at church, congregation, or house of worship, the facility may operate at up to 25 percent of the total listed occupancy of the facility. See **Exhibit M**, Minimum Standard Health Protocols for Wedding Venues and Wedding Attendees, Second Amendment to County Judge Order No. 8.
 - i. Wedding reception services, for facilities that operate at up to 25 percent of the total listed occupancy of the facility; provided, however, that the occupancy limits do not apply to the outdoor areas of a wedding reception or to outdoor wedding receptions. See **Exhibit N**, Minimum Standard Health Protocols for Wedding Reception Venues and Wedding Reception Attendees, Second Amendment to County Judge Order No. 8.

- j. Cosmetology salons, hair salons, barber shops, nail salons/shops, and other establishments where licensed cosmetologists or barbers practice their trade; provided, however, that all such salons, shops, and establishments must ensure at least six feet of social distancing between operating work stations. See **Exhibit O**, Minimum Standard Health Protocols for Barber Shops and Barber Shop Customers, **Exhibit P**, Minimum Standard Health Protocols for Cosmetology/Hair Salons and Cosmetology/Hair Salon Customers, and **Exhibit Q**, Minimum Standard Health Protocols for Nail Salons/Shops and Nail Salon Customers, Second Amendment to County Judge Order No. 8.
- k. Tanning salons; provided, however, that all such salons must ensure at least six feet of social distancing between operating work stations. See **Exhibit R**, Minimum Standard Health Protocols for Tanning Salons and Tanning Salon Customers, Second Amendment to County Judge Order No. 8.
- l. Swimming pools, as determined by each pool owner; provided, however that (i) indoor swimming pools may operate at up to 25 percent of the total listed occupancy of the pool facility; (ii) and outdoor swimming pools may operate at up to 25 percent of normal operating limits as determined by the pool operator. See **Exhibit V**, Minimum Standard Health Protocols for Parks, Beaches, Bodies of Water, Third Amendment to County Judge Order No. 8.
- m. Non-CISA manufacturing services, for facilities that operate at up to 25 percent of the total listed occupancy of the facility. Non-CISA manufacturing services are those operations that do not fall under Section 7(n) or (u). See **Exhibit T**, Minimum Standard Health Protocols for Non-Essential Manufacturers, Second Amendment to County Judge Order No. 8.
- n. Gyms and exercise facilities and classes that operate at up to 25 percent of the total listed occupancy of the gym or exercise facility; provided, however, that locker rooms and shower facilities must remain closed, but restrooms may open. See **Exhibit S**, Minimum Standard Health Protocols for Gyms/Exercise Facilities and Gym/Exercise Facility Patrons, Second Amendment to County Judge Order No. 8.
- o. **Starting at 12:01 a.m. on Friday, May 29, 2020:**
 - i. Massage establishments and other facilities where licensed massage therapists or other persons licensed or otherwise authorized to practice under Chapter 455 of the Texas Occupations Code practice their trade; provided, however, that all such facilities must ensure at least six feet of social distancing between operating work stations. See **Exhibit W**, Minimum Standard Health Protocols for Massage and Personal-Care, Beauty Services and Massage and Personal-Care, Beauty Service Customers, Third Amendment to County Judge Order No. 8.
 - ii. Personal-care and beauty services that have not already been reopened, such as tattoo studios, piercing studios, hair removal services, and hair loss treatment and growth services; provided, however, that (i) all such facilities must ensure at least six feet of social distancing between operating work stations; and (ii) to the extent such services are licensed or otherwise regulated by Texas law, such services may operate only as permitted by Texas law. **Exhibit W**, Minimum Standard Health Protocols for Massage and Personal-Care, Beauty Services and Massage and

Personal-Care, Beauty Service Customers, Third Amendment to County Judge Order No. 8.

- iii. Child-care services other than youth camps as described below; provided, however, that to the extent such services are licensed or otherwise regulated by Texas law, such services may operate only as permitted by Texas law. **Exhibit X**, Minimum Standard Health Protocols for Child Care Centers and Child Care Families; Third Amendment to County Judge Order No. 8.
- iv. Bars and similar establishments that are not restaurants as defined above, that hold a permit from the Texas Alcoholic Beverage Commission, and that are not otherwise expressly prohibited in GA-23 or this Amendment No. 3, for such establishments that operate at up to 25 percent of the total listed occupancy of the establishment. **Exhibit Y**, Minimum Standard Health Protocols for Bars and Bar Patrons, Third Amendment to County Judge Order No. 8.
- v. Bowling alleys, bingo halls, simulcast racing to the extent authorized by state law, and skating rinks that operate at up to 25 percent of the total listed occupancy of the establishment; provided, however, that (i) bowling alleys must ensure at least six feet of social distancing between operating lanes. **Exhibit Z**, Minimum Standard Health Protocols for Bowling Alleys, Bingo Halls, Simulcasting, Skating Rinks and Bowling, Bingo, Simulcasting, Skating Customers, Third Amendment to County Judge Order No. 8.
- vi. Rodeos and equestrian events that operate at up to 25 percent of the total listed occupancy or, for outdoor areas, at up to 25 percent of the normal operating limits as determined by the facility owner; provided, however, that this authorizes only the rodeo or equestrian event and not larger gatherings, such as county fairs in which such an event may be held. **Exhibit AA**, Minimum Standard Health Protocols for Rodeo/Equestrian Events, Third Amendment to County Judge Order No. 8.
- vii. Drive-in concerts, under guidelines that facilitate appropriate social distancing, that generally require spectators to remain in their vehicles, and that minimize in person contact between people who are not in the same household or vehicle.
- viii. Amateur sporting events (i) at which there is no access to the general public allowed; and (ii) for which all participants have tested negative for COVID-19 prior to the event, are quarantined for the duration of the event, are temperature checked and monitored for symptoms daily, and are tested again for COVID-19 at the end of the event.
- ix. Youth clubs such as Boy Scouts, Girl Scouts, TOP Teens (of TOP Ladies of Distinction), FFA and Girls Inc. may hold meetings. **Exhibit BB**, Minimum Standard Health Protocols for Youth Clubs and Youth Club Participants, Third Amendment to County Judge Order No. 8.

p. Starting at 12:01 a.m. on Sunday, May 31, 2020

- i. Professional basketball, baseball, softball, golf, tennis, football, and car racing events, with no spectators physically present on the premises of the venue, as approved on a league-by-league basis by DSHS, in consultation with the Office of the Governor and any recommendations by the advisory Strike Force to Open Texas, based on whether the league has submitted a plan that applies to all events and that meets the minimum health and safety standards; provided, however, that each league must submit, along with a request for approval in the manner prescribed by DSHS, a plan that incorporates applicable minimum standard health protocols recommended by DSHS, as applicable, and such additional measures as are needed to ensure a safe plan for conducting the event. **Exhibit CC**, Minimum Standard Health Protocols for Professional Sports Without In-Person Spectators, Third Amendment to County Judge Order No. 8.
 - ii. Youth camps, including, but not limited to, those defined as such under Chapter 141 of the Texas Health and Safety Code and including all summer camps and other daytime and overnight camps for youths. **Exhibit DD**, Minimum Standard Health Protocols for Day Youth Camp Operators and Day Youth Camp Families, Third Amendment to County Judge Order No. 8 and **Exhibit EE**, Minimum Standard Health Protocols for Overnight Youth Camp Operators and Overnight Youth Camp Families, Third Amendment to County Judge Order No. 8.
 - iii. Youth sports programs; provided, however that practices may begin, but games and similar competitions may not begin until **June 15, 2020**. **Exhibit FF**, Minimum Standard Health Protocols for Youth Sports Operators and Youth Sports Families, Third Amendment to County Judge Order No. 8.
 - q. Such additional services as may be enumerated by future executive orders or proclamations by the Governor.
 - r. For clarity, the conditions and limitations set forth above for reopened services shall not apply to Essential Services, Essential Government Functions, and Essential Businesses as described respectively in Section 5, 6, and 7 of this Order. The total listed occupancy limits described above refer to the maximum occupant load set by local law. For purposes of this Order, staff members and contractors are not counted in determining percentage operating levels, except for non-essential manufacturing service providers and services provided by office workers. The “total listed occupancy” limits do not apply to outdoor areas, events, facilities, or establishments. Additionally, valet services are prohibited except for vehicles with placards or plates for disabled parking.
 - s. Within any of the above reference entities, interactive functions or exhibits, including child play areas, interactive games, and video arcades must remain closed.
4. That SECTION 7 (Essential Businesses), Paragraph v (Daycare Facilities) be amended **Effective May 29, 2020 at 12:01 a.m.** to read as follows:

v. Adult Daycare Facilities. Adult Daycare facilities are limited to providing services that enable employees exempted in this Order to work as permitted. To the extent possible, adult daycare facilities must operate under the following mandatory conditions.

1. Adult Daycare must be carried out in stable groups of 10 or fewer (“stable” means that the same 10 or fewer adult care recipients are in the same group each day).
2. Adult Care recipients shall not change from one group to another, unless there is a closure of an adult daycare facility that requires an adult care recipient to be placed in a new adult daycare facility. Adult Care recipients coming from facilities that may have closed shall be grouped together in one group, when possible.
3. If more than one group of adult care recipients is cared for at one facility, each group shall be in a separate room. Groups shall not mix with each other.
4. Adult daycare providers shall remain solely with one group of care recipients.
5. All Adult Daycare providers are required to: train employees on environmental cleaning and disinfection, hand hygiene, and respiratory etiquette, screen employees before coming into the work facility for new or worsening cough, shortness of breath or difficulty breathing, chills, repeated shaking with chills, muscle pain, headache, sore throat, loss of taste or smell, diarrhea, feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit or had known close contact with a person who is lab-confirmed to have COVID-19; send home any employee that meets the previously listed criteria; have all employees wash or sanitize hands prior to entering the business; ensure all employees wear face coverings; and ensure employees maintain at least 6 feet of separation from one another.

Adult Daycare facilities are urged, when possible, to close and to deliver in-home services, including personal care, medication management, meal delivery and other essential needs for

5. That **a new SECTION 15 (Evictions)**, be added to Order No. 8 as follows:

The County Judge deems it is necessary to incorporate by reference any orders and directives issued by the El Paso County Justices of the Peace regarding evictions and notices to vacate, attached as **Exhibit GG**, Third Amendment to County Judge Order No. 8.

Any previous orders or directives referencing evictions is superseded by this section.

6. That SECTION 13 (Incorporation of Exhibits), be amended to read as follows and add Exhibits U-HH which are attached hereto and incorporated into the Third Amendment to Order No. 8 as if fully stated in this Order.

SECTION 13 (Incorporation of Exhibits), be amended to add the following Exhibits which are attached hereto and incorporated into the Third Amendment to County Judge Order No. 8 **and mandates** compliance therewith:

Exhibit A: Minimum Standard Health Protocols for All Individuals

Exhibit B: Special Guidance for Texans Over 65

Exhibit C: Face Covering Recommendations

Exhibit D: Recommendations for Nursing Facilities

Exhibit E: El Paso Local Health Authority Golf/Tennis Guidelines

Exhibit F: Minimum Standard Health Protocols for Outdoor Sports Participants

Exhibit G: Minimum Standard Health Protocols for Retailers and Retail Customers

Exhibit H: Minimum Standard Health Protocols for Restaurants and Restaurant Customers

Exhibit I: Minimum Standard Health Protocols for Movie Theaters and Movie Theater Customers

Exhibit J: Reserved

Exhibit K: Minimum Standard Health Protocols for Churches/Places of Worship

Exhibit L: Supreme Court of Texas 12th Emergency Order Regarding COVID-19 State of Disaster

Exhibit M: Minimum Standard Health Protocols for Wedding Venues and Wedding Attendees

Exhibit N: Minimum Standard Health Protocols for Wedding Reception Venues and Wedding Reception Attendees

Exhibit O: Minimum Standard Health Protocols for Barber Shops and Barber Shop Customers

Exhibit P: Minimum Standard Health Protocols for Cosmetology/Hair Salons and Cosmetology/Hair Salon Customers

Exhibit Q: Minimum Standard Health Protocols for Nail Salons/Shops and Nail Salon Customers

Exhibit R: Minimum Standard Health Protocols for Tanning Salons and Tanning Salon Customers

Exhibit S: Minimum Standard Health Protocols for Gyms/Exercise Facilities and Gym/Exercise Facility Patrons

Exhibit T: Minimum Standard Health Protocols for Manufacturers

Exhibit U: Minimum Standard Health Protocols for Office-Based Employees

Exhibit V: Minimum Standard Health Protocols for Parks, Beaches, Bodies of Water

Exhibit W: Minimum Standard Health Protocols for Massage and Personal Care, Beauty Services and Massage and Personal-Care, Beauty Service Customers

Exhibit X: Minimum Standard Health Protocols for Child Care Centers and Child Care Families

Exhibit Y: Minimum Standard Health Protocols for Bars and Bar Patrons

Exhibit Z: Minimum Standard Health Protocols for Bowling Alleys, Bingo Halls, Simulcasting, Skating Rinks and Bowling, Bingo, Simulcasting, Skating Customers

Exhibit AA: Minimum Standard Health Protocols for Rodeo/Equestrian Events

Exhibit BB: Minimum Standard Health Protocols for Youth Clubs and Youth Club Participants

Exhibit CC: Minimum Standard Health Protocols for Professional Sports Without In-Person Spectators

Exhibit DD: Minimum Standard Health Protocols for Day Youth Camp Operators and Day Youth Camp Families

Exhibit EE: Minimum Standard Health Protocols for Overnight Youth Camps Operators and Overnight Youth Camp Families

Exhibit FF: Minimum Standard Health Protocols for Youth Sports Operators and Youth Sports Families

Exhibit GG: 4th Standing Order, El Paso County Justices of the Peace

Exhibit HH: Reopening Texas Timelines Executive Order GA-23.

Any reference in the Order, as amended, to “Exhibits”, shall mean that Exhibit, as amended by the Governor, and as available at <https://gov.texas.gov/organization/opentexas>, or as amended by the issuing entity, when applicable.

7. **Except as amended in this Order, the April 29, 2020 County Judge Order No. 8, April 30, 2020 First Amendment, and May 7, 2020 Second Amendment to the same, shall otherwise remain in full force and effect unless superseded by a conflicting state or federal law or order.**
8. Except as specifically stated herein, or unless the openings detailed in this Order are delayed pursuant to a subsequent Executive Order or Proclamation by the Texas Governor, this Amendment No. 3 shall take effect immediately.

ORDERED this the 21st day of May, 2020.

COUNTY OF EL PASO, TEXAS



Ricardo A .Samaniego,
El Paso County Judge

Exhibit U
Minimum Standard Health Protocols for Office-Based Employers and Office-Based Employees

as Outlined by the

Governor's Strike Force

EFFECTIVE IN EL PASO IMMEDIATELY

Unless Modified by Subsequent Executive Order or County Judge Order

Employers may operate their offices with up to the greater of 10 individuals or 25% of the total office workforce, provided the individuals maintain appropriate social distancing.

The following are the minimum recommended health protocols for all office work employers choosing to operate in Texas. Office work employers may adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all employees, contractors, and customers.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Office work employers should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization. Employers should also be mindful of federal and state employment and disability laws, workplace safety standards, and accessibility standards to address the needs of both workers and customers.

