



ORDER OF THE HEALTH OFFICER No. C19-07y (updated)

**ORDER OF THE HEALTH OFFICER
OF THE CITY AND COUNTY OF SAN FRANCISCO
ENCOURAGING COVID-19 VACCINE COVERAGE
AND REDUCING DISEASE RISKS
(Safer Return Together)**

DATE OF ORDER: June 11, 2021, updated multiple times, most recently on
~~September 15~~December 21, 2022

Please read this Order carefully. Violation of or failure to comply with this Order is a misdemeanor punishable by fine, imprisonment, or both. (California Health and Safety Code § 120295, *et seq.*; California Penal Code §§ 69, 148(a)(1); and San Francisco Administrative Code § 7.17(b).)

Summary: As of ~~September 15~~December 21, 2022, this Order replaces the prior update of this health order, Health Officer Order No. C19-07y (issued ~~June 16~~September 15, 2022), in its entirety. This Order largely aligns with the COVID-19 orders of the State. The main changes made by the ~~September 15~~December 21, 2022 update are to (1) ~~remove~~update the ~~requirement for firefighters, paramedics, and EMTs who routinely work~~terms Booster, Booster-Eligible, and Up-to-Date on Vaccination and clarify language related to Boosters in High-Risk Settings to ~~receive their first Booster and require them, regardless of vaccination status, to wear a Well-Fitting Mask or other, more protective respirator when inside such High-Risk Settings~~align with California Department of Public Health Guidelines and vaccine requirements, (2) update ~~masking, vaccination, and testing requirements and recommendations consistent with updated United States Centers for Disease Control and Prevention and~~ the term Close Contact to align with California Department of Public Health isolation and quarantine guidelines and orders, ~~making clear that masks are still,~~ and (3) ~~add clarifications regarding settings where it is required in healthcare settings in San Francisco and removing the requirement for people claiming an exemption from receipt of a Booster to test regularly, and (3) making other updates based on to wear a Well-Fitting Mask without changing the current status of the pandemic. existing requirements.~~

The Health Officer is updating the Order in light of State guidelines ~~and the relatively low number of. Although~~ hospitalizations and infections in the ~~community associated with the spread in~~ San Francisco and the Bay Area region of SARS-CoV-2; ~~started the Fall relatively low and stable, hospitalizations and infections have been on the rise since the virus that causes COVID-19~~start of November 2022. There remains the ongoing threat that the virus, including other future variants or subvariants, poses, particularly to the health of medically vulnerable residents. ~~But, based~~Based on current scientific knowledge, San Francisco is well positioned to address the current level of the virus and future increases in cases due in large part to the high rate of vaccination in the



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community, greater availability of effective treatments for those who are vulnerable to severe disease, and effective use of mitigation strategies, such as masking in indoor public settings when there are high levels of community transmission. The best pathway for San Francisco to continue to move forward in the face of the virus is for as many people as possible to complete their initial series of vaccination and receive ~~their booster~~the new bivalent booster, when eligible. Vaccines and Boosters that target SARS-CoV-2 continue to protect against severe disease. The United States Centers for Disease Control and Prevention and the California Department of Public Health recommend that everyone who has been vaccinated receive a booster shot as soon as they are eligible because immunity wanes several months after completion of the ~~initial~~last vaccine ~~series~~dose. In the future, the Health Officer may need to adjust health precautions depending on the specific characteristics of future variants, and if so, the Health Officer will continue to use the least restrictive health measures to prevent severe disease on a population level basis in the community.

Even though a high percentage of people are vaccinated in San Francisco and the Bay Area region and a significant percentage are boosted against the virus that causes COVID-19, there remains a risk that people may come into contact with others who have COVID-19 when outside their residence, particularly during periods of moderate or high community transmission. Many COVID-19 infections are caused by people who have no symptoms of illness. Also, there are people in San Francisco who have not completed their initial vaccine series or who are not yet Boosted or eligible to receive a Booster, ~~including some young children~~, and people who are immuno-compromised and may be particularly vulnerable to infection and disease. And although San Francisco has an uptake of the new bivalent Booster that is relatively good compared to most of the United States, the rates are still low, with only 32 percent of San Francisco residents having received the bivalent Booster.

Based on current health conditions and balancing those considerations with acknowledgement that there remains ongoing risk to vulnerable populations and the potential for future surges, this Order maintains face covering guidelines based on an individual risk-focused approach. In this Order the Health Officer recommends that individuals wear a Well-Fitted Mask in indoor public settings based on three factors. First, you should consider your own risk tolerance. Second, you should consider the overall level of community transmission, such as when future variants occur or when cases increase in the Fall and Winter seasons (e.g., the higher the rate of community transmission, the more seriously you should consider wearing a mask in indoor public settings). Third, you should consider whether you or someone with whom you work or live is at risk of severe disease.

At the same time, wearing a Well-Fitted Mask is still required or recommended under federal and state health rules in certain settings, including: in emergency shelters and cooling centers; in healthcare settings; in state and local correctional facilities and detention centers; in homeless shelters; and in long term care settings and adult and senior care facilities. In these High-Risk Settings, even when state or federal rules only recommend masking, this Order maintains the requirement that a mask be worn. A copy



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of the current CDPH masking order is available online at www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/guidance-for-face-coverings.aspx. Consistent with changes by the State of California on April 20, 2022, (and subject to any future state or federal masking mandates), the Health Officer continues to strongly recommend, but does not require, that all people, regardless of vaccination status, wear a Well-Fitted Mask on public transportation and in indoor public transportation facilities.

This Order maintains the requirement, layered on top of the recently revised CDPH health orders, for (1) Personnel working in designated High-Risk Settings—meaning general acute care hospitals, skilled nursing facilities, intermediate care facilities, residential care facilities for the elderly, homeless shelters, and jails, all as further defined below—as well as (2) Personnel working in other higher-risk settings—including adult care facilities, adult day programs, dental offices, home health care workers, and pharmacists—to both receive the full initial course of vaccination and, once they are eligible, to receive a Booster. But, based on changed health conditions, the moderate to low number of cases and hospitalizations in the community, high levels of vaccination, availability of effective treatments, and reduced outbreak risk as determined by federal, state, and local public health officials, Personnel who are not permanently stationed or regularly assigned to High-Risk Settings but who in the course of their duties may enter or work in High-Risk Settings on an intermittent or occasional basis or for short periods of time (such as police and lawyers who visit people in the jails) are no longer required to receive a Booster, but are strongly encouraged to do so. And such people must wear a Well-Fitting Mask whenever they are onsite at a High-Risk Setting. Additionally, Personnel at homeless shelters (other than congregate living health facilities) are not required to receive a Booster under this Order, but are strongly encouraged to do so.