Health protocols for your employees and contractors:

- Train all employees and contractors on appropriate cleaning and disinfection, hand hygiene, and respiratory etiquette.
- Screen employees and contractors before coming into the office:
 - Send home any employee or contractor who has any of the following new or worsening signs or symptoms of possible COVID-19:
 - Cough
 - Shortness of breath or difficulty breathing
 - Chills
 - Repeated shaking with chills
 - Muscle pain
 - Headache

- Sore throat
 - Loss of taste or smell
 - Diarrhea
 - Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
 - Known close contact with a person who is lab confirmed to have COVID-19.
- Do not allow employees with new or worsening signs or symptoms listed above to return to work until:
 - In the case of an employee or contractor who was diagnosed with COVID-19, the individual may return to work when all three of the following criteria are met: at least 3 days (72 hours) have passed since recovery (resolution of fever without the use of fever-reducing medications); and the individual has improvement in symptoms (e.g., cough, shortness of breath); and at least 10 days have passed since symptoms first appeared; or
 - In the case of an employee or contractor who has symptoms that could be COVID-19 and does not get evaluated by a medical professional or tested for COVID-19, the individual is assumed to have COVID-19, and the individual may not return to work until the individual has completed the same three-step criteria listed above; or
 - If the employee or contractor has symptoms that could be COVID-19 and wants to return to work before completing the above self-isolation period, the individual must obtain a medical professional's note clearing the individual for return based on an alternative diagnosis.
- Do not allow an employee or contractor with known close contact to a person who is lab-confirmed to have COVID-19 to return to work until the end of the 14 day self-quarantine period from the last date of exposure (with an exception granted for healthcare workers and critical infrastructure workers).
- Have employees and contractors wash or sanitize their hands upon entering the office.
- Have employees and contractors maintain at least 6 feet separation from other individuals. If such distancing is not feasible, other measures such as face covering, hand hygiene, cough etiquette, cleanliness, and sanitation should be rigorously practiced.
- Consider implementing a staggered workforce, such as alternating days or weeks for different groups of employees and/or contractors coming into the workplace.
- Continue to encourage individuals to work remotely if possible.
- If an employer provides a meal for employees and/or contractors, the employer is recommended to have the meal individually packed for each individual.
- Consistent with the actions taken by many employers across the state, consider having all employees and contractors wear cloth face coverings (over the nose and mouth). If available, employees should consider wearing non-medical grade face masks.

Health protocols for your facilities:

- Regularly and frequently clean and disinfect any regularly touched surfaces, such as doorknobs, tables, chairs, and restrooms.
- Limit the use of standard-size elevators to four individuals at a time, each located at a different corner of the elevator to avoid close contact. Masks should be worn in elevators.

Utilize touchpoint cleaning and nanoseptic button covers if appropriate. For individuals not wishing to ride an elevator, ensure stairways are available for use. As appropriate, individuals subject to the Americans with Disabilities Act may ride the elevator alone or accompanied by the individual's caregiver.

- Disinfect any items that come into contact with customers.
- Make hand sanitizer, disinfecting wipes, soap and water, or similar disinfectant readily available to employees, contractors, and customers.
- Place readily visible signage at the office to remind everyone of best hygiene practices.
- For offices with more than 10 employees and/or contractors present at one time, consider having an individual wholly or partially dedicated to ensuring the health protocols adopted by the office are being successfully implemented and followed.

Office-Based Employees

The following are the minimum recommended health protocols for all office-based employees in Texas. These minimum health protocols are not a limit on the health protocols that individuals may adopt. Individuals are encouraged to adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all Texans.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Individuals should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization.

Health protocols for individuals:

- Individuals should avoid being in a group larger than 10 individuals. Within these groups, individuals should, to the extent possible, minimize in-person contact with others not in the individual's household. Minimizing in-person contact includes maintaining 6 feet of separation from individuals. When maintaining 6 feet of separation is not feasible, other methods should be utilized to slow the spread of COVID-19, such as wearing a face covering or mask, washing or sanitizing hand frequently, and avoiding sharing utensils or other common objects.
- Self-screen before going into an office for any of the following new or worsening signs or symptoms of possible COVID-19:
 - Cough
 - Shortness of breath or difficulty breathing
 - Chills

- Repeated shaking with chills
- Muscle pain
- Headache
- Sore throat
- Loss of taste or smell
- Diarrhea
- Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
- Known close contact with a person who is lab confirmed to have COVID-19
- Wash or disinfect hands upon entering an office and after any interaction with employees, contractors, customers, or items in the office.
- **Limit the use of standard-size elevators to four individuals at a time, each located at a different corner of the elevator, to avoid close contact. In elevators, masks should be worn. For individuals not wishing to ride an elevator, ensure stairways are available for use. As appropriate, individuals subject to the Americans with Disabilities Act may ride the elevator alone or accompanied by the individual's caregiver.**
- Consistent with the actions taken by many individuals across the state, consider wearing a cloth face covering (over the nose and mouth) upon entering the premises and when using common areas, including elevators, restrooms, break rooms, or stairs, or when within 6 feet of another person who is not a member of the individual's household. If available, you should consider wearing non-medical grade face masks.
- Carry hand sanitizer, and use it regularly, while at the office, especially after contact with individuals outside the household.

**Exhibit V:
Minimum Standard Health Protocols for Parks, Beaches, Bodies of Water
as Outlined by the
Governor’s Strike Force**

EFFECTIVE IN EL PASO IMMEDIATELY

Unless Modified by Subsequent Executive Order or County Judge Order

While parks, beaches, rivers, and lakes may be open indoor swimming pools may operate up to 25% of the total listed occupancy of the swimming pool facility and outdoor swimming pools may operate up to 25% of the normal operating limits as determined by the swimming pool owner. Swimming pools open at the discretion of the pool owner. People shall continue to avoid visiting interactive amusement venues, such as water parks and splash pads.

The following are the minimum recommended health protocols for all individuals visiting parks and engaging in water activities, such as visiting beaches, rivers, and lakes. These minimum health protocols are not a limit on the health protocols that individuals may adopt. Individuals are encouraged to adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all Texans.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Individuals should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization.

Health protocols for individuals:

- Individuals should avoid being in a group larger than 10 individuals. Within these groups, individuals should, to the extent possible, minimize in-person contact with others not in the individual’s household. Minimizing in-person contact includes maintaining 6 feet of separation from individuals. When maintaining 6 feet of separation is not feasible, other methods should be utilized to slow the spread of COVID-19, such as wearing a face covering or mask, washing or sanitizing hand frequently, and avoiding sharing utensils or other common objects.
 - Self-screen before going to a park, beach, or other public open space for any of the following new or worsening signs or symptoms of possible COVID-19:

- Cough
 - Shortness of breath or difficulty breathing
 - Chills
 - Repeated shaking with chills
 - Muscle pain
 - Headache
 - Sore throat
 - Loss of taste or smell
 - Diarrhea
 - Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
 - Known close contact with a person who is lab confirmed to have COVID-19
- Wash or disinfect hands after any interaction with employees, other customers, or items in the park, beach, river, or lake.
- Consistent with the actions taken by many individuals across the state, consider wearing cloth face coverings (over the nose and mouth) at a park, beach, river, or lake when within 6 feet of another person who is not a member of the individual's group. The individual's group may not exceed the greater of the individual's household or up to 5 individuals who arrived at the park, beach, river, or lake together. If available, individuals should consider wearing non-medical grade face masks. Face coverings may not be feasible while in the water.
- Clean and sanitize recreational water equipment before and after use.
- Special consideration for river rafting and similar activities.
 - Any vehicle used to transport individuals between places along the river must be cleaned and disinfected between uses.
 - If such a vehicle is a bus, alternate rows should be used.
 - Individuals should not sit within 6 feet of any other person not with the individual's group.
 - Individuals should sanitize hands before getting onto such a vehicle.
 - Face coverings are strongly recommended while on the vehicle.
- Individuals aged 65 or older are at a higher risk of COVID-19. To the extent possible, avoid contact within 6 feet with individuals aged 65 and older. Individuals aged 65 and older should stay at home as much as possible.

Exhibit W:

**Minimum Standard Health Protocols for Massage and Personal-Care, Beauty Services and
Massage and Personal-Care, Beauty Service Customers**

as Outlined by the

Governor's Strike Force

EFFECTIVE IN EL PASO MAY 29, 2020

Unless Modified by Subsequent Executive Order or County Judge Order

Businesses operating as massage establishments or providers of personal-care and beauty services not previously authorized to operate during the declared emergency may operate provided they can ensure at least 6 feet social distancing between operating work stations. Such businesses include but are not limited to massage establishments, other massage services by licensed massage therapists or other licensed persons, electrolysis, waxing, tattoo studios, piercing studios, and hair loss treatment and growth services. Because of the proximity between individuals in these facilities, stringent compliance with these protocols is strongly recommended.

The following are the minimum recommended health protocols for massage and other personal-care and beauty service providers choosing to operate in Texas. These operators may adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all employees, independent contractors, and customers.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Massage and other personal-care and beauty service providers should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization. These providers should also be mindful of federal and state employment and disability laws, workplace safety standards, and accessibility standards to address the needs of both workers and customers.

Getting ready to open:

- Notify employees and contractors of all COVID-19 processes and procedures and require them to sign a statement acknowledging they understand and will adhere to the guidelines.
- Screen employees and contractors before coming into the establishment:
 - Send home any employee or contractor who has any of the following new or worsening signs or symptoms of possible COVID-19:
 - Cough
 - Shortness of breath or difficulty breathing

- Chills
 - Repeated shaking with chills
 - Muscle pain
 - Headache
 - Sore throat
 - Loss of taste or smell
 - Diarrhea
 - Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
 - Known close contact with a person who is lab confirmed to have COVID-19
 - Do not allow employees or contractors with new or worsening signs or symptoms listed above to return to work until:
 - In the case of an employee or contractor who was diagnosed with COVID-19, the individual may return to work when all three of the following criteria are met: at least 3 days (72 hours) have passed since recovery (resolution of fever without the use of fever-reducing medications); and the individual has improvement in symptoms (e.g., cough, shortness of breath); and at least 10 days have passed since symptoms first appeared; or
 - In the case of an employee or contractor who has symptoms that could be COVID-19 and does not get evaluated by a medical professional or tested for COVID-19, the individual is assumed to have COVID-19, and the individual may not return to work until the individual has completed the same three-step criteria listed above; or
 - If the employee or contractor has symptoms that could be COVID-19 and wants to return to work before completing the above self-isolation period, the individual must obtain a medical professional's note clearing the individual for return based on an alternative diagnosis.
 - Do not allow an employee or contractor with known close contact to a person who is lab-confirmed to have COVID-19 to return to work until the end of the 14 day self-quarantine period from the last date of exposure (with an exception granted for health care workers and critical infrastructure workers).
- Consider implementing a screening policy for clients before they receive services.
 - For temperature checks, the preferred method is a no-contact thermometer, such as a forehead thermometer, if possible.
 - Do not use a contact thermometer on multiple persons without disposable guards or disinfection between persons.
- Provide resources and a work environment that promote personal hygiene. For example, provide tissues, hand soap, alcohol-based hand sanitizers containing at least 60 percent alcohol, disinfectants, and disposable towels for licensees to clean their work surfaces.
- Disinfectants must come from this list: <https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2>
- Provide a place to wash hands with both hot and cold water with hand soap, disposable towels, and a no-touch trash can.

Before an appointment:

- Schedule appointments to limit the amount of people in the establishment.
- Walk-in clients should wait either in their own cars or outside with at least 6 feet of separation between individuals.
- Clients should not bring extra people to the appointment, such as children.
- Only schedule the number of clients that will allow for social distancing of at least 6 feet from others.
- Consider posting a sign at the entrance to the establishment with a phone number that walk-in clients should call to schedule an appointment when they arrive.
- Only bring clients into the establishment when the provider is ready for them, to eliminate anyone needing to spend any time in the lobby or waiting area.
- Remove all unnecessary items such as magazines from the lobby or waiting area.
- Contactless payment is encouraged. Where not available, contact should be minimized.
- Signs should be posted at each entrance and at eye-level at stations notifying clients that people with symptoms of COVID-19 or who have recently been exposed to someone with symptoms must reschedule their appointment.
- Do not provide services to a client if you have reason to believe that they are sick or have a contagious condition.
- If possible, provide face coverings for clients.

Once inside the establishment:

- Do not let clients touch/handle retail supplies.
- All clients should wash their hands upon entering the establishment and before each treatment.
- Take measures to ensure that clients do not physically interact with each other in the establishment.
- Face masks or fabric face coverings should always be worn by employers, employees, contractors, and clients while inside the establishment, even if individuals are practicing social distancing.
- Clients receiving services that cannot be provided while a mask is worn should wear a mask or face covering before and after such times as the service cannot be provided while a mask is worn.

Providing services:

- Providers should wash their hands with soap and water for at least 20 seconds prior to providing services, if gloves are not worn while providing services.
- Employees and contractors should change gloves or rewash hands with soap and water after touching their face, nose, eyes, cell phone, door, credit card machine or any surface they have not sanitized.
- Use disposable supplies to keep from having to handle and disinfect multi-use supplies.
- Use disposable towels when possible and dispose of them after use.

Continue to service clients with the cleaning and sanitation you already practice:

- Remove and properly dispose of gloves immediately upon completion of the service, if gloves are worn.
- Wipe down and sanitize all surfaces between use including computers, landline phones, etc.
- Fully sanitize workstations, chairs, etc., after each client. This includes a complete wipe down with disinfectant cleaners or wipes of all surfaces touched and products used.
- Clean and disinfect multi-use equipment and tools before use on each client.
- Discard single-use equipment and tools after use on a single client.
- Wipe clean and disinfect electrical equipment that cannot be immersed in liquid before use on each client.
- Store all cleaned and disinfected tools and materials in a clean, dry, debris-free environment when not in use.
- Store cleaned and disinfected tools and materials separate from soiled tools and materials. Ultraviolet electrical sanitizers are acceptable for use as a dry storage container.
- Thoroughly clean floors each day.
- Empty all trash containers daily, and wash the containers or use plastic liners.
- Immediately remove non-disposable towels used during services placed the towels in a disposable laundry receptacle (such as a bag that is discarded after use) at the conclusion of the service.
- Sanitize laundry baskets or reusable bags between uses, and do not use the laundry basket or reusable bag for clean towels.
- Wash towels in hot water and chlorine bleach, and only use clean towels on clients.
- Clean towels should only be handled by someone who has cleaned their hands immediately before touching the towels or someone who has a fresh pair of gloves.
- Fully sanitize all on-site laundry rooms or laundry storage rooms daily.

Additional items:

- If an employee or contractor tests positive for COVID-19, immediately report that to the local health authority and provide notification to employees, contractors, and clients. The notification may be made via phone call, e-mail, or text. The notification to the local health authority and to employees, contractors, and clients should occur no later than 24 hours of receiving information of a positive test result.

MASSAGE AND OTHER PERSONAL-CARE AND BEAUTY SERVICE CUSTOMERS

The following are the minimum recommended health protocols for all customers receiving massages or personal-care and beauty services not otherwise authorized, including but not limiting to electrolysis, waxing, tattoos, piercings, and hair loss treatment and growth services. These minimum health protocols are not a limit on the health protocols that individuals may adopt. Individuals are encouraged to adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all Texans.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas.

The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Individuals should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization.

Health protocols for customers:

- Consistent with the actions taken by many individuals across the state, and because of the close proximity between individuals in these establishments, consider wearing cloth face coverings (over the nose and mouth) except when it interferes with the service being provided. If available, individuals should consider wearing non-medical grade face masks. Wearing a mask is of utmost importance because of the close proximity between individuals in these settings.
- Maintain at least 6 feet of separation from other individuals. If such distancing is not feasible, other measures such as face covering, hand hygiene, cough etiquette, cleanliness, and sanitation should be rigorously practiced.
- Self-screen before going into a close personal services establishment for any of the following new or worsening signs or symptoms of possible COVID-19:
 - Cough
 - Shortness of breath or difficulty breathing
 - Chills
 - Repeated shaking with chills
 - Muscle pain
 - Headache
 - Sore throat
 - Loss of taste or smell
 - Diarrhea
 - Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
 - Known close contact with a person who is lab confirmed to have COVID-19
- Wash or disinfect hands upon entering a close personal service establishment and after any interaction with employees, contractors, other customers, or items in the establishment.
- Wash or sanitize hands after the payment process.
- **Individuals aged 65 or older are at a higher risk of COVID-19. To the extent possible, avoid contact within 6 feet with individuals aged 65 and older. Individuals aged 65 and older should stay at home as much as possible.**

- Carry and use hand sanitizer regularly inside the facility to disinfect hands, especially after interaction with individuals outside the household.

Exhibit X:
Minimum Standard Health Protocols for Child Care Centers and Child Care Families
as Outlined by the
Governor’s Strike Force

EFFECTIVE IN EL PASO MAY 29, 2020

Unless Modified by Subsequent Executive Order or County Judge Order

For purposes of this checklist, “child care center” refers to both regulated child care centers, temporary licensed child care centers, home providers, and youth development organizations.

The virus that causes COVID-19 can infect people of all ages. While the risk of serious illness or loss of life is greatest in those 65 years of age and older, persons in every age group can get COVID-19 and some will have a severe illness.

We should all be thankful that, with rare exceptions, COVID-19 is not claiming the lives of our children. However, we can never forget that a child with a mild or even asymptomatic case of COVID-19 can spread that infection to others who may be far more vulnerable.

COVID-19 is spread from person to person through contact that is close enough to share droplets generated by coughing, sneezing, speaking and even just breathing. COVID-19 can also be spread by touching objects where contaminated droplets have landed. Because of this easy manner of transmission, an infant, child or young person who is infected with COVID-19 can spread the infection to others they come in close contact with, such as members of their household, teachers, or other caregivers. We have learned that infected persons with mild or even no symptoms can spread COVID-19.

These facts are vitally important when considering the reopening of schools, daycares, youth camps and other places that provide care and education for our children.

One thing is for certain: education and childcare are essential and we must find reasonably safe ways to restore these services so that our children can be cared for, educated and their parents and guardians can return to work. We must find ways to protect our children from COVID-19 and ensure that they do not bring the infection to others, such as other household members, who may be at high risk for severe infection or even loss of life.

For adults in the workplace or other public spaces, we are confident that if certain measures such as cloth face coverings or non-medical grade masks, respiratory etiquette, frequent hand washing / hand sanitation and environmental cleaning and sanitizing are widely observed, we can then proceed with reopening Texas in a safe and measured way.

However, some of the protective measures that we can expect from adults, such as wearing cloth face coverings and maintaining distance from one another, are, for a variety of reasons, simply not possible for infants, children and youth to practice in schools, daycares and youth camps. In some cases, the child will be too young to understand and practice these precautions. We cannot, for example, expect a group of toddlers or schoolchildren not to engage in interactive play or share toys, for example.

All of these factors mean that while certain precautions against the spread of COVID-19 can and will be applied to schools, daycares and youth camps, the infection control measures that can be put in place in these settings will differ somewhat from those that are suitable for other social, business and commercial settings.

Therefore, every child care provider who is responsible for providing care or education for infants, children and youth in these settings must be aware of these facts and be willing to comply with the infection control measures that will be in place in these settings. Parents or guardians should monitor the health of their child and not send them to the program if they are displaying any symptom of COVID. Parents or guardians should seek COVID testing promptly and report results to the program given the implications for other children, families, and staff. Individuals aged 65 or older are at a higher risk of COVID-19. Parents or guardians should protect any vulnerable persons who are members of the same household or come into frequent, close contact with infants, children and youth who attend daycare.

About minimum health protocols:

The following are the minimum recommended health protocols for all child care centers choosing to operate in Texas. Child care centers may adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all employees and children.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Child care centers should stay informed and take additional actions based on common sense and wise judgment that will protect health and support economic revitalization. Child care centers should also be mindful of federal and state employment and disability laws, workplace safety standards, and accessibility standards to address the needs of both workers and customers. Federal and state regulations regarding child care centers should be followed.

Federal and state health protocols for serving children in child care:

- Operate the child care in accordance with the Guidance for Child Care Programs that Remain Open released by the Centers of Disease Control, available at <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html>.
- Based on above CDC guidance, create plans for each child care facility around the following prevention measures:
 - Implement social distancing strategies
 - Intensify cleaning and disinfection efforts
 - Modify drop-off and pick-up procedures
 - Implement screening procedures upon arrival

- Operate the child care in accordance with applicable state rules, including Health and Human Services Commission (HHSC) emergency rules applicable to the type of license the child care center holds.
 - Temporarily licensed child care centers can find their rules here.
 - Regulated child care centers can find their rules here.
- Ensure that all child care providers have taken required health and safety training related to COVID-19 through the Texas A&M AgriLife extension. The following training is required:
 - Providing High Quality Experiences during COVID-19 for Emergency Child Care Settings
 - Special Considerations for Infection Control during COVID-19

Vulnerable/high risk groups:

Based on currently available information and clinical expertise, people 65 or older might be at higher risk for severe illness from COVID-19. To protect those at higher risk, it is important that everyone practices healthy hygiene behaviors.

If you have staff members or teachers age 65 or older, encourage them to talk to their healthcare provider to assess their risk and to determine if they should stay home.

Information about COVID-19 in children is somewhat limited, but the information that is available suggests that many children have mild symptoms. However, a small percentage of children have been reported to have severe illness. Please consult with your health care provider on what is appropriate for your child.

Preventative health measures for child care centers:

Child care providers must follow all applicable state statutes and HHSC Child Care Licensing rules. The following checklist is intended to provide a selection of important health and safety items. It is not intended to be an exhaustive list. Providers who need help understanding applicable rules and procedures should reach out to their contact at Child Care Licensing for further assistance.

Plan ahead to ensure adequate supplies to support hand hygiene behaviors and routine cleaning of objects and surfaces. If you have difficulty in obtaining these supplies, please contact your Child Care Licensing representative.

- Consistent with the actions taken by many businesses across the state, consider having all employees wear cloth face coverings (over the nose and mouth). If available, employees should consider wearing non-medical grade face masks.
- Require sick children and staff to stay home.
 - Communicate to parents the importance of keeping children home when they are sick.
 - Communicate to staff the importance of being vigilant for symptoms and staying in touch with center management if or when they start to feel sick.
 - Establish procedures to ensure children and staff who come to the child care center sick or become sick while at your facility are sent home as soon as possible.
 - Keep sick children and staff separate from well children and staff until they can be sent home.

- Sick staff members should not return to work until they have met the criteria to discontinue home isolation.
- Consider ways to provide this guidance to your child care center families.
- Have a plan if someone is or becomes sick.
 - Plan to have an isolation room that can be used to isolate a sick child.
 - Be read to follow CDC guidance on how to disinfect your building or center if someone is sick.
 - If a sick child has been isolated in your facility, clean and disinfect surfaces in your isolation room or area after the sick child has gone home.
 - If COVID-19 is confirmed in a child or staff member:
 - Contact your local health authority to report the presence of COVID-19 in your facility. Your local health authority will advise you on re-opening procedures.
 - Contact Child Care Licensing to report the presence of COVID-19 in your facility.
 - Close off areas used by the person who is sick.
 - Open outside doors and windows to increase air circulation in the areas.
 - Wait up to 24 hours or as long as possible before you clean or disinfect to allow respiratory droplets to settle before cleaning and disinfecting.
 - Clean and disinfect all areas used by the person who is sick, such as offices, bathrooms, and common areas.
 - If more than 7 days have passed since the person who is sick visited or used the facility, additional cleaning and disinfection is not necessary.
 - Continue routine cleaning and disinfection.
- Monitor and plan for absenteeism among your staff.
 - Develop plans to cover classes in the event of increased staff absences. Coordinate with other local child care programs and reach out to substitutes to determine their anticipated availability if regular staff members need to stay home if they or their family members are sick.
 - Recommend that individuals at higher risk for severe illness from COVID-19 consult with their medical provider to assess their risk and to determine if they should stay home if there is an outbreak in their community.
- Review plans for implementing social distancing strategies.
 - Social distancing focuses on remaining out of congregate settings, avoiding mass gatherings, and maintaining distance from others when possible. Detailed guidance for implementing social distancing strategies in child care centers and schools is found here.
- Assess group gatherings and events.
 - Events and group activities are strongly discouraged in child care centers. If for some reason an event must occur, child care centers should follow current CDC guidance about gatherings and events.
 - Avoid scheduling events that require your children to bring items from home (e.g. show and tells).
- Limit access to your center.
 - Prohibit any but the following individuals from accessing your facility:
 - Operation staff;

- Persons with legal authority to enter, including law enforcement officers, Texas Rising Star staff, Licensing staff, and Department of Family and Protective Services staff;
- Professionals providing services to children;
- Children enrolled at the operation; and
- Parents who have children enrolled and present at the operation. Parents should only enter the child care center when necessary.
- Limit the use of parent or other volunteers in your facilities to an absolute minimum.

Social distancing strategies:

Use preparedness strategies and consider the following social distancing strategies:

- Have employees maintain at least 6 feet of separation from other individuals. If such distancing is not feasible, other measures such as face covering, hand hygiene, cough etiquette, cleanliness, and sanitation should be rigorously practiced.
- If possible, child care classes should include the same group each day, and the same child care providers should remain with the same group each day.
- Cancel or postpone special events such as festivals, holiday events, and special performances.
- Consider whether to alter or halt daily group activities that may promote transmission.
- Keep each group of children in a separate room to the extent possible.
- Limit the mixing of children, such as staggering playground times and keeping groups separate for special activities such as art, music, and exercising.
- Outdoor areas, like playgrounds in schools and parks generally require normal routine cleaning, but do not require disinfection.
 - Do not spray disinfectant on outdoor playgrounds- it is not an efficient use of supplies and is not proven to reduce risk of COVID-19 to the public.
 - High touch surfaces made of plastic or metal, such as grab bars and railings should be cleaned routinely.
 - Cleaning and disinfection of wooden surfaces (play structures, benches, tables) or groundcovers (mulch, sand) is not recommended.
- If possible, at nap time, ensure that children’s naptime mats (or cribs) are spaced out as much as possible, ideally 6 feet apart. Consider placing children head to toe in order to further reduce the potential for viral spread. Be sure and disinfect mats before and after each use.
- If possible, arrange for administrative staff to telework from their homes.
- Minimize time standing in lines, keeping children at safe distances apart from each other. Six feet of separation between children is preferred.
- Limit the use of water tables and sensory tables, and have children wash or sanitize their hands immediately after using these play stations.
- Increase the distance between children during table work.
- Incorporate more outside activities, where feasible.

Class size and ratio requirements:

The following pages lay out the new child care ratios that opened child care providers should follow. These ratios are intended to support the state’s policy of social distancing, while also supporting providers and ensuring they are able to continue their business.

Modified Child Care Ratios

If the specified age of the children in the group is...	Modified Size for One Caregiver	Modified Group Sizes for Two Caregivers in the Same Room*	Square Footage Requirement
0 – 11 months	No modification in size (Existing standard is 4).	Modified to 8, but children should be put into two groups and separated with one caregiver per group (Existing standard is 10).	30 square feet space per child (existing standard, indoor) 80 square feet space per child (existing standard, outdoor)
12 – 17 months	No modification in size (Existing standard is 5).	Modified to 10, but children should be put into two groups and separated with one caregiver per group (Existing standard is 13).	30 square feet space per child (existing standard, indoor) 80 square feet space per child (existing standard, outdoor)
18 – 23 months	Modified to 7 (Existing standard is 9).	Modified to 14, but children should be put into two groups and separated with one caregiver per group (Existing standard is 18).	30 square feet space per child (existing standard, indoor) 80 square feet space per child (existing standard, outdoor)
2 years	Modified to 8 (Existing standard is 11).	Modified to 16, but children should be put into two groups and separated with one caregiver per group (Existing standard is 22).	30 square feet space per child (existing standard, indoor) 80 square feet space per child (existing standard, outdoor)
3 years**	Modified to 10 (Existing standard is 15).	Size limit modified to 20 (Existing standard is 30). Note: these	30 square feet space per child (existing standard, indoor)

		children will not be able to remain in two separate groups.	80 square feet space per child (existing standard, outdoor)
4 years**	Modified to 10 (Existing standard is 18).	Size limit modified to 20 (Existing standard is 35). Note: these children will not be able to remain in two separate groups.	30 square feet space per child (existing standard, indoor) 80 square feet space per child (existing standard, outdoor)
5 years**	Modified to 10 (Existing standard is 22).	Size limit modified to 20, but children should be put into two groups and separated with one caregiver per group (Existing standard is 35).	45 square feet space per child (Indoor) 120 square feet per child (Outdoor)
6 – 8 years**	Modified to 10 (Existing standard is 26).	Size limit modified to 20, but children should be put into two groups and separated with one caregiver per group (Existing standard is 35).	45 square feet space per child (Indoor) 120 square feet per child (Outdoor)
9 – 13 years**	Modified to 10 (Existing standard is 26).	Size limit modified to 20, but children should be put into two groups and separated with one caregiver per group (Existing standard is 35).	45 square feet per child per child (Indoor) 120 square feet per child (Outdoor)

* Group sizes should be stable, with the same children and caregivers in the same group every day. These groups can be in the same room, as is current practice, but the separation of the two groups should be emphasized. ** If a child has an aide assisting them as a result of their Individual Education Plan (IEP), the aide does not count as a caregiver for purposes of this table. The aide would count as a “child” for purposes of figuring out the allowable number of children in each group or classroom setting.

Notes:

- Regulated Family Child Care ratios are not affected by this table.

- Floating staff members are allowed under this modified class size table. To the extent possible, these floating staff members should float in the same rounds with the same students every day.

Parent drop-off and pick-up:

- The pick-up and drop-off of children should be completed outside of the operation, unless the operation determines that there is a legitimate need for the parent to enter. Should the parent have a legitimate need to enter the operation, the parent must be screened by the operation as outlined in this document.
 - NOTE: For families participating in the subsidized child care program, efforts should be made to allow them to check in via the state's card swipe system. Consider moving the card swipe station outdoors in the morning or swiping the parent's card for them. Sanitize card swipe stations after use.
- Consider staggering arrival and drop off times and have child care providers go outside the facility to pick up the children as caretakers arrive. A plan for curbside drop-off and pick-up should limit direct contact between parents and staff members and adhere to social distancing recommendations.
- Hand hygiene stations should be set up at the entrance of the facility, so that children can clean their hands before they enter. If a sink with soap and water is not available, provide hand sanitizer with at least 60% alcohol next to parent sign-in sheets. Keep hand sanitizer out of children's reach and supervise use. If possible, place sign-in stations outside, and provide sanitary wipes for cleaning pens between each use.
- Designate a parent to be the drop-off/pick-up volunteer to walk all children to their classroom, and at the end of the day, walk all children back to their cars. These volunteers should wear a mask. To the extent possible, they should also keep 6 feet of distance between themselves and the caregiver, and other volunteers.
- Infants can be transported in their car seats. Store car seats out of children's reach.
- If possible, older people such as grandparents should not pick up children, because they are more at risk for severe illness from COVID-19.

Screening:

- The following individuals must be screened every day before entering the facility:
 - Operations staff;
 - Persons with legal authority to enter, including law enforcement officers, Texas Rising Star staff, Licensing staff, and Department of Family and Protective Services staff;
 - Professionals providing services to children;
 - Children enrolled at the operation; and
 - Parents who have children enrolled and present at the operation. Parents should only enter the child care center when necessary.
- There are several methods that facilities can use to protect their workers while conducting temperature screenings. The most protective methods incorporate social distancing (maintaining a distance of 6 feet from others) or physical barriers to eliminate or minimize exposures due to close contact to a child who has symptoms during screening. For various

examples on screening practices, see CDC guidance on screening at <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html#ScreenChildren>.