California and San Francisco have been fully reopened since June 15, 2021. Consistent with State guidelines, this Order maintains other minimum COVID-19 safety requirements on businesses and governmental entities, such as a general requirement to report outbreaks in the workplace. And although Governor Newsom has announced his plan to end the statewide COVID-19 State of Emergency on February 28, 2023, the State has not clarified which of its mandates and orders it will keep, terminate, or revise. The Health Officer will continue to monitor information from the State and is evaluating what changes to the local orders and directives that are still in place may be warranted. It is likely that as a result of that evaluation the Health Officer will change the remaining local orders and directives in line with the State's changes.

**UNDER THE AUTHORITY OF CALIFORNIA HEALTH AND SAFETY CODE
SECTIONS 101040, 101085, AND 120175, THE HEALTH OFFICER OF THE CITY AND
COUNTY OF SAN FRANCISCO ORDERS:**

1. Definitions.



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For purposes of this Order, the following initially capitalized terms have the meanings given below.

- a. *Booster*. A “Booster” means an additional dose of a vaccine authorized to prevent COVID-19 by the FDA, including by way of an emergency use authorization, or by the World Health Organization (WHO), for which a person is Booster-Eligible. Consistent with CDC and CDPH guidance, either the Pfizer-BioNTech (Comirnaty) or Moderna (Spikevax) COVID-19 vaccine is preferred for the Booster. The term “Booster” includes any such additional dose authorized by the FDA, including formulations that are different than the original COVID-19 vaccines (such as bivalent boosters available starting in September 2022 or other future formulations). For clarity, if this Order mandates a Booster dose, it does not require that the formulation be an updated formulation, but the Order strongly encourages everyone to follow CDC vaccine and booster recommendations, including recommendations for receipt of subsequent Booster doses when indicated. A person is considered “Boosted” as soon as they receive their Booster.
- b. *Booster-Eligible*. A person is “Booster-Eligible” once they meet criteria to receive a Booster under CDC or CDPH guidance. ~~Consistent with The CDC guidance has been frequently updating its Booster eligibility criteria~~ (available online at www.cdc.gov/coronavirus/2019-ncov/vaccines/booster-shot.html), ~~anyone who received a WHO-authorized vaccine or a combination of vaccines should receive the Pfizer-BioNTech (Comirnaty) vaccine as their booster pursuant to the timing listing in that guidance. Those preferences apply to all initial vaccination series, regardless of which vaccine an individual received. The CDC has been frequently updating booster eligibility. More up and CDPH Booster eligibility guidance is also available online (available at www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/COVID-19-Vaccine-Boosters.aspx).~~ Up-to-date information on booster eligibility may be found online at <https://sf.gov/get-your-covid-19-booster>, and individuals, Businesses, and governmental entities are urged to stay informed about changes.
- c. *Business*. A “Business” includes any for-profit, non-profit, or educational entity, whether a corporate entity, organization, partnership or sole proprietorship, and regardless of the nature of the service, the function it performs, or its corporate or entity structure.
- d. *Cal/OSHA*. “Cal/OSHA” means the California Department of Industrial Relations, Division of Occupational Safety and Health, better known as Cal/OSHA.
- e. *CDC*. “CDC” means the United States Centers for Disease Control and Prevention.
- f. *CDPH*. “CDPH” means the California Department of Public Health.
- g. *Close Contact*. ~~“Close Contact” means sharing the same indoor airspace~~ The term “Close Contact” is intended to align with the CDPH definition, as set forth in the CDPH Guidance for Local Health Jurisdictions on Isolation and Quarantine of the



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General Public (available online at www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Guidance-on-Isolation-and-Quarantine-for-COVID-19-Contact-Tracing.aspx). As of the date of issuance of the most recent update to this Order, “Close Contact” means sharing the same indoor airspace (of 400,000 or fewer cubic feet per floor) with a Person With COVID-19 for a total of 15 minutes or more in a 24-hour period while the person is in their Infectious Period. In larger indoor spaces (greater than 400,000 cubic feet per floor), “Close Contact” means being within 6 feet of the Person With COVID-19 for a cumulative total of 15 minutes or more over a 24- hour period while the person is in their Infectious Period.

In turn, a “Person With COVID-19” means a person who tests positive for the virus that causes COVID-19 (SARS-CoV-2) or has been clinically diagnosed with COVID-19 by a healthcare provider—, and this term is meant to align with the CDPH phrase “an infected person.”

A Person with COVID-19 is in their Infectious Period as follows:

- i. For symptomatic infected people, starting two days before the infected person had any symptoms through when all three of the following criteria are met: the earlier of either day 10 after symptoms first appeared or the day on which they test negative between days five and 10, whichever is earlier; and 24 hours have passed with no fever without the use of fever-reducing medications; and symptoms have improved.
- ii. For asymptomatic infected people, starting two days before the positive specimen collection date through the earlier of day 10 after the positive specimen collection date or the day on which they test negative between days five and 10 after the specimen collection date for their first positive COVID-19 test.

Any changes to the CDPH definition of the terms “Close Contact” or “Infectious Period” are automatically incorporated by this reference without any need to update this Order. (Note that Cal/OSHA may have different rules regarding being a close contact in the workplace, and those rules apply in the workplace setting.)

g.h. *County*. The “County” means the City and County of San Francisco.

h.i. *COVID-19*. “COVID-19” means coronavirus disease 2019, the disease caused by the SARS-CoV-2 virus and that resulted in a global pandemic.

i.j. *DPH*. “DPH” means the San Francisco Department of Public Health.

j.k. *DPH Core Guidance*. “DPH Core Guidance” means the webpage and related materials that DPH regularly updates and includes health and safety recommendations



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for individuals and Businesses as well as web links to additional resources, available online at <https://sf.gov/covid19>.

k.l. Face Covering Requirements. “Face Covering Requirements” means the limited requirements to wear a Well-Fitted Mask (i) under federal or state law including, but not limited to, California Department of Public Health guidance and Cal/OSHA’s regulations; (ii) in indoor common areas of homeless shelters, emergency shelters, and cooling centers, except while sleeping, showering, engaged in personal hygiene that requires removal of face coverings, or actively eating or drinking; (iii) in indoor common areas of jails except while sleeping, showering, engaged in personal hygiene that requires removal of face coverings, or actively eating or drinking; and (iv) under Section 3(b), below and Appendix A, attached to the Order, including all Personnel who work in High-Risk Settings (subject to status-based exemptions from Section 4 of Appendix A). If a separate state, local, or federal order or directive imposes different face covering requirements, including requirements to wear respirators or surgical masks in certain settings, the more health protective requirement applies.

k.m. FDA. “FDA” means the United States Food and Drug Administration.

k.n. Fully Vaccinated. “Fully Vaccinated” has the same meaning as the newer term “Vaccinated with a Complete Initial Series,” defined below. Because other pre-existing Health Officer orders and directives and other DPH or County guidance materials may still use the term Fully Vaccinated that term continues to be defined in this Order.

k.o. Health Officer. “Health Officer” means the Health Officer of the City and County of San Francisco.

k.p. High-Risk Settings. “High-Risk Settings” means certain care or living settings involving many people, including many congregate settings, where vulnerable populations reside out of necessity and where the risk of COVID-19 transmission is high, consisting of general acute care hospitals, skilled nursing facilities (including subacute facilities), intermediate care facilities, residential care facilities for the elderly, homeless shelters, and jails (including, but not limited to, the Juvenile Justice Center Juvenile Hall).

k.q. Household. “Household” means people living in a single Residence or shared living unit. Households do not refer to individuals who live together in an institutional group living situation such as in a dormitory, fraternity, sorority, monastery, convent, or residential care facility.

k.r. Mega-Event. “Mega-Event” means an event with either more than 1,000 people attending indoors or more than 10,000 people attending outdoors. As provided in the State’s Post-Blueprint Guidance, a Mega-Event may have either assigned or unassigned seating, and may be either general admission or gated, ticketed and permitted events.