- Screen those entering the facility prior to entering the child care center:
 - Send home any employee or child who has any of the following new or worsening signs or symptoms of possible COVID-19:
 - Cough
 - Shortness of breath or difficulty breathing
 - Chills
 - Repeated shaking with chills
 - Muscle pain
 - Headache
 - Sore throat
 - Loss of taste or smell
 - Diarrhea
 - Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
 - Known close contact with a person who is lab-confirmed to have COVID-19
 - Do not allow employees or children with the new or worsening signs or symptoms listed above to return to work until:
 - In the case of an employee who was diagnosed with COVID-19, the individual may return to work when all three of the following criteria are met: at least 3 days (72 hours) have passed since recovery (resolution of fever without the use of fever-reducing medications); and the individual has improvement in respiratory symptoms (e.g., cough, shortness of breath); and at least 10 days have passed since symptoms first appeared; or
 - In the case of an employee who has symptoms that could be COVID-19 and does not get evaluated by a medical professional or tested for COVID-19, the individual is assumed to have COVID-19, and the individual may not return to work until the individual has completed the same three-step criteria listed above; or
 - If the employee has symptoms that could be COVID-19 and wants to return to work before completing the above self-isolation period, the individual must obtain a medical professional's note clearing the individual for return based on an alternative diagnosis.
 - Do not allow an employee or child with known close contact to a person who is lab-confirmed to have COVID-19 to return to work until the end of the 14 day self-quarantine period from the last date of exposure (with an exception granted for health care workers and critical infrastructure workers).
- Child care programs are encouraged to implement sick leave policies that permit staff who are symptomatic, particularly high-risk individuals, to stay at home.
- If staff members believe they have had close contact to someone with COVID-19 but are not currently sick, they should monitor their health for the above symptoms

during the 14 days after the last day they were in close contact with the individual with COVID-19.

- If a parent believes that they or the child has had close contact to someone with COVID-19 but are not currently sick, they should monitor their health for the above symptoms during the 14 days after the last day they were in close contact with the individual with COVID-19.

Enhanced cleaning and disinfecting measures:

The following should be done in addition to (or in substitution of) existing cleaning protocols in place at the child care center:

- Clean and disinfecting efforts should be intensified over the pre-COVID-19 standards. Additional CDC guidance can be found here: <https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>.
- Cleaning products should not be used near children, and staff should ensure that there is adequate ventilation when using these products to prevent children from inhaling toxic fumes.
- Facilities should develop a schedule for regular cleaning and disinfecting.
- Routinely clean, sanitize, and disinfect surfaces and objects that are frequently touched, especially toys and games.
- Clean objects/surfaces not ordinarily cleaned daily such as doorknobs, light switches, classroom sink handles, countertops, nap pads, toilet training potties, desks, chairs, cubbies, and playground structures. Use the cleaners typically used at your facility.
- Adjust the HVAC system to allow for more fresh air to enter the program space, if possible.
- All bathrooms should be cleaned and disinfected regularly throughout the day, at a minimum bathrooms should be cleaned and disinfected three times per day.
- Cleaning products:
 - Use all cleaning products according to the directions on the label. For disinfection, most common EPA-registered, fragrance-free household disinfectants should be effective. A list cleaning products specific to COVID can be found here: <https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2>.
 - If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection.
 - Follow the manufacturer's instructions for concentration, application method, and contact time for all cleaning and disinfection products.
 - If possible, provide EPA-registered disposable wipes to child care providers and other staff members so that commonly used surfaces such as keyboards, desks, and remote controls can be wiped down before use. If wipes are not available, please refer to CDC's guidance on disinfection for community settings.
 - All cleaning materials should be kept secure and out of reach of children.
- Clean and sanitize toys:
 - Toys that cannot be cleaned and sanitized should not be used.
 - Toys that children have placed in their mouths or that are otherwise contaminated by body secretions or excretions should be set aside until they are cleaned and disinfected by hand by a person wearing gloves. Clean with water and detergent,

rinse, sanitize with an EPA-registered disinfectant, rinse again, and air-dry. You may also clean in a mechanical dishwasher. Be mindful of items more likely to be placed in a child's mouth, like play food, dishes, and utensils.

- Machine washable cloth toys should be used by one individual at a time or should not be used at all. These toys should be laundered before being used by another child.
- Do not share toys with other groups of infants or toddlers, unless they are washed and sanitized before being moved from one group to the other.
- Set aside toys that need to be cleaned. Place in a dish pan with soapy water or put in a separate container marked for "soiled toys." Keep dish pan and water out of reach from children to prevent risk of drowning. Washing with soapy water is the ideal method for cleaning. Try to have enough toys so that the toys can be rotated through cleanings.
- Children's books and other paper materials should be rotated if used by one group in a cohort. They should not be used by any other cohort or group for at least 36 hours.
- **Clean and disinfect bedding:**
 - Use bedding (sheets, pillows, blankets, sleeping bags) that can be washed.
 - Keep each child's bedding separate, and consider storing in individually labeled bins, cubbies, or bags. Cots and mats should be labeled for each child.
 - Bedding that touches a child's skin should be cleaned weekly or before use by another child.

Caring for infants and toddlers:

- **Diapering:**
 - When diapering a child, wash your hands and wash the child's hands before you begin, and wear gloves. Follow safe diaper changing procedures. Procedures should be posted in all diaper changing areas. Steps include:
 - Prepare (includes putting on gloves)
 - Clean the child
 - Remove trash (soiled diaper and wipes)
 - Replace diaper
 - Wash child's hands
 - Clean up diapering station
 - Wash hands
 - After diapering, wash your hands (even if you were wearing gloves) and disinfect the diapering area with a fragrance-free bleach that is EPA-registered as a sanitizing or disinfecting solution. If other products are used for sanitizing or disinfecting, they should also be fragrance-free and EPA-registered. If the surface is dirty, it should be cleaned with detergent or soap and water prior to disinfection.
 - If reusable cloth diapers are used, they should not be rinsed or cleaned in the facility. The soiled cloth diaper and its contents (without emptying or rinsing) should be placed in a plastic bag or into a plastic-lined, hands-free covered diaper pail to give to parents/guardians or laundry service.
- **Washing, feeding, or holding a child:**
 - It is important to comfort crying, sad, or anxious infants and toddlers, and they often need to be held. To the extent possible, when washing, feeding, or holding very

young children, child care providers can protect themselves by wearing an over-large button-down, long sleeved shirt and by wearing long hair up off the collar in a ponytail or other up-do. Consider limiting the amount and type of jewelry that you wear so that the disease cannot be transmitted that way.

- Child care providers should wash their hands, neck, and anywhere touched by a child's secretions.
- Child care providers should change the child's clothes if secretions are on the child's clothes. They should change their clothing, if there are secretions on it, and wash their hands again.
- Contaminated clothes should be placed in a plastic bag or washed in a washing machine.
- Infants, toddlers, and their providers should have multiple changes of clothes on hand in the child care center or home-based child care. Children should not be allowed to wear other children's clothing.
- Child care providers should wash their hands before and after handling infant bottles prepared at home or prepared in the facility.
- Bottles, bottle caps, nipples, and other equipment (e.g. bottle warmers) used for bottle-feeding should be thoroughly cleaned after each use by washing in a dishwasher or by washing with a bottlebrush, soap, and water.

Healthy hand hygiene:

- All children, staff, and volunteers should engage in hand hygiene at the following times:
 - Arrival to the facility and after breaks
 - Before and after preparing food or drinks
 - Before and after eating or handling food, or feeding children
 - Before and after administering medication or medical ointment
 - Before and after diapering
 - After using the toilet or helping a child use the bathroom
 - After coming in contact with bodily fluid
 - After handling animals or cleaning up animal waste
 - After playing outdoors or in sand
 - After handling garbage
- Wash hands with soap and water for at least 20 seconds. If hands are not visibly dirty, alcohol-based hand sanitizers with at least 60% alcohol can be used if soap and water are not readily available.
- Supervise children when they use hand sanitizer to prevent ingestion.
- Assist children with handwashing, including infants who cannot wash hands alone.
- After assisting children with handwashing, staff should also wash their hands.
- Place posters describing handwashing steps near sinks. Developmentally appropriate posters in multiple languages are available from CDC.

Transportation:

Close seating on buses makes person-to-person transmission of respiratory viruses more likely. Those providing transportation to child care centers should practice social distancing while on the bus.

- Child care centers should maximize space between riders (for example, one rider per seat in every other row).
- Keeping windows open might reduce virus transmission.
- Cleaning and disinfecting buses: Open the windows after runs and let the buses thoroughly air out. Buses should be cleaned after each use. Handrails can then be disinfected with an EPA-approved safer disinfectant. Windows must be kept open to prevent buildup of chemicals that could cause eye and respiratory problems.
- These recommendations should be followed by any third-party transportation services child care centers utilize.

Food preparation and meal service:

- An operation should not serve family style meals. Each child should be provided individual meals and snacks.
- If the child brings their own food from home, the provider should discourage the sharing of food between children.
- Providers should give careful consideration to the meal process and work on educating parents and families on the best way to provide their child's food and drinks for the day/week.
- Consider storing children's food and drinks for the day in their cubbies or another dedicated area if meals are brought from home
- Meals should be served in the classroom and teachers should directly serve children in their classrooms.
- Sinks used for food preparation should not be used for any other purposes.
- Caregivers should ensure children wash hands prior to and immediately after eating.
- Caregivers should wash their hands before preparing food and after helping children to eat.
- Facilities should follow all other applicable federal, state, and local regulations and guidance related to safe preparation of food.
- If an employer provides a meal for employees, employers are recommended to have the meal individually packed for each employee.

Child Care Families

The virus that causes COVID-19 can infect people of all ages. While the risk of serious illness or loss of life is greatest in those 65 years and older, persons in every age group can get COVID-19 and some will have a severe illness, especially if they have serious underlying medical conditions, such as heart disease or compromised immune systems.

We should all be thankful that, with rare exceptions, COVID-19 is not claiming the lives of our children. However, we can never forget that a child with a mild or even asymptomatic case of COVID-19 can spread that infection to others who may be far more vulnerable.

COVID-19 is spread from person to person through contact that is close enough to share droplets generated by coughing, sneezing, speaking and even just breathing. COVID-19 can also be spread by touching objects where contaminated droplets have landed. Because of this easy manner of transmission, an infant, child or young person who is infected with COVID-19 can spread the infection to others they come in close contact with, such as members of their household, teachers, or other caregivers. We have learned that infected persons with mild or even no symptoms can spread COVID-19.

These facts are vitally important when considering the reopening of schools, daycares, youth camps and other places that provide care and education for our children.

One thing is for certain: education and childcare are essential and we must find reasonably safe ways to restore these services so that our children can be cared for, educated and their parents and guardians can return to work. We must find ways to protect our children from COVID-19 to ensure that they do not bring the infection to others, such as other household members, who may be at high risk for severe infection or even loss of life.

For adults in the workplace or other public spaces, we are confident that if certain measures such as cloth face coverings or non-medical grade masks, respiratory etiquette, frequent hand washing / hand sanitation and environmental cleaning and sanitizing are widely observed, we can then proceed with reopening Texas in a safe and measured way.

However, some of the protective measures that we can expect from adults, such as wearing cloth face coverings and maintaining distance from one another are, for a variety of reasons, simply not possible for infants, children and youth to practice in schools, daycares and youth camps. In some cases, the child will be too young to understand and practice these precautions. We cannot, for example, expect a group of toddlers or schoolchildren not to engage in interactive play or share toys.

All of these factors mean that while certain precautions against the spread of COVID-19 can and will be applied to schools, daycares and youth camps, the infection control measures that can be put in place in these settings will differ somewhat from those that are suitable for other social, business and commercial settings.

Therefore, every child care provider who is responsible for providing care or education for infants, children and youth in these settings must be aware of these facts and be willing to comply with the infection control measures that will be in place in these settings. Parents or guardians should monitor the health of their child and not send them to the program if they are displaying any symptom of COVID. Parents or guardians should seek COVID testing promptly and report results to the program given the implications for other children, families, and staff. Individuals aged 65 or older are at a higher risk of COVID-19. Parents or guardians should protect any vulnerable persons who are members of the same household or come into frequent, close contact with infants, children and youth who attend daycare.

About minimum health protocols:

The following are the minimum recommended health protocols for all child care centers choosing to operate in Texas. Child care centers may adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all employees and children.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Child care centers should stay informed and take additional actions based on common sense and wise judgment that will protect health and support economic revitalization. Child care centers should also be mindful of federal and state employment and disability laws, workplace safety standards, and accessibility standards to address the needs of both workers and customers. Federal and state regulations regarding child care centers should be followed.

Health protocols for families whose children attend child care:

Those 65 and older are at high risk of serious injury or death from COVID-19. 75% of deaths in Texas are from those in the over-65 population. Therefore, children in daycare should minimize in-person contact with any person 65 years of age or older, especially those with pre-existing health conditions. This includes maintaining social distancing of at least 6 feet separation from those individuals, wearing a face covering or mask, and avoiding sharing utensils or other common objects with those individuals.

- Follow the drop-off procedures proscribed by your child care provider.
- Maintain at least 6 feet of separation from other individuals. If such distancing is not feasible, other measures such as face covering, hand hygiene, cough etiquette, cleanliness, and sanitation should be rigorously practiced.
- Screen yourself and your child before going into a child care center for any of the following new or worsening signs or symptoms of possible COVID-19:
 - Cough
 - Shortness of breath or difficulty breathing
 - Chills
 - Repeated shaking with chills
 - Muscle pain
 - Headache
 - Sore throat
 - Loss of taste or smell
 - Diarrhea

- Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
- Known close contact with a person who is lab confirmed to have COVID-19
- Wash or disinfect hands upon entering the child care center and after any interaction with employees, other customers, or items in the center.
- Consistent with the actions taken by many individuals across the state, consider wearing cloth face coverings (over the nose and mouth) when dropping your child off, or when within 6 feet of another person who is not a member of the individual's household. If available, individuals should consider wearing non-medical grade face masks.
- Wash or sanitize hands after dropping off your child.
- Think carefully about how you prepare your child's lunch or drinks for the day. Consider disinfecting reusable items every evening and before leaving for the day.
- Pack extra changes of clothes for your child, as child care centers are being asked to change children's clothing more regularly to prevent disease spread.
- Avoid sending in toys that cannot be cleaned daily into the child care center. If you do allow your child to bring in a toy from home, these toys should be cleaned every day when the child comes home and every morning before the child leaves.
- Avoid sending items from your home for activities such as show and tells.
- Parents should be aware of the risk to individuals 65 years of age or older from a child who could show no signs of the virus.

Exhibit Y:
Minimum Standard Health Protocols for Bars and Bar Patrons
as Outlined by the
Governor's Strike Force

EFFECTIVE IN EL PASO MAY 29, 2020

Unless Modified by Subsequent Executive Order or County Judge Order

Bars or similar establishments may operate for in-person service up to 25% of the total listed occupancy of the establishment. For these purposes, bars or similar establishments are establishments with a permit from TABC that are not otherwise considered restaurants. Any components of the establishments or facilities that have interactive functions or exhibits, including child play areas, interactive games, and video arcades, must remain closed. Interactive amusement venues, such as video arcades, amusement parks, or water parks, remain closed.

The following are the minimum recommended health protocols for all bars or similar establishments choosing to operate in Texas. Bars or similar establishments may adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all employees, contractors, and customers.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they could spread it to may become seriously ill or even die, especially if they are 65 or older with pre-existing health conditions that place them at higher risk. Because of the concealed nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including the most vulnerable.

Please note, public health guidance cannot anticipate or address every unique situation. Bars or similar establishments should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization. Bars or similar establishments should also be mindful of federal and state employment and disability laws, workplace safety standards, and accessibility standards to address the needs of both workers and customers.

Health protocols for serving your customers:

- Customers should not be permitted to loiter at the bar or in commonly trafficked areas, and should remain seated at tables inside the bar.
- Only provide service to seated individuals.
- Parties should maintain at least 6 feet of distance from other parties at all times, including while waiting to be seated in the establishment or for admission to the establishment.
- Activities that enable close human contact, including but not limited to dancing, are discouraged.
- Pathways for patrons' ingress and egress should be clear and unobstructed.

- Designate staff to ensure customers maintain a 6-foot distance between parties if customers are waiting to enter the bar or similar establishment.
- A hand sanitizing station should be available upon entry to the establishment.
- No tables of more than 6 people.
- Dining:
 - Do not leave condiments, silverware, flatware, glassware, or other traditional table top items on an unoccupied table.
 - Provide condiments, silverware, flatware, glassware, or traditional table top items as single use (non-reusable) items.
 - Use disposable menus (i.e., a new menu for each patron).
 - If a buffet is offered, bar employees should serve the food to customers.
- Ensure spacing of individuals within the establishment to keep a 6-foot distance between individuals in different groups.
 - Tables or chairs must be installed to seat all customers to maintain social distancing, and may not be moved.
 - Consider positioning an unoccupied table or other object adjacent to each occupied table, creating space to permanently maintain a 6-foot distance between groups.
 - Take orders from customers seated at a table or by web/phone application.
- Contactless payment is encouraged. Where not available, contact should be minimized. Both parties should wash or sanitize hands after the payment process.

Health protocols for your employees and contractors:

- Train all employees and contractors on appropriate cleaning and disinfection, hand hygiene, and respiratory etiquette.
- Screen employees and contractors before coming into the bar or similar establishment:
 - Send home any employee or contractor who has any of the following new or worsening signs or symptoms of possible COVID-19:
 - Cough
 - Shortness of breath or difficulty breathing
 - Chills
 - Repeated shaking with chills
 - Muscle pain
 - Headache
 - Sore throat
 - Loss of taste or smell
 - Diarrhea
 - Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
 - Known close contact with a person who is lab confirmed to have COVID-19
- Do not allow employees or contractors with the new or worsening signs or symptoms listed above to return to work until:
 - In the case of an employee or contractor who was diagnosed with COVID-19, the individual meets all three of the following criteria: at least three days (72 hours) have passed since recovery (resolution of fever without the use of fever-reducing

medications); and the individual has improvement in symptoms (e.g., cough, shortness of breath); and at least ten days have passed since symptoms first appeared; or

- In the case of an employee or contractor who has symptoms that could be COVID-19 and does not get evaluated by a medical professional or tested for COVID-19, the individual should be assumed to have COVID-19, and the individual may not return to work until the individual has completed the same three-step criteria listed above; or
- If the employee or contractor has symptoms that could be COVID-19 and wants to return to work before completing the above self-isolation period, the individual must obtain a medical professional's note clearing the individual for return based on an alternative diagnosis.
- Do not allow an employee or contractor with known close contact to a person who is lab-confirmed to have COVID-19 to return to work until the end of the 14-day self-quarantine period from the last date of exposure (with an exception granted for healthcare workers and critical infrastructure workers).
- Have employees and contractors wash or sanitize their hands upon entering the bar or similar establishment, and between interactions with customers.
- Have employees and contractors maintain at least 6 feet of separation from other individuals. If this distancing is not feasible, measures such as face covering, hand hygiene, cough etiquette, cleanliness, and sanitation should be rigorously practiced.
- Consistent with the actions taken by many businesses across the state, consider having all employees and contractors wear cloth face coverings over the nose and mouth. Employees and contractors should consider wearing non-medical grade face masks if available.

Health protocols for your facilities:

- Consider having an employee or contractor manage and control access to the bar or similar establishment, including opening doors to prevent attendees from touching door handles.
- Physically block off the bar and remove or block off bar stools so customers may neither sit nor order at the bar itself.
- Regularly and frequently clean and disinfect any regularly touched surfaces, such as doorknobs, tables, and chairs.
- Regularly and frequently clean restrooms, and document the cleanings.
- Disinfect any items that customers contact.
- Make hand sanitizer, disinfecting wipes, soap and water, or similar disinfectant readily available to employees and customers.
- Consider placing readily visible signs at the bar or similar establishment to remind everyone of best hygiene practices.
- Clean and disinfect the area used by customers (e.g., tables, chairs, etc.) after each group of customers depart, including the disinfecting of tables, chairs, stalls, and countertops.
- Clean and sanitize the bar daily.
- For bars or similar establishments with more than 10 employees and/or contractors present at one time, consider having an individual wholly or partially dedicated to ensuring the health protocols adopted by the establishment are being successfully implemented and followed.

- TABC staff should monitor bars throughout the state of Texas to ensure compliance with these protocols. TABC has the authority to suspend any license that poses an immediate threat or danger to public safety. Failure to follow these protocols may result in a 30 day license suspension for the first infraction, and a 60-day suspension for a second infraction.

Bar Patrons

The following are the minimum recommended health protocols for all bar or similar establishment patrons in Texas. These minimum health protocols are not a limit on the health protocols that individuals may adopt. Individuals are encouraged to adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all Texans.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they could spread it to may become seriously ill or even die, especially if they are 65 or older with pre-existing health conditions that place them at higher risk. Because of the concealed nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including the most vulnerable.

Please note, public health guidance cannot anticipate or address every unique situation. Individuals should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization.

Health protocols for bar or similar establishment patrons:

- In a bar or similar establishment, minimizing in-person contact is difficult, and wearing face coverings or masks is not feasible while at a table. For this reason, tables at bars or similar establishments should not exceed 6 individuals.
 - When individuals go to a bar or similar establishment, individuals should, to the extent possible, minimize in-person contact with others not in the individual's household. Minimizing in-person contact includes maintaining 6 feet of separation from individuals. When maintaining 6 feet of separation is not feasible, other methods should be utilized to slow the spread of COVID-19, such as wearing a face covering or mask, washing or sanitizing hand frequently, and avoiding sharing utensils or other common objects.
- Self-screen before going into the establishment for any of the following new or worsening signs or symptoms of possible COVID-19:
 - Cough
 - Shortness of breath or difficulty breathing
 - Chills
 - Repeated shaking with chills
 - Muscle pain
 - Headache
 - Sore throat

- Loss of taste or smell
- Diarrhea
- Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
- Known close contact with a person who is lab confirmed to have COVID-19
- Wash or disinfect hands upon entering a reception and after any interaction with employees, contractors, other attendees, or items in the bar or similar establishment.
- No tables of more than 6 people.
- Individuals aged 65 or older are at a higher risk of COVID-19. To the extent possible, avoid being within 6 feet with individuals aged 65 and older. Individuals aged 65 and older should stay at home as much as possible.
- Consistent with the actions taken by many individuals across the state, consider wearing cloth face coverings over the nose and mouth when not at the table, or when within 6 feet of another person who is not a member of the individual's household. If available, individuals should consider wearing non-medical grade face masks.
- Because of the social interaction that occurs at bars or similar establishments, strict adherence to these protocols is important. A person infected with COVID-19 may not know it, and may pass it to someone else unwittingly.
- Carry hand sanitizer, and use it regularly while at the bar or similar establishment, especially after contact with individuals outside the household.

Exhibit Z:

Minimum Standard Health Protocols for Bowling Alleys, Bingo Halls, Simulcasting, Skating Rinks and Bowling, Bingo, Simulcasting, Skating Customers

as Outlined by the

Governor's Strike Force

EFFECTIVE IN EL PASO MAY 29, 2020

Unless Modified by Subsequent Executive Order or County Judge Order

Bowling alleys, bingo halls, simulcasting, and skating rinks may operate up to 25% of their total listed occupancy. Bowling alleys must ensure at least 6 feet social distancing between operating bowling lanes, bingo halls must ensure at least 6 feet social distancing between customers playing bingo, and facilities which are simulcasting must ensure their patrons are engaging in at least 6 feet social distancing. Any components of the establishments or facilities that have interactive functions or exhibits, including child play areas, interactive games, and video arcades, must remain closed.

The following are the minimum recommended health protocols for all bowling alleys, bingo halls, simulcasting, and skating rinks choosing to operate in Texas. Bowling alleys, bingo halls, simulcasting, and skating rinks may adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all employees, contractors, and customers.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk.

Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Bowling alleys, bingo halls, simulcasting, and skating rinks should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization. Bowling alleys, bingo halls, simulcasting, and skating rinks should also be mindful of federal and state employment and disability laws, workplace safety standards, and accessibility standards to address the needs of both workers and customers.

Health protocols for your employees and contractors:

- Train all employees and contractors on appropriate cleaning and disinfection, hand hygiene, and respiratory etiquette.
- Screen employees and contractors before coming into the facility:
 - Send home any employee or contractor who has any of the following new or worsening signs or symptoms of possible COVID-19:
 - Cough
 - Shortness of breath or difficulty breathing
 - Chills
 - Repeated shaking with chills
 - Muscle pain
 - Headache
 - Sore throat
 - Loss of taste or smell
 - Diarrhea
 - Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
 - Known close contact with a person who is lab confirmed to have COVID-19
- Do not allow employees or contractors with new or worsening signs or symptoms listed above to return to work until:
 - In the case of an employee or contractor who was diagnosed with COVID-19, the individual may return to work when all three of the following criteria are met: at least 3 days (72 hours) have passed since recovery (resolution of fever without the use of fever-reducing medications); and the individual has improvement in symptoms (e.g., cough, shortness of breath); and at least 10 days have passed since symptoms first appeared; or
 - In the case of an employee or contractor who has symptoms that could be COVID-19 and does not get evaluated by a medical professional or tested for COVID-19, the individual is assumed to have COVID-19, and the individual may not return to work until the individual has completed the same three-step criteria listed above; or
 - If the employee or contractor has symptoms that could be COVID-19 and wants to return to work before completing the above self-isolation period, the individual must obtain a medical professional's note clearing the individual for return based on an alternative diagnosis.
- Do not allow an employee or contractor with known close contact to a person who is lab-confirmed to have COVID-19 to return to work until the end of the 14 day self-quarantine period from the last date of exposure (with an exception granted for healthcare workers and critical infrastructure workers).
- Have employees and contractors wash or sanitize their hands upon entering the facility.
- Have employees and contractors maintain at least 6 feet of separation from other individuals. If such distancing is not feasible, other measures such as face covering,

hand hygiene, cough etiquette, cleanliness, and sanitation should be rigorously practiced.

- If the bowling alley, bingo hall, simulcasting, or skating rink provides a meal for employees and/or contractors, the bowling alley, bingo hall, simulcasting, or skating rink is recommended to have the meal individually packed for each individual.
- Consistent with the actions taken by many employers across the state, consider having all employees and contractors wear cloth face coverings (over the nose and mouth). If available, employees and contractors should consider wearing non-medical grade face masks.

Health protocols for your facilities:

- If 6 feet of separation is not available between employees, contractors, and/or customers inside the facility, consider the use of engineering controls, such as dividers between individuals, to minimize the chances of transmission of COVID-19.
 - Configure your facility such that customers are separated by at least 6 feet from others not within the individual's group while at the facility, to the extent feasible.
- Regularly and frequently clean and disinfect any regularly touched surfaces, such as doorknobs, tables, chairs, and restrooms.
- Disinfect any items that come into contact with customers after each use, such as bowling balls and skates.
- Make hand sanitizer, disinfecting wipes, soap and water, or similar disinfectant readily available to employees, contractors, and customers.
- Place readily visible signage at the business to remind everyone of best hygiene practices.
- Contactless payment is encouraged. Where not available, contact should be minimized. Employees, contractors, and customers should sanitize their hands after the payment process.
- Consider having an employee or contractor manage and control access to the facility, including opening doors to prevent patrons from touching door handles.
- Block off items of the facility that are frequently touched to prevent the spreading of germs between parties.
- Clean and sanitize the facility daily.
- Consider having an individual wholly or partially dedicated to ensuring the health protocols adopted by the employer are being successfully implemented and followed.

Health protocols for your rental equipment:

- Disinfect all equipment, including inside all bowling balls, shoes, and other rental equipment, before and after customer use.
- Provide equipment disinfecting products throughout facility for use on equipment.

If you serve food and/or beverages:

- For waiter-provided food service:

- o Do not leave condiments, silverware, flatware, glassware, or other traditional table top items on an unoccupied table.
- o Provide condiments only upon request, and in single use (non-reusable) portions.
- o Clean and disinfect the area used for dining (table, etc.) after each group of customers depart the area.
- o Use disposable menus (new for each patron).
- o If you allow customers to write down their food orders, provide take-home pencils and notepads that cannot be used by other customers.
- o Have wait staff sanitize or wash hands between interactions with customers.
- For counter food service:
 - o Provide condiments or flatware only in single use, individually-wrapped items, and condiments only upon request.
 - o Have employees and contractors follow proper food-handling protocols.
 - o Disinfect any items that come into contact with customers.
- Clean and disinfect the area used for dining (table, etc.) after each group of customers depart, including the disinfecting of tables, chairs, stalls, and countertops.
- Block off or remove self-service drink fountains.
- Close off or block all interactive amusement machines, such as video games.

Bowling, Bingo, Simulcasting Skating Customers

The following are the minimum recommended health protocols for all customers of bowling alleys, bingo halls, simulcasting and skating rinks in Texas. These minimum health protocols are not a limit on the health protocols that individuals may adopt. Individuals are encouraged to adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all Texans.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Individuals should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization.

Health protocols for individuals:

- Individuals should avoid being in a group larger than 10 individuals. Within these groups, individuals should, to the extent possible, minimize in-person contact with others not in the individual's household. Minimizing in-person contact includes maintaining 6 feet of separation from individuals. When maintaining 6 feet of separation is not feasible, other methods should be utilized to slow the spread of COVID-19, such as wearing a face covering or mask, washing or sanitizing hand frequently, and avoiding sharing utensils or other common objects.
- Self-screen before going into the bowling alley, bingo hall, simulcasting, or skating rink for any of the following new or worsening signs or symptoms of possible COVID-19:
 - Cough
 - Shortness of breath or difficulty breathing
 - Chills
 - Repeated shaking with chills
 - Muscle pain
 - Headache
 - Sore throat
 - Loss of taste or smell
 - Diarrhea
 - Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
 - Known close contact with a person who is lab confirmed to have COVID-19
- Wash or disinfect hands upon entering the facility and after any interaction with employees, other customers, or items in the facility.
- Consistent with the actions taken by many individuals across the state, consider wearing cloth face coverings (over the nose and mouth) when entering the facility, or when within 6 feet of another person who is not a member of the individual's group. If available, individuals should consider wearing non-medical grade face masks.
- **Individuals aged 65 or older are at a higher risk of COVID-19. To the extent possible, avoid being within 6 feet with individuals aged 65 and older. Individuals aged 65 and older should stay at home as much as possible.**
- Carry hand sanitizer, and use it regularly while at the facility, especially after contact with individuals outside the household.

Exhibit AA:

**Minimum Standard Health Protocols for Rodeo/Equestrian Events as Outlined by the
Governor's Strike Force**

EFFECTIVE IN EL PASO MAY 29, 2020

Unless Modified by Subsequent Executive Order or County Judge Order

Individuals may engage in, and sponsors may put on, rodeos and equestrian events. Spectators are allowed, provided that indoor venues limit the number of spectators to no more than 25% of the total listed occupancy of the venue, and outdoor venues may operate at up to 25% of the normal operating limits as determined by the facility owner. Six feet of separation between individuals not within the same household should be maintained to the extent feasible. To the extent the rodeo or equestrian event has spectators, the person sponsoring the event must ensure that ingress and egress from the venue allows for 6 feet of social distancing between individuals on entering and exiting the venue. Larger gatherings that include a rodeo or equestrian event, such as a county fair, are not authorized at time.

The following are the minimum recommended health protocols for all individuals engaging in, and sponsors putting on, rodeo and equestrian events in Texas. Individuals and sponsors may adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all employees, contractors, volunteers, and participants.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Participants and sponsors should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization. Participants and sponsors should also be mindful of federal and state employment and disability laws, workplace safety standards, and accessibility standards to address the needs of both workers and customers.

Health protocols for your spectators:

- Remote ticketing options are encouraged to help manage capacity limitations.
- Ensure proper spacing between patrons in the venue:
 - Keep at least two empty seats (or 6 feet of separation) between parties in any row, except as follows:
 - Two or more members of the same household can sit adjacent to one another, with two seats (or 6 feet separation) empty on either side.