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f.s. *Personnel.* “Personnel” means the following people who provide goods or services associated with a Business in the County: employees; contractors and sub-contractors (such as those who sell goods or perform services onsite or who deliver goods for the Business); independent contractors; vendors who are permitted to sell goods onsite; volunteers; and other individuals who regularly provide services onsite at the request of the Business. “Personnel” includes “gig workers” who perform work via the Business’s app or other online interface, if any.

s.t. *Qualifying Medical Reason.* “Qualifying Medical Reason” means a medical condition or disability recognized by the FDA or CDC as a contra-indication to COVID-19 vaccination.

t.u. *Religious Beliefs.* “Religious Beliefs” means a sincerely held religious belief, practice, or observance protected by state or federal law.

u.v. *Residence.* “Residence” means the location a person lives, even if temporarily, and includes single-family homes, apartment units, condominium units, hotels, motels, shared rental units, and similar facilities. Residences also include living structures and outdoor spaces associated with those living structures, such as patios, porches, backyards, and front yards that are only accessible to a single family or Household.

v.w. *Schools.* “Schools” mean public and private schools operating in the County, including independent, parochial, and charter schools.

w.x. *State’s Post-Blueprint Guidance.* The “State’s Post-Blueprint Guidance” means the guidance entitled “Beyond the Blueprint for Industry and Business Sectors” that the California Department of Public Health issued on May 21, 2021 and updated as of May 2, 2022, including as the State may further extend, update or supplement that guidance in the future. (See www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Beyond-Blueprint-Framework.aspx.)

x.y. *Test and Tested.* “Tested” means to have a negative test (a “Test”) for the virus that causes COVID-19 within the applicable timeframe as listed in this Order. Both nucleic acid (including polymerase chain reaction (PCR)) and antigen tests are acceptable. The following are acceptable as proof of a negative COVID-19 test result: a printed document (from the test provider or laboratory) or an email, text message, webpage, or application (app) screen displayed on a phone or mobile device from the test provider or laboratory. The information should include person’s name, type of test performed, negative test result, and date the test was administered. If any state or federal agency uses a more restrictive definition of what it means to be Tested for specified purposes (such as Cal/OSHA rules for employers in workplaces), then that more restrictive definition controls for those purposes. Some sections of this Order require antigen tests to be third-party verified (meaning administered or observed by the third-party) to meet requirements for showing proof of a negative Test.



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~~y-z.~~ *Unvaccinated.* “Unvaccinated” refers to a person ~~age two~~six months or older who is eligible for COVID-19 vaccination and who is either (i) not at least Vaccinated with a Complete Initial Series or (ii) in an indoor setting where this Order requires proof of being Vaccinated with a Complete Initial Series as a condition of entry but has not provided such proof.

~~z-aa.~~ *Up-to-Date on Vaccination.* “Up-to-Date on Vaccination” means when a person both (i) is Vaccinated with a Complete Initial Series and (ii) has received ~~each~~the most recent Booster dose recommended by the CDC ~~for that person once the person is Booster-Eligible.~~ A person is Up-to-Date on Vaccination immediately on receipt of ~~all the most recent CDC-recommended Boosters for which that person is then eligible. Until~~ Booster. And until a person is ~~Booster-Eligible, Eligible (generally as soon as two months and no later than six months since completing the entire recommended initial series of vaccination with a vaccine authorized to prevent COVID-19 by the FDA),~~ they are considered Up-to-Date on Vaccination two weeks after completing their full initial series of vaccination.

~~aa-bb.~~ *Vaccinated with a Complete Initial Series.* “Vaccinated with a Complete Initial Series” means two weeks after completing the entire recommended initial series of vaccination (usually one or two doses) with a vaccine authorized to prevent COVID-19 by the FDA, including by way of an emergency use authorization, or by the World Health Organization (WHO). For example, as of the date of issuance of this Order, an individual has completed an initial vaccination series at least two weeks after receiving a second dose of the Pfizer-BioNTech (Comirnaty) or Moderna (Spikevax) COVID-19 vaccine or two weeks after receiving the single dose Johnson & Johnson’s Janssen COVID-19 vaccine. A list of FDA-authorized vaccines is available at www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/covid-19-vaccines. A list of WHO-authorized vaccines is available at <https://extranet.who.int/pqweb/vaccines/covid-19-vaccines>. On August 23, 2021, the FDA granted full approval for the Pfizer-BioNTech (Comirnaty) vaccine for people age 16 and older, and on January 31, 2022, the FDA granted full approval for the Moderna (Spikevax) vaccine for people age 18 and older. And, on October 29, 2021, the FDA granted emergency use authorization for the Pfizer-BioNTech vaccine for children age five to 11. On June 17, 2022, the FDA granted emergency authorization for the Pfizer-BioNTech (Comirnaty) and Moderna (Spikevax) COVID-19 vaccines to include use in children who are at least six months old.

Unless otherwise specified, the following are acceptable as proof of being Vaccinated with a Complete Initial Series or Up-to-Date on Vaccination: (i) the CDC vaccination card, which includes name of person vaccinated, type of vaccine provided, and date last dose administered, or similar documentation issued by another foreign governmental jurisdiction, (ii) a photo of a vaccination card as a separate document, (iii) a photo of the a vaccination card stored on a phone or electronic device, (iv) documentation of vaccination from a healthcare provider, (v) unless prohibited elsewhere in this Order in a specific context, written self-attestation of vaccination signed (including an electronic signature) under penalty of perjury and



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containing the name of the person vaccinated, type of vaccine taken, and date of last dose administered, or (vi) a personal digital COVID-19 vaccine record issued by the State of California and available by going to <https://myvaccinerecord.cdph.ca.gov> or similar documentation issued by another State, local, or foreign governmental jurisdiction, or by an approved private company (a list of approved companies offering digital vaccine verification is available at <https://sf.gov/information/digital-vaccine-cards>). If any state or federal agency uses a more restrictive definition of what it means to be Vaccinated with a Complete Initial Series or to prove that status for specified purposes (such as Cal/OSHA rules for employers in workplaces), then that more restrictive definition controls for those purposes. Also, to the extent Cal/OSHA approves an alternate means of documenting whether an employee has completed the full initial series or is “fully vaccinated,” even if less restrictive than the definition contained here, employers may use the Cal/OSHA standard to document their employees’ vaccination status.