- Two individuals who are not members of the same household but who are attending together can sit adjacent to one another, with two seats (or 6 feet separation) empty on either side.
 - Alternate rows between spectators (every other row left empty).
 - Disinfect seats and frequently touched areas before and after use.
- For venues providing food service to patrons:
 - Do not leave condiments, silverware, flatware, glassware, or other traditional table top items on an unoccupied table.
 - Provide condiments only upon request, and in single use (non-reusable) portions.
 - Clean and disinfect the area used for dining (table, etc.) after each group of customers depart the area.
 - Use disposable menus (new for each patron).
 - If the venue allows customers to write down their food orders inside the venue, provide take-home pencils and notepads that cannot be used by other customers.
 - Have wait staff sanitize or wash hands between interactions with customers.
- For venues with counter food service for patrons:
 - Provide condiments or flatware only in single use, individually-wrapped items, and provide condiments only upon request.
 - Have employees and contractors follow proper food-handling protocols.
 - Disinfect any items that come into contact with customers.
- Contactless payment is encouraged. Where not available, contact should be minimized. Employees, contractors, and customers should sanitize their hands after the payment process.

Health protocols for your employees, contractors, volunteers, and participants:

- Individuals not currently competing should remain at least 6 feet away from other individuals. Remaining in vehicles before and after a race, or in separate areas during other events, is strongly recommended.
- Train all employees, contractors, volunteers, and participants on appropriate cleaning and disinfection, hand hygiene, and respiratory etiquette.
- Screen employees, contractors, volunteers, and participants before the sporting event:
 - Send home any employee, contractor, volunteer, or participant who has any of the following new or worsening signs or symptoms of possible COVID-19:
 - Cough
 - Shortness of breath or difficulty breathing
 - Chills
 - Repeated shaking with chills
 - Muscle pain
 - Headache
 - Sore throat
 - Loss of taste or smell
 - Diarrhea
 - Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
 - Known close contact with a person who is lab confirmed to have COVID-19

- Do not allow employees, contractors, volunteers, or participants with new or worsening signs or symptoms listed above to return to work until:
 - In the case of an individual who was diagnosed with COVID-19, the individual may return to work when all three of the following criteria are met: at least 3 days (72 hours) have passed since recovery (resolution of fever without the use of fever-reducing medications); and the individual has improvement in symptoms (e.g., cough, shortness of breath); and at least 10 days have passed since symptoms first appeared; or
 - In the case of an individual who has symptoms that could be COVID-19 and does not get evaluated by a medical professional or tested for COVID-19, the individual is assumed to have COVID-19, and the individual may not return to work until the individual has completed the same three-step criteria listed above; or
 - If the individual has symptoms that could be COVID-19 and wants to return to work before completing the above self-isolation period, the individual must obtain a medical professional's note clearing the individual for return based on an alternative diagnosis.
- Do not allow an individual with known close contact to a person who is lab-confirmed to have COVID-19 to return to the event until the end of the 14-day self-quarantine period from the last date of exposure (with an exception granted for healthcare workers and critical infrastructure workers).
- Have employees, contractors, volunteers, and participants wash or sanitize their hands upon entering the event venue.
- Have employees, contractors, volunteers, and participants maintain at least 6 feet of separation from other individuals. If such distancing is not feasible, other measures such as face covering, hand hygiene, cough etiquette, cleanliness, and sanitation should be rigorously practiced.
- If the event sponsor provides a meal for employees, contractors, volunteers, and/or participants, the sponsor is recommended to have the meal individually packed for each individual.
- Consistent with the actions taken by many employers across the state, consider having all employees, contractors, volunteers, and/or participants, wear cloth face coverings (over the nose and mouth). If available, individuals should consider wearing non-medical grade face masks.

Health protocols for your facilities:

- If 6 feet of separation is not available between individuals at the event, consider the use of engineering controls, such as dividers between individuals, to minimize the chances of transmission of COVID-19.
- Regularly and frequently clean and disinfect any regularly touched surfaces, such as doorknobs, tables, chairs, and restrooms.
- Disinfect any items that come into contact with individuals, including sporting event equipment.
- Make hand sanitizer, disinfecting wipes, soap and water, or similar disinfectant readily available to employees, contractors, and customers.

- Consider placing readily visible signage at the venue to remind everyone of best hygiene practices.
- Consider having an individual wholly or partially dedicated to ensuring the health protocols adopted by the employer are being successfully implemented and followed.

Exhibit BB:
Minimum Standard Health Protocols for Youth Clubs and Youth Club Participants
as Outlined by the
Governor’s Strike Force
EFFECTIVE IN EL PASO MAY 29, 2020

Unless Modified by Subsequent Executive Order or County Judge Order

Youth Clubs, such as Boy Scouts, Girl Scouts, TOP Teens (of TOP Ladies of Distinction), FFA, and Girls Inc., may hold meetings. Meetings held indoors should not exceed more than 10 individuals at any time, provided 6 feet of distance between individuals is maintained; staggering meetings to comply with the 10 individual limit is encouraged.

The following are the minimum recommended health protocols for all youth clubs choosing to hold meetings in Texas, such as Boy Scouts, Girl Scouts, TOP Teens (of TOP Ladies of Distinction), FFA, and Girls Inc.. Youth clubs may adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all employees, volunteers, contractors, and participants. It is advisable to meet in the largest facility available.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Youth clubs should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization. Youth clubs should also be mindful of federal and state employment and disability laws, workplace safety standards, and accessibility standards to address the needs of both workers and participants.

Health protocols for your employees, volunteers, and contractors:

- Train all employees, volunteers, and contractors on appropriate cleaning and disinfection, hand hygiene, and respiratory etiquette.
- Screen employees, volunteers, and contractors before coming into the youth club:
 - Send home any employee, volunteers, or contractor who has any of the following new or worsening signs or symptoms of possible COVID-19:
 - Cough
 - Shortness of breath or difficulty breathing
 - Chills
 - Repeated shaking with chills
 - Muscle pain
 - Headache
 - Sore throat

- Loss of taste or smell
- Diarrhea
- Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
- Known close contact with a person who is lab confirmed to have COVID-19
- Do not allow employees, volunteers, or contractors with new or worsening signs or symptoms listed above to return to the youth club facility until:
 - In the case of an employee, volunteer, or contractor who was diagnosed with COVID-19, the individual may return to work when all three of the following criteria are met: at least 3 days (72 hours) have passed since recovery (resolution of fever without the use of fever-reducing medications); and the individual has improvement in symptoms (e.g., cough, shortness of breath); and at least 10 days have passed since symptoms first appeared; or
 - In the case of an employee, volunteer, or contractor who has symptoms that could be COVID-19 and does not get evaluated by a medical professional or tested for COVID-19, the individual is assumed to have COVID-19, and the individual may not return to work until the individual has completed the same three-step criteria listed above; or
 - If the employee, volunteer, or contractor has symptoms that could be COVID-19 and wants to return to work before completing the above self-isolation period, the individual must obtain a medical professional's note clearing the individual for return based on an alternative diagnosis.
- Do not allow an employee, volunteer, or contractor with known close contact to a person who is lab-confirmed to have COVID-19 to return to the youth club facility until the end of the 14 day self-quarantine period from the last date of exposure (with an exception granted for healthcare workers and critical infrastructure workers).
- Have employees, volunteers, and contractors wash or sanitize their hands upon entering the youth club facility.
- Have employees, volunteers, and contractors maintain at least 6 feet of separation from other individuals. If such distancing is not feasible, other measures such as face covering, hand hygiene, cough etiquette, cleanliness, and sanitation should be rigorously practiced.
- If a youth club provides a meal for employees, volunteers, contractors, and/or participants, youth clubs are recommended to have the meal individually packed for each individual.
- Consistent with the actions taken by many employers across the state, consider having all employees, volunteers, and contractors wear cloth face coverings (over the nose and mouth). If available, employees, volunteers, and contractors should consider wearing non-medical grade face masks.

Health protocols for your facilities:

- If 6 feet of separation is not available between employees, volunteers, contractors, and/or participants inside the facility, consider the use of engineering controls, such as dividers between individuals, to minimize the chances of transmission of COVID-19.
- Regularly and frequently clean and disinfect any regularly touched surfaces, such as doorknobs, tables, chairs, and restrooms.

- Disinfect any items that come into contact with individuals.
- Make hand sanitizer, disinfecting wipes, soap and water, or similar disinfectant readily available to employees, volunteers, contractors, and participants.
- Consider placing readily visible signage at the youth club facility to remind everyone of best hygiene practices.
- Consider having an individual wholly or partially dedicated to ensuring the health protocols adopted by the youth club are being successfully implemented and followed.

Exhibit CC:

**Minimum Standard Health Protocols for Professional Sports Without In-Person Spectators
as Outlined by the
Governor's Strike Force**

EFFECTIVE IN EL PASO MAY 31, 2020

Unless Modified by Subsequent Executive Order or County Judge Order

Professional basketball, baseball, car racing, football, golf, softball, and tennis leagues may apply to the Department of State Health Services for approval to hold professional sporting events in Texas. These events may take place on or after May 31, 2020. The professional sporting events may not have spectators physically present on the premises. Each league must submit, along with a request for approval in the manner prescribed by the Department of State Health Services, a plan that incorporates applicable minimum standard health protocols recommended by the Department of State Health Services and such additional measures as are needed to ensure a safe plan for conducting the events. The Department of State Health Services, in consultation with the Office of the Governor and any recommendations by the advisory Strike Force to Open Texas, will review the applications.

Exhibit DD:

**Minimum Standard Health Protocols for Day Youth Camp Operators and Day Youth
Camp Families**

as Outlined by the

Governor’s Strike Force

EFFECTIVE IN EL PASO MAY 31, 2020

Unless Modified by Subsequent Executive Order or County Judge Order

The following are the minimum recommended health protocols for all day youth camps choosing to operate in Texas. Day youth camp operators may adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all employees, contractors, volunteers and day campers.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Day youth camps should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization. Day youth camps should also be mindful of federal and state employment and disability laws, workplace safety standards, and accessibility standards to address the needs of both workers and customers.

Health protocols for camp employees, contractors, and volunteers (“staff”):

- Provide notice to the parent or guardian that the parent or guardian may choose to either pick up their camper, or to let the camper remain and trust the camp to take appropriate safeguards, when informed by the camp operator that a child at camp has tested positive for COVID-19.
- **Provide notice to all parents and guardians of the enhanced risks of campers being in direct contact with anyone age 65 or older for 14 days after the end of the camp session.**
- Train all staff on appropriate cleaning and disinfection, hand hygiene, and respiratory etiquette.
- Screen all staff each day for any of the following new or worsening signs or symptoms of possible COVID-19:
 - Cough
 - Shortness of breath or difficulty breathing

- Chills
- Repeated shaking with chills
- Muscle pain
- Headache
- Sore throat
- Loss of taste or smell
- Diarrhea
- Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
- Known close contact with a person who is lab confirmed to have COVID-19
- Limit staff with underlying conditions from attending or staffing camp sessions.
- Consistent with the actions taken by many employers across the state, consider having all staff wear cloth face coverings (over the nose and mouth). If available, staff should consider wearing non- medical grade face masks.
- Staff should mitigate environmental exposures by additional cleaning and disinfecting of symptomatic staff's work area, common areas, and bathrooms. Staff should follow and supervise the Dining Hygiene Plan, Program Activity Plan, and, if applicable, the Transportation Plan.
- Camps should act consistent with all US State Department travel restrictions for international travel.

Health protocols regarding sick campers

- Isolate staff exhibiting new or worsening signs or symptoms of possible COVID-19 and contact the local health department.
 - Staff exhibiting new or worsening symptoms of possible COVID-19 should receive a nucleic acid- based COVID-19 test. Find [TX COVID-19 Test Collection Sites](#) online, contact the local health department for testing, or see a health care provider.
 - Do not allow staff with the new or worsening signs or symptoms of COVID-19 to return to work until:
 - In the case of a staffer who was diagnosed with COVID-19, the individual may return to work when all three of the following criteria are met: at least 3 days (72 hours) have passed since recovery (resolution of fever without the use of fever-reducing medications); and the individual has improvement in symptoms (e.g., cough, shortness of breath); and at least 10 days have passed since symptoms first appeared; or
 - In the case of a staffer who has symptoms that could be COVID-19 and does not get evaluated by a medical professional or tested for COVID-19, the individual is assumed to have COVID-19, and the individual may not return to work until the individual has completed the same three-step criteria listed above; or
 - If the staffer has symptoms that could be COVID-19 and wants to return to work

before completing the above self-isolation period, the individual must obtain a medical professional's note clearing the individual for return based on a negative nucleic-acid COVID-19 test and an alternative diagnosis.

- Staff should help the camp operator in identifying exposure risks (a.k.a. contact tracing).
- Separate campers and staff into groups or cohorts that remain consistent over the camp session. Discourage mixing between groups or cohorts. Consider programs that operate by groups defined by age or grade.
 - Immediately isolate any camper or staff member who tests positive for COVID-19 and report the positive test to the appropriate health authority.
 - If a staff member tests positive for COVID-19, the staff member will immediately leave the camp.
 - When an individual tests positive for COVID-19, notify all parents or guardians of campers in the cohort. The parents or guardians may decide to either pick up their child from the camp or leave the child in the camp and trust the camp to take appropriate safeguards. Keep the cohort containing the individual who tested positive for COVID-19 isolated from other cohorts at the camp for the remainder of the camp session.
 - If 3 or more cohorts have had any identified positive cases of COVID-19, work with state and local public health authorities about continued operations of the camp session.

Health protocols limiting access to camp grounds and facilities:

- No parents or guardians visiting the camp during or between camp sessions, except to drop-off and pick-up campers.
 - Modify camper drop-off and pick-up procedures to keep parents and guardians from coming within 6 feet of individuals not within the same household. Possible strategies include, but are not limited to, staggering drop-off and pick-up times.
 - If possible, parents and guardians should remain in their vehicles at camper drop-off and pick-up.
- Visitors should maintain social distancing of at least 6 feet from other individuals while at camp, and should follow camp protocols for symptom screening and hand-washing or sanitization.
- Designate a facility on the camp grounds for staff to take a break.

Health protocols for camp grounds and facilities

- Develop, train, and implement increased daily sanitization protocols for common surfaces, restrooms, dining halls, cabins, recreational equipment, and camp facilities.
- Make hand sanitizer, disinfecting wipes, soap and water, or similar disinfectant readily available throughout the camp.
- Consider having an individual wholly or partially dedicated to ensuring the health protocols adopted by the camp are being successfully implemented and followed.
- Camp health policies and protocols should include communicating and coordinating with

the local health department, local emergency services, and local health care providers before the start of a camp session. This coordination should include ensuring prompt and coordinated response to COVID- 19 and other emergencies.

- Ensure access to on-site medical personnel, or on-call physician, for the duration of a camp session.
- Consistent with the actions taken by many employers across the state, consider having all staff and campers wear cloth face coverings (over the nose and mouth). If available, staff and campers should consider wearing non-medical grade face masks.

Developing and implementing health protocol plans:

- Develop and implement a Dining Hygiene Plan to include:
 - No self-serve buffet meals
 - Serve meals with disposable utensils, napkins, cups, and plates
 - Clean and disinfect tables, chairs, etc. after use
- Develop and implement a Program Activity Hygiene Plan to include:
 - Sanitization of all program areas
 - Sanitization of equipment before and after use
 - Hand washing or hand sanitizing before and after activities
- Excursions away from the camp are strongly discouraged, and should be limited or eliminated where feasible. To the extent those excursions continue, develop and implement Transportation Protocols to include:
 - One individual per seat and every other row in a vehicle
 - Staggered seating for maximum distancing
 - Asking campers and staff to wear face coverings or masks while in vehicle
- Develop a management plan for infection outbreaks, including COVID-19.
- Deep clean and sanitize the camp prior to the start of a new camp session.
- Remind campers, parents, and guardians on exit of the enhanced risks of campers being in direct contact with anyone age 65 or older for 14 days after the end of the camp session.