~~bb~~.cc. *Ventilation Guidelines*. “Ventilation Guidelines” means ventilation guidance from recognized authorities such as the CDC, the American Society of Heating, Refrigerating and Air-Conditioning Engineers, or the State of California (available online at www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Interim-Guidance-for-Ventilation-Filtration-and-Air-Quality-in-Indoor-Environments.aspx), including Cal/OSHA.

ee.dd. *Well-Fitted Mask*. A “Well-Fitted Mask” means a face covering that is well-fitted to an individual and covers the nose and mouth especially while talking, consistent with the Face Covering Requirements. CDC guidance regarding Well-Fitted Masks may be found at www.cdc.gov/coronavirus/2019-ncov/your-health/effective-masks.html. A well-fitting non-vented N95, KN95, or KF94 respirator is strongly recommended as a Well-Fitted Mask, even if not fit-tested, to provide maximum protection. A well-fitting surgical/procedural mask with a cloth mask worn over it to increase fit is also recommended. Given higher transmissibility of the Omicron variant, cloth masks alone are no longer recommended. A Well-Fitted Mask does not include a scarf, ski mask, balaclava, bandana, turtleneck, collar, or single layer of fabric or any mask that has an unfiltered one-way exhaust valve.

2. Purpose and Intent.

- a. Purpose. The public health threat of serious illness or death from COVID-19 is much lower in the County and the Bay Area than many parts of the State and country due to the high rate of vaccination of the community. But COVID-19 continues to pose a risk especially to individuals who are not eligible to be vaccinated or are not yet Up-to-Date on Vaccination, and certain safety measures continue to be necessary or strongly recommended to protect against COVID-19 cases and deaths. Being Up-to-Date on Vaccination, including ~~receiving all~~ receipt of the most recent Booster recommended Boosters as soon as by the CDC once eligible to receive that ~~Booster-Eligible~~, is the most effective method to prevent transmission and ultimately COVID-19 hospitalizations and deaths. It is important to ensure that as many eligible people



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as possible are vaccinated against COVID-19. Further, it is critical to ensure there is continued reporting of cases to protect individuals and the larger community. Accordingly, this Order allows Businesses, schools, and other activities to resume fully while at the same time maintaining certain requirements or recommendations designed to (1) extend vaccine coverage to the greatest extent possible; (2) limit transmission risk of COVID-19; (3) contain any COVID-19 outbreaks; and (4) generally align with guidance issued by the CDC and the State relating to COVID-19 except in limited instances where local conditions require more restrictive measures. This Order is based on evidence of continued community transmission of SARS-CoV-2 within the County as well as scientific evidence and best practices to prevent transmission of COVID-19. The Health Officer will continue to monitor data regarding the evolving scientific understanding of the risks posed by COVID-19, including the impact of vaccination, and may amend or rescind this Order based on analysis of that data and knowledge. It is possible that the Health Officer will determine in the future that prior health precautions that have been relaxed or removed need to be imposed again, based on changes in local health conditions and the course of the pandemic.

- b. Intent. The primary intent of this Order is to continue to protect the community from COVID-19, including by providing health recommendations as requirements are lifted, and to also increase vaccination rates to reduce transmission of COVID-19 long-term, so that the whole community is safer and the COVID-19 health emergency can come to an end.
- c. Interpretation. All provisions of this Order must be interpreted to effectuate the purposes and intent of this Order as described above. The note and summary at the beginning of this Order as well as the headings and subheadings of sections contained in this Order are for convenience only and may not be used to interpret this Order. In the event of any inconsistency between the summary, headings, or subheadings and the text of this Order, the text will control. Certain initially capitalized terms used in this Order have the meanings given them in Section 1 above. The interpretation of this Order in relation to the health orders or guidance of the State is described in Section 10 below.
- d. Application. This Order applies to all individuals, Businesses, and other entities in the County. For clarity, the requirements of this Order apply to all individuals who do not currently reside in the County when they are in the County. Governmental entities must follow the requirements of this Order that apply to Businesses, unless otherwise specifically provided in this Order or directed by the Health Officer.
- e. DPH Core Guidance. All individuals and Businesses are strongly urged to refer to, and where applicable follow, the DPH Core Guidance (available online at <https://sf.gov/topics/coronavirus-covid-19><https://sf.gov/covid19>) containing health and safety recommendations for COVID-19.



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- f. Effect of Failure to Comply. Failure to comply with any of the provisions of this Order constitutes an imminent threat and menace to public health, constitutes a public nuisance, and is punishable by fine, imprisonment, or both, as further provided in Section 12 below.

3. General Requirements for Individuals.

- a. Vaccination. Individuals are strongly urged to be Up-to-Date on Vaccination, ~~meaning, as further provided in Section 1, that they are Vaccinated with a Complete Initial Series and, as soon as they are Booster Eligible, receive their recommended Boosters, including receipt of the most recent Booster recommended by the CDC once eligible to receive that Booster.~~ In particular, people at risk for severe illness with COVID-19—such as unvaccinated older adults and unvaccinated individuals with health risks—and members of their Household, are urged to be Up-to-Date on Vaccination, including receiving ~~all~~the most recent Booster recommended ~~Boosters~~by the CDC once eligible to receive that Booster, as soon as they can. Information about who is at increased risk of severe illness and people who need to take extra precautions can be found at www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html. For those who are not yet Up-to-Date on Vaccination, making informed choices about the risk of different activities, wearing a Well-Fitted Mask indoors when appropriate, testing before risky gathering indoors, or choosing outdoor activities when appropriate are also ways to prevent the risk of COVID-19 transmission. Individuals who are Up-to-Date on Vaccination have the best protection against COVID-19.

- b. Face Coverings. Everyone, and especially those who remain Unvaccinated, is recommended to wear a Well-Fitted Mask in the following situations:

- When an individual wants added protection based on individual risk tolerance, for example, when indoors with people whose vaccination status is unknown. People should respect an individual's decision to wear face coverings even in settings where they are not required, and no Business or other person should take an adverse action against individuals who chose to wear a face covering to protect their health.
- When there is a higher risk of community spread and infection, such as when COVID-19 case numbers increase, and case numbers in San Francisco can be found online at <https://sf.gov/data/covid-19-cases-and-deaths>.
- When an individual, or someone with whom an individual lives or works, is at a higher risk of a negative health outcome, such as older and immuno-compromised individuals.