Day Youth Camp Families

Youth camps may prepare to open and obtain the necessary supplies and equipment in order to follow the below health and safety protocols. At this time, day youth camps may open on May 31, 2020. These protocols may be updated based on guidance from the CDC and/or the American Academy of Pediatrics.

A note about children and COVID-19:

The virus that causes COVID-19 can infect people of all ages. While the risk of serious illness or loss of life is greatest in those 65 years of age or older with pre-existing health conditions,

persons in every age group can become infected with COVID-19 and some may become seriously ill or even die.

We should all be thankful that, with rare exceptions, COVID-19 is not claiming the lives of our children. However, we can never forget that a child with a mild or even asymptomatic case of COVID-19 can spread that infection to others who may be far more vulnerable.

COVID-19 is spread from person to person through contact that is close enough to share droplets generated by coughing, sneezing, speaking, and even just breathing. COVID-19 can also be spread by touching objects where contaminated droplets have landed. Because of this easy manner of transmission, an infant, child or young person who is infected with COVID-19 can spread the infection to others they come in close contact with, such as members of their household, teachers, or other caregivers. We have learned that infected persons with mild or even no symptoms can spread COVID-19.

These facts are vitally important when considering the reopening of schools, child care centers, youth camps and other places that provide care and education for our children.

One thing is for certain: We must find reasonably safe ways to restore these services so that our children can be cared for and educated, and for their parents and guardians to be able to return to work.

For adults in the workplace or other public spaces, we are confident that if certain measures such as cloth face coverings or non-medical grade masks, respiratory etiquette, frequent hand washing / hand sanitation and environmental cleaning and sanitizing are widely observed, we can then proceed with reopening Texas in a safe and measured way.

However, such protective measures that we can expect from adults are, for a variety of reasons, simply not possible for infants, children and youth to practice in schools, child care centers, and youth camps. In some cases, the child will be too young to understand and practice these precautions. We cannot, for example, expect a group of toddlers or schoolchildren not to engage in interactive play or share toys.

All of these factors mean that while certain precautions against the spread of COVID-19 can and will be applied to schools, child care centers, and youth camps, the infection control measures that can be put in place in these settings will differ from those that are suitable for other social, business and commercial settings.

Every adult who is responsible for providing care or education for infants, children and youth in these settings must be aware of these facts and be willing to comply with the infection control measures that will be in place in these settings. Parents should monitor the health of their children and not send them to the program if they exhibit any symptom of COVID-19. They should seek COVID-19 testing promptly and report results to the program given the implications for other children, families, and staff. Individuals aged 65 or older are at a higher risk of COVID-19. Parents should protect any vulnerable persons who are members of the same household or

come into frequent, close contact with infants, children and youth who attend child care centers, schools, or youth camps.

About minimum health protocols:

The following are the minimum recommended health protocols for all individuals attending a day youth camp in Texas. These minimum health protocols are not a limit on the health protocols that individuals may adopt. Individuals are encouraged to adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all Texans.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Individuals should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization.

Health protocols for day campers:

- When and if informed by the camp operator that a child at camp has tested positive for COVID-19, the parent or guardian may choose to either pick up their camper or to let the camper remain and trust the camp to take appropriate safeguards.
- Be aware of the enhanced risks of participants being in direct contact with anyone age 65 or older for 14 days after the end of the camp session.
- Before attending, upon arrival, and at least daily while at camp, the camper should be screened for any of the following new or worsening signs or symptoms of possible COVID-19:
 - Cough
 - Shortness of breath or difficulty breathing
 - Chills
 - Repeated shaking with chills
 - Muscle pain
 - Headache
 - Sore throat
 - Loss of taste or smell
 - Diarrhea
 - Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
 - Known close contact with a person who is lab confirmed to have COVID-19

- Wash or sanitize hands at regular intervals, including before and after every meal and activity.
- Consistent with the actions taken by many individuals across the state, consider wearing cloth face coverings (over the nose and mouth) when at camp. If available, individuals should consider wearing non-medical grade face masks.

Health protocols for parents or guardians:

- Do not visit the camp during camp sessions, except to drop-off and pick-up campers.
 - Maintain a separation of at least 6 feet from individuals not within the household during camper drop-off and pick-up.
 - Remain in the vehicle at camper drop-off and pick-up, if possible.
 - No tours of the camp at camper drop-off or pick-up.
- Campers confirmed to have COVID-19 may not return to the current camp session or other camp sessions until all three of the following criteria are met: at least 3 days (72 hours) have passed since recovery (resolution of fever without the use of fever-reducing medications); and the individual has improvement in symptoms (e.g., cough, shortness of breath); and at least 10 days have passed since symptoms first appeared.
- Camps should act consistent with all US State Department travel restrictions for international travel.

Health protocols for vulnerable populations:

Campers returning from a day camp should minimize in-person contact with any person 65 years of age or older, especially those with pre-existing health conditions, for a period of 14 days. This includes maintaining social distancing of at least 6 feet of separation from those individuals, wearing a face covering or mask, and avoiding sharing utensils or other common objects with those individuals.

Exhibit EE:
**Minimum Standard Health Protocols for Overnight Youth Camp Operators and
Overnight Youth Camp Families**
as Outlined by the
Governor’s Strike Force
EFFECTIVE IN EL PASO MAY 31, 2020

Unless Modified by Subsequent Executive Order or County Judge Order

The following are the minimum recommended health protocols for all resident/overnight youth camps choosing to operate in Texas. Overnight youth camp operators may adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all employees, contractors, volunteers and resident campers.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk.

Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Resident/overnight youth camps should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization. Resident/overnight youth camps should also be mindful of federal and state employment and disability laws, workplace safety standards, and accessibility standards to address the needs of both workers and customers.

Health protocols for camp employees, contractors, and volunteers (“staff”):

- Provide notice to the parent or guardian that the parent or guardian may choose to either pick up their camper or to let the camper remain and trust the camp to take appropriate safeguards when informed by the camp operator that a child at camp has tested positive for COVID-19.
- **Provide notice to all parents and guardians of the enhanced risks of campers being in direct contact with anyone age 65 or older for 14 days after the end of the camp session.**
- Train all staff on appropriate cleaning and disinfection, hand hygiene, and respiratory etiquette.
- Before attending, upon arrival, and at least daily while at camp, screen all staff for any of the following new or worsening signs or symptoms of possible COVID-19:
 - Cough

- Shortness of breath or difficulty breathing
- Chills
- Repeated shaking with chills
- Muscle pain
- Headache
- Sore throat
- Loss of taste or smell
- Diarrhea
- Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
- Known close contact with a person who is lab confirmed to have COVID-19
- Limit staff with underlying conditions from attending or staffing camp sessions.
- Strongly consider requiring staff to report to campgrounds and facilities 7-10 days, with a preference for 10 days, prior to the start of camp session. During this time, monitor employees and contractors for new or worsening signs or symptoms of possible COVID-19 to confirm staff is not infected. **This pre-session period is especially important for any staff arriving from “hot spot” areas in the United States.**
- Consistent with the actions taken by many employers across the state, consider having all staff wear cloth face coverings (over the nose and mouth). If available, staff should consider wearing non- medical grade face masks.
- Staff should mitigate environmental exposures by additional cleaning and disinfecting of symptomatic staff’s work area, common areas, bathrooms, and any cabins staff visited.
- Staff should follow and supervise the Cabin Hygiene Plan, Dining Hygiene Plan, Program Activity Plan, and, if applicable, Transportation Plan.
- Camps should act consistent with all US State Department travel restrictions for international travel.

Health protocols regarding sick campers and staff members:

- Isolate staff exhibiting new or worsening signs or symptoms of possible COVID-19 and work with state or local public health authorities, as applicable.
 - Staff exhibiting new or worsening symptoms of possible COVID-19 should receive a nucleic acid- based COVID-19 test. Find [TX COVID-19 Test Collection Sites](#) online, contact the local health department for testing, or see a health care provider.
 - Do not allow staff with the new or worsening signs or symptoms of COVID-19 to return to work until:
 - In the case of a staff member who was diagnosed with COVID-19, the individual may return to work when all three of the following criteria are met: at least 3 days (72 hours) have passed since recovery (resolution of fever without the use of fever-reducing medications); and the individual has improvement in symptoms (e.g., cough, shortness of breath); and at least 10 days have passed since symptoms first

appeared; or

- In the case of a staff member who has symptoms that could be COVID-19 and does not get evaluated by a medical professional or tested for COVID-19, the individual is assumed to have COVID-19, and the individual may not return to work until the individual has completed the same three-step criteria listed above; or
- If the staff member has symptoms that could be COVID-19 and wants to return to work before completing the above self-isolation period, the individual must obtain a medical professional's note clearing the individual for return based on a negative nucleic acid COVID-19 test and an alternative diagnosis.
- Staff should help the camp operator in identifying exposure risks (a.k.a. contact tracing).
- To the extent possible, separate campers and staff into groups or cohorts that remain consistent over the camp session. Discourage mixing between groups or cohorts. Consider programs that operate by groups defined by age/grade or bunks with dining/activity cohorts that may include single or a group of bunks.
 - Immediately isolate any camper or staff member who tests positive for COVID-19 and report the positive test to the appropriate health authority.
 - If a staff member tests positive for COVID-19, the staff member will immediately leave the camp, and the camp operator should notify parents or guardians of possible exposure to a lab-confirmed case of COVID-19.
 - If a camper tests positive for COVID-19, the camper's parent or guardian should pick up, or arrange to have picked up, the camper within 8 hours.
 - When an individual tests positive for COVID-19, notify all parents or guardians of campers in the cohort. The parents or guardians may decide to either pick up their child from the camp or leave the child in the camp and trust the camp to take appropriate safeguards. Keep the cohort containing the individual who tested positive for COVID-19 isolated from other cohorts at the camp for the short of the remainder of the camp session or 14 days.
 - If 3 or more cohorts have had any identified positive cases of COVID-19, work with state or local public health authorities, as applicable, about continued operations of the camp session.
- Staff should follow and supervise the Cabin Hygiene Plan, Dining Hygiene Plan, Program Activity Plan, and, if applicable, Transportation Plan.

Health protocols limiting access to camp grounds and facilities:

- No parents or guardians visiting the camp during or between camp sessions, except to drop-off and pick-up campers.
 - Modify camper drop-off and pick-up procedures to keep parents and guardians from coming within 6 feet of individuals not within the same household. Possible strategies include, but are not limited to, staggering drop-off and pick-up times.
 - If possible, parents and guardians should remain in their vehicles at camper drop-off and pick-up.
- No visitors to the camp unless necessary for camp operations, such as food delivery.

Visitors should maintain social distancing of at least 6 feet from other individuals while at camp, and should follow camp protocols for symptom screening and hand washing or sanitization.

- Designate a facility on the camp grounds for staff to take a break.
- Once staff arrive at the camp, they should be restricted from traveling into surrounding communities during their time off as much as possible. Weekly, supervised trips to stores for essential goods while wearing masks should be allowed.
- Hold packages received by the camp for 24 hours before delivering to campers or staff.

Health protocols for camp grounds and facilities:

- Develop, train and implement increased daily sanitization protocols for common surfaces, restrooms, dining halls, cabins, recreational equipment, and camp facilities.
- Make hand sanitizer, disinfecting wipes, soap and water, or similar disinfectant readily available throughout the camp.
- Consider having an individual wholly or partially dedicated to ensuring the health protocols adopted by the camp are being successfully implemented and followed.
- Camp health policies and protocols should include communicating and coordinating with the local health department, local emergency services, and local health care providers before the start of a camp session. This coordination should include ensuring prompt and coordinated response to COVID- 19 and other emergencies, including the ability to have symptomatic staff tested for COVID-19.
- At least daily while at camp, all staff and campers will be screened for any new or worsening signs or symptoms of possible COVID-19, including having temperatures taken.
- Ensure access to on-site medical personnel, or on-call physician, for the duration of a camp session.
 - On initial arrival at camp, all campers and staff should undergo a screening supervised by the camp health staff to assess the potential for communicable diseases, to establish a health status baseline, and to identify health problems.
 - Parents or guardians may choose to wait nearby until the camper's health screening is complete.
- Consistent with the actions taken by many employers across the state, consider having all staff and campers wear cloth face coverings (over the nose and mouth). If available, staff and campers should consider wearing non-medical grade face masks.

Developing and implementing health protocol plans:

- Develop and implement a Dining Hygiene Plan to include:
 - No self-serve buffet meals
 - Serve meals with disposable utensils, napkins, cups, and plates
 - Clean and disinfect tables, chairs, etc. after use
- Develop and implement a Cabin Hygiene Plan to include:

- Hand washing or hand sanitizing protocols
- Sanitization by camper protocols
- Sanitization of common/shared surfaces
- Personal fans should only be pointed at one camper; ceiling fans are permissible.
- Campers should sleep head to toe in upper and lower bunks. Bunk beds should be spaced as far apart as feasible in cabin. Air circulation through open windows and fans is encouraged.
- Develop and implement a Program Activity Hygiene Plan to include:
 - Sanitization of all program areas
 - Sanitization of equipment before and after use
 - Hand washing or hand sanitizing before and after activities
- Excursions away from the camp are strongly discouraged, and should be limited or eliminated where feasible. To the extent those excursions continue, develop and implement Transportation Protocols to include:
 - One individual per seat and every other row in a vehicle
 - Staggered seating for maximum distancing
 - Asking campers and staff to wear face coverings or masks while in vehicle
 - All campers and staff sanitize hands upon boarding and exiting the vehicle
- Develop a management plan for infectious outbreaks, including COVID-19:
 - Identify appropriate isolation facilities at the camp. If possible, the medical area should include multiple rooms, including a waiting area, a room or rooms to isolate those individuals exhibiting new or worsening signs or symptoms of possible COVID-19, and a separate room for individuals seeking other medical attention.
 - Guidelines for caring for ill campers or staff, and for isolating those individuals from the healthy population.
- Deep clean and sanitize the camp prior to the start of a new camp session.
- Remind campers, parents, and guardians on exit of the enhanced risks of campers being in direct contact with anyone age 65 or older for 14 days after the end of the camp session.

Overnight Youth Camp Families

Be advised:

Youth camps, whether resident/overnight or day, may prepare to open and obtain the necessary supplies and equipment in order to follow the below health and safety protocols. At this time, resident/overnight youth camps may open on May 31, 2020. These protocols may be updated based on guidance from the CDC and/or the American Academy of Pediatrics.

A note about children and COVID-19:

The virus that causes COVID-19 can infect people of all ages. While the risk of serious illness or loss of life is greatest in those 65 years of age or older with pre-existing health conditions, persons in every age group can become infected with COVID-19 and some may become seriously ill or even die.

We should all be thankful that, with rare exceptions, COVID-19 is not claiming the lives of our children. However, we can never forget that a child with a mild or even asymptomatic case of COVID-19 can spread that infection to others who may be far more vulnerable.

COVID-19 is spread from person to person through contact that is close enough to share droplets generated by coughing, sneezing, speaking, and even just breathing. COVID-19 can also be spread by touching objects where contaminated droplets have landed. Because of this easy manner of transmission, an infant, child or young person who is infected with COVID-19 can spread the infection to others they come in close contact with, such as members of their household, teachers, or other caregivers. We have learned that infected persons with mild or even no symptoms can spread COVID-19.

These facts are vitally important when considering the reopening of schools, child care centers, youth camps and other places that provide care and education for our children. One thing is for certain: We must find reasonably safe ways to restore these services so that our children can be cared for and educated, and for their parents and guardians to be able to return to work.

For adults in the workplace or other public spaces, we are confident that if certain measures such as cloth face coverings or non-medical grade masks, respiratory etiquette, frequent hand washing / hand sanitation and environmental cleaning and sanitizing are widely observed, we can then proceed with reopening Texas in a safe and measured way.