- i. Masks Required or Strongly Recommended in Certain Settings. Everyone is required to wear a Well-Fitted Mask, regardless of vaccination status, in the



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following indoor settings: High-Risk Settings; health care settings as required by CDPH guidance and by this Order; other workplaces or settings where masking is required by the Business or setting or by regulatory orders and rules; and anywhere else that federal or state health orders or regulatory rules (including, but not limited to, Cal/OSHA and federal requirements) require doing so. For purposes of clarity, all Personnel in High-Risk Settings, including but not limited to jails, must wear a Well-Fitted Mask at all times except when engaged in other activities exempt from masking listed in Section 3 of Appendix A (such as when actively eating or drinking). And although CDPH guidance allows removal of a Well-Fitted Mask in non-clinical areas of homeless shelters, emergency shelters, cooling and heating centers, and state and local correctional facilities and detention centers when community transmission rates are low, this Order maintains the requirement that a Well-Fitted Mask be worn by everyone in those High-Risk Settings except when engaged in other activities exempt from masking listed in Section 3 of Appendix A.

In addition, and subject to any future state or federal masking mandates, everyone, regardless of vaccination status, is strongly recommended to wear a Well-Fitted Mask when riding or waiting inside to ride on public transit, including everyone who is inside the vehicle or other mode of transportation or is indoors at a public transit stop or station. This strong recommendation extends to all modes of transportation other than private vehicles, such as airplanes, trains, subways, buses, taxis, ride-shares, maritime transportation, street cars, and cable cars.

Appendix A lists exceptions and allowances in such settings when a Well-Fitted Mask is not required. And, wearing a Well-Fitted Mask is strongly recommended for those in isolation or quarantine.

- ii. Fit and Filtration Guidance. When wearing a mask, everyone should consistently wear the best mask they can obtain, considering fit and filtration (and without using a one-way exhalation valve that is not filtered). As provided in the definition of a Well-Fitted Mask, a well-fitting non-vented N95, KN95, or KF94 respirator is strongly recommended. A well-fitting surgical/procedural mask with a cloth mask worn over it to increase fit is also recommended. More information about fit and filtration and the best mask options is available online at www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Get-the-Most-out-of-Masking.aspx.
- c. Monitor for Symptoms. Individuals should monitor themselves for symptoms of COVID-19. A list of COVID-19 symptoms is available online at www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html. Anyone with any symptom that is new or not explained by another condition must comply with subsections 3(d) and 3(e) below regarding isolation and quarantine.
- d. Isolation. Anyone who has or likely has COVID-19, meaning that person (i) has a positive COVID-19 test result, (ii) is diagnosed with COVID-19, or (iii) has a COVID-19 symptom that is new or not explained by another condition, must refer to



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the latest COVID-19 isolation and quarantine health directive issued by the Health Officer (available online at <https://sf.gov/healthrules>) and follow the requirements detailed there. There are special requirements for healthcare workers and emergency medical services personnel in healthcare settings.

- e. Quarantine. Anyone who had Close Contact must refer to the latest COVID-19 isolation and quarantine health directive issued by the Health Officer (available online at <https://sf.gov/healthrules>) and follow the requirements detailed there. There are special requirements for healthcare workers and emergency medical services personnel in healthcare settings. Additional quarantine requirements may exist for Businesses and governmental entities and their employees under applicable regulatory rules (including, but not limited to, Cal/OSHA and federal requirements).
 - f. Moving to, Traveling to, or Returning to the County. Everyone is strongly encouraged to comply with CDC travel guidelines (available online at www.cdc.gov/coronavirus/2019-ncov/travelers/travel-during-covid19.html).
 - g. Minimum Requirements. Based on their risk preferences, individuals may decide for themselves to take greater safety precautions than required or even recommended under this Order. Also, nothing in this section limits any requirements that apply under this Order to indoor public settings, indoor Mega-Events, or that Cal/OSHA or other State authority may impose on any indoor setting involving gatherings.
4. General Requirements for Businesses and Governmental Entities.
- a. Vaccination. Businesses and governmental entities are generally encouraged to consider whether to require Personnel and patrons to be Up-to-Date on Vaccination, meaning they are Vaccinated with a Complete Initial Series and have received all recommended Boosters when they are Booster-Eligible.
 - i. Vaccination or Testing Recommendation for Certain Indoor Businesses. The following Businesses are encouraged to consider whether to require patrons and staff to provide either proof of being Up-to-Date on Vaccination (including receipt of ~~all~~the most recent Booster recommended ~~Boosters~~by the CDC once eligible to receive that ~~Booster-Eligible~~) or proof of a negative Test before entry or service, especially during periods when COVID-19 infections are increasing in the County:
 - Operators or hosts of establishments or events where food or drink is served indoors—including, but not limited to, dining establishments, bars, clubs, theaters, and entertainment venues.
 - Gyms, recreation facilities, yoga studios, dance studios, and other fitness establishments, where any patrons engage in cardiovascular, aerobic, strength training, or other exercise involving elevated breathing.



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- Operators and hosts of indoor and outdoor Mega-Events, as set forth in Section 7 below.

b. Masking.

- i. Mask Requirements and Allowances. Businesses and governmental entities designated by this Order must follow the requirements for masking listed in this Order and Appendix A to this Order, and other businesses and governmental entities may, but are not required by this Order to, require masks be worn indoors.

- a. Healthcare Settings. Everyone is required to wear a Well-Fitted Mask, regardless of vaccination status, or more protective face covering (like a respirator) in all health care settings subject to the exceptions listed in Appendix A to this Order. For clarity, a Well-Fitted Mask or more protective face covering must be worn by everyone in healthcare settings, except that people who reside in facilities at which they receive care are also allowed to not wear a Well-Fitting Mask consistent with state and federal guidance and rules applicable to those facilities. This local requirement is consistent with but not dependent on the requirements listed in the CDPH “Guidance for the Use of Face Masks” dated ~~April~~September 20, 2022, available online at www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Guidance-for-Face-Coverings.aspx.

- ii. Providing a Well-Fitted Mask. Businesses and other entities subject to this Order are encouraged to provide a Well-Fitted Mask at no cost to people (patrons and Personnel) who do not have one upon entry inside the facility.

- iii. Cal/OSHA Requirements. Businesses and other entities should also follow any additional Cal/OSHA regulations relating to COVID-19 health and safety measures in the workplace, including regarding masking, and more information can be found online at www.dir.ca.gov/dosh/coronavirus/covid19faqs.html. Nothing in this Order is intended to reduce any of those requirements or otherwise modify them in a way that is less protective of public health, or to limit an individual’s own choices to take more health protective measures.

- c. Personnel Health Screening. Businesses and governmental entities are encouraged to develop and implement a process for screening Personnel for COVID-19 symptoms, but this requirement does not mean they must perform on-site screening of Personnel. Businesses and governmental entities should ask Personnel to evaluate their own symptoms before reporting to work. If Personnel have symptoms consistent with COVID-19, they should follow subsections 3(d) and 3(e) above. Businesses and governmental entities may be required to conduct such screenings for Personnel under Cal/OSHA’s regulations or other state or federal requirements. Businesses and



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other entities must adhere to applicable Cal/OSHA regulations relating to COVID-19 health and safety measures in the workplace and should frequently check for updates to those regulations such as by checking online at www.dir.ca.gov/dosh/coronavirus/covid19faqs.html.

- d. Signage. All Businesses and governmental entities are encouraged to conspicuously post signage reminding individuals of the following COVID-19 prevention best practices to reduce transmission:

Get vaccinated and boosted;

Stay home if sick;

Wear a mask indoors if you are unvaccinated; and

Clean your hands.

Businesses and governmental entities are also encouraged to include in signage any custom requirements the business or entity requires of its patrons or Personnel regarding testing, vaccination, and masking. Sample signage is available online at <https://sf.gov/outreach-toolkit-coronavirus-covid-19>.

- e. Ventilation Guidelines. All Businesses and governmental entities with indoor operations are urged to review the Ventilation Guidelines and implement ventilation strategies for indoor operations as feasible. Nothing in this subsection limits any ventilation requirements that apply to particular settings under federal, state, or local law.
- f. Mandatory Reporting by Businesses and Governmental Entities. Consistent with Cal/OSHA regulations, Businesses and governmental entities must require that all Personnel immediately alert the Business or governmental entity if they test positive for COVID-19 and were present in the workplace either (1) within 48 hours before onset of symptoms or within 10 days after onset of symptoms if they were symptomatic; or (2) within 48 hours before the date on which they were tested or within 10 days after the date on which they were tested if they were asymptomatic. If a Business or governmental entity is concerned about a workplace outbreak among Personnel, it may get additional information <https://sf.gov/step-by-step/what-do-if-someone-work-has-covid-19>. Businesses and governmental entities must also comply with all case investigation and contact tracing measures directed by DPH including providing any information requested within the timeframe provided by DPH, instructing Personnel to follow isolation and quarantine protocols specified by CDPH and Cal/OSHA and any additional protocols specified by DPH, and excluding positive cases and unvaccinated close contacts from the workplace during these isolation and quarantine periods.
- g. Compliance with CDPH Guidance for the Use of Face Masks. Businesses and governmental entities with Personnel in homeless shelters, emergency shelters, cooling and heating centers, healthcare settings, state and local correctional facilities and detention centers, and Long Term Care Settings & Adult and Senior Care



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Facilities—as those terms are used in the CDPH “Guidance for the Use of Face Masks” dated ~~April~~September 20, 2022, available online at www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Guidance-for-Face-Coverings.aspx—must require a Well-Fitting Mask (or more protective face covering if appropriate or mandated) in the listed settings so long as required by that guidance, regardless of vaccination status, subject to the exceptions listed in Appendix A to this Order and subject to any other exceptions listed in state or federal guidelines or rules.

- h. Minimum Requirements; Ability to Adopt More-Restrictive Measures. This Order establishes the minimum requirements related to COVID-19 protections. Nothing in this Order is intended to reduce any other federal, state, or local legal requirements or otherwise modify them in a way that is less protective of public health, or to limit an individual Business’ or governmental entity’s choices to take more health protective measures. Businesses or governmental entities may impose further restrictions that are more protective of public health than the minimum requirements or recommendations under this Order, including requiring patrons or Personnel to be Vaccinated with a Complete Initial Series or Up-to-Date on Vaccination, requiring them to wear a Well-Fitted Mask, requiring them to have a negative Test, or taking other more restrictive measures that are more protective of public health and meet their operational needs.
5. Schools and Programs for Children and Youth. There are no longer special requirements under this Order for Schools or Programs for Children and Youth. Individual schools, the school district, and programs for children and youth can determine their own COVID-19 health requirements consistent with state rules.
6. Vaccination Requirements for Personnel in High-Risk Settings and Other Health Care Personnel.
 - a. High-Risk Settings. Except for some Personnel as provided in subsections (a)(iii), (b), and (c) below, and for Personnel exempt under subsection (d) below, all of the following requirements apply in High-Risk Settings:
 - i. Businesses and governmental entities with Personnel in High-Risk Settings must:
 1. As of September 30, 2021, ascertain vaccination status of all Personnel in High-Risk Settings who routinely work onsite;
 2. As of September 30, 2021, ensure that before entering or working in any High-Risk Setting, all Personnel who routinely work onsite have received their first dose of a one-dose COVID-19 vaccine regimen or their second dose of a two-dose COVID-19 vaccine regimen authorized to prevent COVID-19 by the FDA, including by way of an emergency use authorization, or by the World Health Organization. Until such Personnel are Vaccinated with a Complete Initial Series, they are subject to at least



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the minimum public health and safety requirements in subsection (a)(iv) below; and

3. As of March 1, 2022, ensure that all such Personnel who routinely work onsite, within 15 days of being Booster-Eligible, ~~receive their first Booster.~~ have received at least one Booster dose. As of September 13, 2022, CDPH guidance (listed above in the definition of Booster-Eligible) states that Personnel become eligible for a Booster at least 2 months and no more than 6 months after completing the entire recommended initial series of vaccination with a vaccine authorized to prevent COVID-19 by the FDA or WHO. And for the period between when such Personnel are Booster-Eligible but have not yet received one, the operator of the High-Risk Setting must ensure that each such person comply with the public health and safety requirements in subsection (a)(iv) below regarding testing even though they have already received their full initial course of vaccination.

~~For clarity, those who are Booster-Eligible on or before February 14, 2022 must have received their first Booster by March 1, 2022, and those who are Booster-Eligible after February 14, 2022 must receive it within 15 days after they become eligible.~~

And consistent with updated CDPH “Health Care Worker Vaccine Requirement” guidance (linked below in Section 6(b)), such Personnel who provide proof of COVID-19 infection after being Vaccinated with a Complete Initial Series (a “Recent Pre-Booster Infection”) may defer Booster administration under this subsection for up to 90 days from the date of their first positive COVID-19 test or clinical diagnosis, which in some situations may extend the deadline for receipt of a Booster ~~beyond March 1, 2022.~~ Such Personnel who are not eligible for a Booster by March 1, 2022 must be in compliance no later than 15 days after the timeframe specified in this paragraph for receiving the Booster.

Personnel with a deferral due to a proven COVID-19 infection must be in compliance no later than 15 days after the expiration of their deferral.