However, such protective measures that we can expect from adults are, for a variety of reasons, simply not possible for infants, children and youth to practice in schools, child care centers, and youth camps. In some cases, the child will be too young to understand and practice these precautions. We cannot, for example, expect a group of toddlers or schoolchildren not to engage in interactive play or share toys.

All of these factors mean that while certain precautions against the spread of COVID-19 can and will be applied to schools, child care centers, and youth camps, the infection control measures that can be put in place in these settings will differ from those that are suitable for other social, business and commercial settings.

Every adult who is responsible for providing care or education for infants, children and youth in these settings must be aware of these facts and be willing to comply with the infection control measures that will be in place in these settings. Parents should monitor the health of their children and not send them to the program if they exhibit any symptom of COVID-19. They should seek COVID-19 testing promptly and report results to the program given the implications for other children, families, and staff. Individuals aged 65 or older are at a higher risk of COVID-19. Parents should protect any vulnerable persons who are members of the same household or

come into frequent, close contact with infants, children and youth who attend child care centers, schools, or youth camps.

About minimum health protocols:

The following are the minimum recommended health protocols for all individuals attending a resident/overnight youth camp in Texas. These minimum health protocols are not a limit on the health protocols that individuals may adopt. Individuals are encouraged to adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all Texans.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Individuals should stay informed and take actions based

Health protocols for resident/overnight campers:

- When and if informed by the camp operator that a child at camp has tested positive for COVID-19, the parent or guardian may choose to either pick up their camper or to let the camper remain and trust the camp to take appropriate safeguards.
- **Be aware of the enhanced risks of participants being in direct contact with anyone age 65 or older for 14 days after the camp session.**
- Before attending, upon arrival, and at least daily while at camp, the camper should be screened for any of the following new or worsening signs or symptoms of possible COVID-19:
 - Cough
 - Shortness of breath or difficulty breathing
 - Chills
 - Repeated shaking with chills
 - Muscle pain
 - Headache
 - Sore throat
 - Loss of taste or smell
 - Diarrhea
 - Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
 - Known close contact with a person who is lab confirmed to have COVID-19

- Once arriving at camp, do not have contact with the outside community until the camp session ends, including leaving the camp for school or family functions.
- Wash or sanitize hands at regular intervals, including before and after every meal and activity.
- Consistent with the actions taken by many individuals across the state, consider wearing cloth face coverings (over the nose and mouth) when at camp. If available, individuals should consider wearing non-medical grade face masks.

Health protocols for parents and guardians:

- Do not visit the camp during or between camp sessions, except to drop-off and pick-up campers.
 - Maintain a separation of at least 6 feet from individuals not within the household during camper drop-off and pick-up.
 - Remain in the vehicle at camper drop-off and pick-up, if possible.
 - No tours of the camp or cabins at camper drop-off or pick-up.
- Be available to pick up, or arrange to have picked up, a camper within 8 hours of notification that the camper is exhibiting symptoms of COVID-19 and needs to be removed from the camp.
 - A camper exhibiting COVID-19 symptoms will be immediately isolated until pick-up.
 - If the camper is tested for COVID-19 and tests positive, report the positive test to the camp.
 - Resident campers confirmed to have COVID-19 may not return to camp until all three of the following criteria are met: at least 3 days (72 hours) have passed since recovery (resolution of fever without the use of fever-reducing medications); and the individual has improvement in symptoms (e.g., cough, shortness of breath); and at least 10 days have passed since symptoms first appeared.
- Parents or guardians may choose to wait nearby until the camper's health screening is complete.
- Consistent with the actions taken by many individuals across the state, parents or guardians should consider wearing cloth face coverings (over the nose and mouth) when picking up or dropping off at camp. If available, individuals should consider wearing non-medical grade face masks.
- Camps should act consistent with all US State Department travel restrictions for international travel.

Health protocols for vulnerable populations:

Campers returning from an overnight camp should minimize in-person contact with any person 65 years of age or older, especially those with pre-existing health conditions, for a period of 14 days. This includes maintaining social distancing of at least 6 feet of separation from those individuals,

wearing a face covering or mask, and avoiding sharing utensils or other common objects with those individuals.

Exhibit FF:
Minimum Standard Health Protocols for Youth Sports Operators and Youth Sports Families
as Outlined by the
Governor’s Strike Force
EFFECTIVE IN EL PASO MAY 31, 2020

Unless Modified by Subsequent Executive Order or County Judge Order

Effective May 31, 2020, youth sports may begin holding practices without spectators other than one parent or guardian per participant, as needed. Those sports may begin holding games or similar competitions, with or without spectators, on or after June 15, 2020. Spectators should maintain at least 6 feet social distancing from individuals not within the spectator’s group. The following are the minimum recommended health protocols for all youth sporting activities in Texas. Youth sports organizers may adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all employees, contractors, volunteers and participants.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk.

Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Youth sports organizers should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization. Youth sports organizers should also be mindful of federal and state employment and disability laws, workplace safety standards, and accessibility standards to address the needs of both workers and customers.

Health protocols for employees, contractors, and volunteers (“staff”):

- **Provide notice to all parents and guardians of the enhanced risks of participants being in direct contact with anyone age 65 or older for 14 days after participating in a sport event or practice.**
- Train all staff on appropriate cleaning and disinfection, hand hygiene, and respiratory etiquette.
- Screen all staff each day for any of the following new or worsening signs or symptoms of possible COVID-19:
 - Cough
 - Shortness of breath or difficulty breathing
 - Chills

- Repeated shaking with chills
- Muscle pain
- Headache
- Sore throat
- Loss of taste or smell
- Diarrhea
- Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
- Known close contact with a person who is lab confirmed to have COVID-19
- Limit staff with underlying conditions from attending or staffing the youth sporting event.
- Consistent with the actions taken by many employers across the state, consider having all staff wear cloth face coverings (over the nose and mouth). If available, staff should consider wearing non- medical grade face masks.
- Staff should mitigate environmental exposures by additional cleaning and disinfecting of symptomatic staff's work area, common areas, and bathrooms. Staff should follow and supervise the Program Activity Plan and, if applicable, the Transportation Plan.

Health protocols regarding sick participants and staff members:

- Isolate staff and participants exhibiting new or worsening signs or symptoms of possible COVID-19 and contact the local health department.
 - Do not allow staff with the new or worsening signs or symptoms of COVID-19 to return to work until:
 - In the case of a staffer who was diagnosed with COVID-19, the individual may return to work when all three of the following criteria are met: at least 3 days (72 hours) have passed since recovery (resolution of fever without the use of fever-reducing medications); and the individual has improvement in symptoms (e.g., cough, shortness of breath); and at least 10 days have passed since symptoms first appeared; or
 - In the case of a staffer who has symptoms that could be COVID-19 and does not get evaluated by a medical professional or tested for COVID-19, the individual is assumed to have COVID-19, and the individual may not return to work until the individual has completed the same three-step criteria listed above; or
 - If the staffer has symptoms that could be COVID-19 and wants to return to work before completing the above self-isolation period, the individual must obtain a medical professional's note clearing the individual for return based on a negative nucleic acid COVID- 19 test and an alternative diagnosis.
- Staff should help the operator in identifying exposure risks (a.k.a. contact tracing).
- Each sporting team is considered a cohort. Outside of the sporting event, discourage mixing between cohorts.
 - Immediately isolate any participant or staff member who tests positive for COVID-19.
 - If a staff member tests positive for COVID-19, the youth sports organizer should notify parents or guardians of possible exposure to a lab-confirmed case of COVID-19.

- If 3 or more cohorts in a sports league have individuals test positive for COVID-19, work with state and local public health authorities about continued operations of the youth sports league.
- Using the groups or cohort strategy, contact tracing can be initiated promptly, and isolation and surveillance can be implemented in short order.

Health protocols for spectators:

- Individuals should avoid being in a group larger than 10 individuals. Within these groups, individuals should, to the extent possible, minimize in-person contact with others not in the individual’s household. Minimizing in-person contact includes maintaining 6 feet of separation from individuals. When maintaining 6 feet of separation is not feasible, other methods should be utilized to slow the spread of COVID-19, such as wearing a face covering or mask, washing or sanitizing hand frequently, and avoiding sharing utensils or other common objects.
- Consistent with the actions taken by many individuals across the state, all spectators should consider wearing cloth face coverings (over the nose and mouth). If available, spectators should consider wearing non-medical grade face masks.

Health protocols for grounds and facilities:

- Develop, train, and implement increased daily sanitization protocols for common surfaces, restrooms, recreational equipment, and facilities.
- Make hand sanitizer, disinfecting wipes, soap and water, or similar disinfectant readily available throughout the facility.
- Consider having an individual wholly or partially dedicated to ensuring the health protocols adopted by the youth sports league are being successfully implemented and followed.
- Health policies and protocols should include communicating and coordinating with the local health department, local emergency services, and local health care providers.
- Consistent with the actions taken by many employers across the state, consider having all staff and participants wear cloth face coverings (over the nose and mouth). If available, staff and participants should consider wearing non-medical grade face masks.

Health protocols for youth sports facilities:

- Develop and implement a Program Activity Hygiene Plan to include:
 - Sanitization of all program areas
 - Sanitization of equipment before and after use
 - Hand washing or hand sanitizing before and after activities
- Group excursions related to youth sports are strongly discouraged, and should be limited or eliminated where feasible. To the extent those excursions continue, develop and implement Transportation Protocols to include:
 - One individual per seat and every other row in a vehicle
 - Staggered seating for maximum distancing

- Asking participants and staff to wear face coverings or masks while in vehicle
- All individuals should sanitize hands upon boarding the vehicle
- Remind participants, parents, and guardians of the enhanced risks of participants being in direct contact with anyone age 65 or older for 14 days after participating in the youth sporting event or practice.

Youth Sports Families

A note about children and COVID-19:

The virus that causes COVID-19 can infect people of all ages. While the risk of serious illness or loss of life is greatest in those 65 years of age or older with pre-existing health conditions, persons in every age group can become infected with COVID-19 and some may become seriously ill or even die.

We should all be thankful that, with rare exceptions, COVID-19 is not claiming the lives of our children. However, we can never forget that a child with a mild or even asymptomatic case of COVID-19 can spread that infection to others who may be far more vulnerable.

COVID-19 is spread from person to person through contact that is close enough to share droplets generated by coughing, sneezing, speaking, and even just breathing. COVID-19 can also be spread by touching objects where contaminated droplets have landed. Because of this easy manner of transmission, an infant, child or young person who is infected with COVID-19 can spread the infection to others they come in close contact with, such as members of their household, teachers, or other caregivers. We have learned that infected persons with mild or even no symptoms can spread COVID-19.

These facts are vitally important when considering engaging in youth sporting activities.

One thing is for certain: We must find reasonably safe ways to restore these services so that our children can be cared for, and for their parents and guardians to be able to return to work.

For adults in the workplace or other public spaces, we are confident that if certain measures such as cloth face coverings or non-medical grade masks, respiratory etiquette, frequent hand washing / hand sanitation and environmental cleaning and sanitizing are widely observed, we can then proceed with reopening Texas in a safe and measured way.

However, such protective measures that we can expect from adults are, for a variety of reasons, simply not possible for infants, children and youth to practice in sporting activities.

All of these factors mean that while certain precautions against the spread of COVID-19 can and will be applied to youth sports, the infection control measures that can be put in place in these settings will differ from those that are suitable for other social, business and commercial settings.

Every adult who is responsible for providing care for youth in these settings must be aware of these facts and be willing to comply with the infection control measures that will be in place in these settings. Parents should monitor the health of their children and not send them to

participate in sporting activities if they exhibit any symptom of COVID-19. They should seek COVID-19 testing promptly and report results to the program given the implications for other children, families, and staff. Individuals aged 65 or older are at a higher risk of COVID-19. Parents should protect any vulnerable persons who are members of the same household or come into frequent, close contact with individuals who participate in youth sports.

About minimum health protocols:

The following are the minimum recommended health protocols for all individuals participating in youth sports. These minimum health protocols are not a limit on the health protocols that individuals may adopt. Individuals are encouraged to adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all Texans.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Individuals should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization.

Health protocols for participants:

- Consistent with the actions taken by many individuals across the state, consider wearing cloth face coverings (over the nose and mouth) when participating in the youth sporting event and practice. If available, individuals should consider wearing non-medical grade face masks.
- Screen the participant before attending the youth sporting event or practice for any of the following new or worsening signs or symptoms of possible COVID-19:
 - Cough
 - Shortness of breath or difficulty breathing
 - Chills
 - Repeated shaking with chills
 - Muscle pain
 - Headache
 - Sore throat
 - Loss of taste or smell
 - Diarrhea
 - Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit

- Known close contact with a person who is lab confirmed to have COVID-19
- Carry and use hand sanitizer regularly, including before and after every meal and activity.

Health protocols for parents and guardians:

- Individuals should avoid being in a group larger than 10 individuals. Within these groups, individuals should, to the extent possible, minimize in-person contact with others not in the individual's household. Minimizing in-person contact includes maintaining 6 feet of separation from individuals. When maintaining 6 feet of separation is not feasible, other methods should be utilized to slow the spread of COVID-19, such as wearing a face covering or mask, washing or sanitizing hand frequently, and avoiding sharing utensils or other common objects.
- Consistent with the actions taken by many individuals across the state, all spectators should consider wearing cloth face coverings (over the nose and mouth). If available, spectators should consider wearing non-medical grade face masks.

Health protocols for vulnerable populations:

Children participating in youth sporting events or practice should minimize in-person contact with any person 65 years of age or older, especially those with pre-existing health conditions, for a period of 14 days. This includes maintaining social distancing of at least 6 feet of separation from those individuals, wearing a face covering or mask, and avoiding sharing utensils or other common objects with those individuals.

Exhibit GG



**FOURTH STANDING ORDER REGARDING CORONAVIRUS DISEASE (COVID-19)
MITIGATION AND ALL JUSTICES OF THE PEACE IN EL PASO COUNTY (Order No. 03)**

Due to the coronavirus disease (COVID-19), and by the authority granted by law and by the any EMERGENCY ORDER by and of THE SUPREME COURT OF TEXAS REGARDING THE COVID-19 STATE OF DISASTER by and of the Supreme Court of Texas and the Court of Criminal Appeals of Texas, the eight Justices of the Peace in El Paso County ("Justices of the Peace") issue the following order based on our previous orders (Orders No. 1, No. 2 and No. 3) to protect the community, limit exposure, and provide for an efficient judicial system:

1. This order amends paragraph 2 of the THIRD STANDING ORDER REGARDING CORONAVIRUS DISEASE (COVID-19) MITIGATION AND ALL JUSTICES OF THE PEACE IN EL PASO COUNTY.
 - a. A writ of possession on a residential or commercial property may issue; however, a hearing for eviction will not be held until after June 22, 2020, unless scheduled prior to the issuance of this order.
 - b. Other than "imminent threat" evictions, no eviction citation may be issued before June 15, 2020, unless issued prior to the implementation of this order.

This order is in effect immediately.

The time periods in this order may be extended in a subsequent order if required.

Signed: May 19, 2020





Judge Josh Herrera

On behalf of the Justices of the Peace in El Paso County, TX

Hon. Robert Pearson
Justice of the Peace, Precinct 1
El Paso County, Texas

Hon. Josh Herrera
Justice of the Peace, Precinct 3
El Paso County, Texas

Hon. John Chatman
Justice of the Peace, Precinct 5
El Paso County, Texas

Hon. Enedina "Nina" Serna
Justice of the Peace, Precinct 6-2
El Paso County, Texas

Hon. Brian Haggerty
Justice of the Peace, Precinct 2
El Paso County, Texas

Hon. Rebecca Bustamante
Justice of the Peace, Precinct 4
El Paso County, Texas

Hon. Ruben Lujan
Justice of the Peace, Precinct 6-1
El Paso County, Texas

Hon. Stephanie Fietze
Justice of the Peace, Precinct 7
El Paso County, Texas

Exhibit HH:

Reopening Texas Timeline Executive Order GA-23