- ii. As of September 30, 2021, Personnel who routinely work onsite in High-Risk Settings must have received their first dose of a one-dose COVID-19 vaccine regimen or their second dose of a two-dose COVID-19 vaccine regimen authorized to prevent COVID-19 by the FDA, including by way of an emergency use authorization, or by the World Health Organization.WHO. Until such Personnel are Vaccinated with a Complete Initial Series, they are subject to at least the minimum public health and safety requirements in subsection (a)(iv) below. As of March 1, 2022, Personnel who routinely work onsite in High-Risk Settings must, within 15 days of being Booster-Eligible, receive ~~their first Booster.~~ For clarity, those who are Booster-Eligible on or before February 14, 2022 must have received their first Booster by March 1,



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~~2022, and those who are Booster-Eligible after February 14, 2022 must receive it within 15 days after they become eligible at least one Booster. As of September 13, 2022, CDPH guidance (listed above in the definition of Booster-Eligible) states that Personnel become eligible for a Booster at least 2 months and no more than 6 months after completing the entire recommended initial series of vaccination with a vaccine authorized to prevent COVID-19 by the FDA or WHO.~~ Personnel who are required by this subsection 6(a)(ii) to receive a Booster may use the Recent Pre-Booster Infection deferral described above in subsection 6(a)(i)(3) and must be in compliance no later than 15 days after the expiration of the deferral described in that subsection. For clarity, Personnel who routinely work onsite in High-Risk Settings and subject to this subsection 6(a)(ii) includes jail staff subject to CDPH's State and Local Correctional Facilities and Detention Centers Health Care Worker Vaccination Requirement (available at: <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Correctional-Facilities-and-Detention-Centers-Health-Care-Worker-Vaccination-Order.aspx>). Notwithstanding the foregoing, firefighters, paramedics, and emergency medical technicians (EMTs), as well as Personnel who routinely work onsite at homeless shelters (other than congregate living health facilities), are strongly recommended (but not required) to be Up-to-Date on Vaccination when they are Booster-Eligible. In September 2022, based on changed health conditions the Health Officer changed the vaccination requirement for firefighters, paramedics, and EMTs to be consistent with State rules. That means they are no longer required to receive a Booster and rather are strongly recommended to receive one. If health conditions were to worsen in the future, the Health Officer may impose updated COVID-19 precautions as necessary to protect public health.

For purposes only of this subsection (ii), any such firefighters, paramedics, and EMTs—as well as all other Personnel—who work inside at any High-Risk Setting must, regardless of vaccination status, wear a Well-Fitted Mask at all times when they are working inside any High-Risk Setting.

- iii. Businesses and governmental entities with Personnel who are not permanently stationed or regularly assigned to a High-Risk Setting but who in the course of their duties may enter or work in High-Risk Settings on an intermittent or occasional basis or for short periods of time—including police, other law enforcement, and attorneys who enter jail settings or other High-Risk Settings as part of their work—are required to (1) ascertain vaccination status of all such Personnel and (2) ensure that before entering or working in any High-Risk Setting, all such Personnel are Vaccinated with a Complete Initial Series with any vaccine authorized to prevent COVID-19 by the FDA, including by way of an emergency use authorization, or by the ~~World Health Organization~~ WHO, unless exempt under subsection (d) below. Additionally, as of September 29, 2021, all such Personnel must have received their first dose of a one-dose COVID-19 vaccine regimen or their second dose of a two-



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dose COVID-19 vaccine regimen authorized to prevent COVID-19 by the FDA, including by way of an emergency use authorization, or by the World Health Organization. Until such Personnel are Vaccinated with a Complete Initial Series, they are subject to at least the minimum public health and safety requirements in subsection (a)(iv) below. Personnel who are not permanently stationed or regularly assigned to a High-Risk Setting but who in the course of their duties may enter or work in High-Risk Settings even on an intermittent or occasional basis or for short periods of time are strongly recommended (but not required) to receive a Booster when they are Booster-Eligible. For clarity, Personnel subject to this subsection (a)(iii) who have not received their Booster but are Vaccinated with a Complete Initial series are not subject to the health and safety requirements in subsection (a)(iv) below, but must follow the Face Covering Requirements and any other applicable federal, state, or local requirements.

iv. All Businesses and governmental entities subject to this Section 6 must require any Personnel who routinely work onsite at a High-Risk Setting and are exempt or who have otherwise not received their first Booster to comply with at least the following public health and safety measure:

1. ~~at~~At all times at the worksite in the High-Risk Setting wear a face covering in compliance with this Order, as well as the CDPH “Guidance for the Use of Face Masks” dated ~~April~~September 20, 2022, available online at www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Guidance-for-Face-Coverings.aspx.

Because of the COVID-19 risks to any exempt Personnel who have not received a Booster, the High-Risk Setting must provide such Personnel, on request, with a well-fitting non-vented N95 respirator and strongly encourage such Personnel to wear that respirator at all times when working with patients, residents, clients, or incarcerated people.

Regular masking as required under this Section 6 is not as protective of public health as being Up-to-Date on Vaccination in helping prevent transmission of COVID-19; accordingly, those measures are a minimum safety requirement for exempt Personnel in High-Risk Settings. Businesses and governmental entities subject to this Section 6 may require additional safety measures for such Personnel. For example, factors a Business or governmental entity may consider in determining appropriate safety measures for exempt Personnel include, but are not limited to:

- a) Whether the Personnel will place other people at risk of transmission of COVID-19 because they are required to come into contact (including on an emergency basis) with other Personnel or with persons whose vaccination status is unknown, who are not ~~yet~~eligible



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for the vaccine, or who are members of a vulnerable population (*e.g.*, the elderly, incarcerated people, and acute care patients);

- b) The type and frequency of testing available to the Personnel and whether the Business or governmental entity has the ability to provide testing to Personnel, without relying on public health resources, and track the requisite testing;
- c) Whether the Business or governmental entity can ensure compliance with the mask mandate whenever the Personnel are around other people in the workplace; and
- d) Whether the proposed accommodation imposes an undue burden because it is costly, infringes on other Personnel's job rights or benefits, compromises workplace safety, decreases workplace efficiency, or requires other Personnel to do more than their share of potentially hazardous or burdensome work.

Nothing under the Order limits the ability of a Business or governmental entity under applicable law to determine whether they are unable to offer a reasonable accommodation to unvaccinated Personnel with an approved exemption and to exclude such exempt Personnel from a High-Risk Setting.

- v. All Businesses and governmental entities subject to this Section 6 must, consistent with applicable privacy laws and regulations, maintain records of employee vaccination or exemption status.
- vi. All Businesses and governmental entities subject to this Section 6 must provide these records to the Health Officer or other public health authorities promptly upon request, and in any event no later than the next business day after receiving the request.
- vii. This mandated vaccination schedule allows Businesses, governmental entities, and affected Personnel adequate time to comply with this Order. In the interest of protecting residents of High-Risk Settings, Personnel, and their families, Businesses, governmental entities, and affected Personnel are strongly urged to meet these vaccination requirements as soon as possible.

For clarity, this requirement applies to Personnel in other buildings in a site containing a High-Risk Setting, such as a campus or other similar grouping of related buildings, where such Personnel do any of the following: (i) access the acute care or patient, resident, client, or incarcerated person areas of the High-Risk Setting; or (ii) work in-person with patients, residents, clients, or incarcerated people who visit those areas. All people in San Francisco who work in a clinical setting with a population that is more vulnerable to COVID-19 are strongly urged to be Up-to-Date



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on Vaccination, including receiving ~~any~~-recommended Boosters ~~as soon as~~ ~~Booster-~~
~~Eligible.~~

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If a person covered by the requirements of this Section 6 to have received their first Booster recently had COVID-19 when that person would otherwise have been Booster-Eligible based on the period since becoming Vaccinated with a Complete Initial Series, then that person should try to obtain the Booster as soon as possible at least 10 days after recovering and ending isolation. But to continue working in the High-Risk Setting that person does not need to receive the Booster until ~~30~~90 days after recovering from infection and discontinuing isolation, unless a healthcare provider recommends in a note that the Booster be delayed for a longer specified period.

- b. CDPH Requirements For Adult Care Facilities, Direct Care Workers, Other Health Care Workers, and Pharmacists. Businesses and governmental entities with Personnel in certain types of facilities and contexts, including those that provide health care, certain other care services, services in congregate settings, and the Personnel who work in those settings must comply with the following CDPH Orders and All Facilities Letters, including as they are updated in the future, which require Personnel of such Businesses and governmental entities to be Vaccinated with a Complete Initial Series and receive a Booster when Booster-Eligible, unless exempt under those Orders and All Facilities Letters by the deadlines listed in each order or letter:

“Adult Care Facilities and Direct Care Worker Vaccine Requirement”, updated September 13, 2022, available online at www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Adult-Care-Facilities-and-Direct-Care-Worker-Vaccine-Requirement.aspx

“Health Care Worker Vaccine Requirement”, updated September 13, 2022, available online at www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Health-Care-Worker-Vaccine-Requirement.aspx

“Coronavirus Disease 2019 (COVID-19) Testing, Vaccination Verification and Personal Protective Equipment for Health Care Personnel (HCP) at Health Care Facilities” (AFL 21-29.3), updated February 22, 2022, available online at www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-29.aspx

“Coronavirus Disease 2019 (COVID-19) Testing, Vaccination Verification and Personal Protective Equipment for Health Care Personnel (HCP) at the Various Types of Intermediate Care Facilities” (AFL 21-30.3), updated February 22, 2022, available online at www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-30.aspx

“Coronavirus Disease 2019 (COVID-19) Vaccine Requirement for Healthcare



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Personnel (HCP)” (AFL 21-34.34), updated ~~February 22~~October 5, 2022, available online at www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-34.aspx.

- c. Dental Offices. Personnel who provide healthcare in dental offices are considered to provide care in “Clinics & Doctor Offices (including behavioral health, surgical)” under the following CDPH order and must comply with the requirements in that order: “Health Care Worker Vaccine Requirement”, updated September 13, 2022, available online at www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Health-Care-Worker-Vaccine-Requirement.aspx.
- d. Limited Exemptions. Personnel covered by this Section 6 may be exempt from the vaccination requirements under this section only upon providing the requesting Business or governmental entity a declination form stating either of the following: (1) the individual is declining vaccination based on Religious Beliefs or (2) the individual is excused from receiving any COVID-19 vaccine due to Qualifying Medical Reasons. A sample ascertainment and declination form is available online at <https://sf.gov/healthrules>. As to declinations for Qualifying Medical Reasons, to be eligible for this exemption Personnel must also provide to their employer or the Business a written statement signed by a physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician stating that the individual qualifies for the exemption (but the statement should not describe the underlying medical condition or disability) and indicating the probable duration of the individual’s inability to receive the vaccine (or if the duration is unknown or permanent, so indicate). As to declinations based on Religious Beliefs, a Business or governmental entity may seek additional information as allowed or required by applicable law to determine whether Personnel have a qualifying Religious Belief. Personnel who qualify for and are granted by the employing Business or governmental entity an exemption due to Religious Beliefs or Qualifying Medical Reasons, as provided above, must still follow at least the minimum health and safety requirements in subsection (a)(iv), above. Nothing in this Order is intended to limit any Business’s or governmental entity’s ability under applicable law to determine whether they are able to offer a reasonable accommodation to Personnel with an approved exemption. Because testing and masking is not as effective as being Up-to-Date on Vaccination at preventing the spread of COVID-19, a Business may determine that the minimum requirements in subsection (a)(iv) above are not sufficient to protect the health and safety of people in High-Risk Settings.
- e. Record Keeping Requirements. Businesses or governmental entities subject to this Section 6 must maintain records with following information:
 - i. For Personnel who are Vaccinated with a Complete Initial Series, and also for Personnel where having received their first Booster is required by this Order: (1) full name and date of birth; (2) vaccine manufacturer; and (3) date of vaccine administration (for first dose and, if applicable, all subsequent doses required by this Order). Nothing in this subsection is intended to prevent an



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employer from requesting additional information or documentation to verify vaccination status, to the extent permissible under the law.

- ii. For unvaccinated Personnel: signed declination forms with written health care provider's statement where applicable, as described in subsection (d) above.
- f. Compliance with CDPH Orders. In addition to the requirements set forth above:
- i. Until any more health protective requirements in this section take effect, Businesses and governmental entities with Personnel in High-Risk Settings must comply with the requirements of the CDPH "Guidance for the Use of Face Masks" dated ~~April~~September 20, 2022, available online at www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Guidance-for-Face-Coverings.aspx; and
 - ii. Businesses and governmental entities with Personnel in adult care facilities and Other Health Care Settings—as that term is defined in the CDPH Vaccination Status Order—must be in full compliance with the requirements of the CDPH Vaccination Status Order.
 - iii. Businesses and governmental entities with Personnel who provide services or work in facilities covered by the State Public Health Officer Order of August 5, 2021, updated most recently on September 13, 2022 (titled "Health Care Worker Vaccine Requirement"), must comply with the requirements of that order, including as that order may be amended in the future. See www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Health-Care-Worker-Vaccine-Requirement.aspx.
- g. Cooperation with Public Health Authorities. Businesses or governmental entities with Personnel subject to this Section 6 must cooperate with Health Officer or DPH requests for records, documents, or other information regarding the Business or governmental entity's implementation of these vaccination requirements. This cooperation includes, but is not limited to, identifying all jobs or positions within the organization and describing: (1) whether a given job or position is subject to the vaccination requirements of this Section 6, (2) how the Business or governmental entity determined a job or position is subject to vaccination requirements of this Section 6, and (3) how the Business or governmental entity is ensuring full compliance with the vaccination requirements set forth in this Section 6. Complete responses to these requests must be provided to the Health Officer or DPH promptly upon request, and in any event within three business days after receiving the request.
7. Mega-Events. All Businesses, governmental entities, and other organizations hosting Mega-Events are strongly urged (but not required) to continue to follow the recommendations in the State's Post-Blueprint Guidance for Mega-Events, available online at www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Beyond-Blueprint-Framework.aspx, including requiring patrons and staff to either show proof of being



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Vaccinated with a Complete Initial Series or having received a negative COVID-19 Test as a condition to entry for indoor Mega-Events.

8. COVID-19 Health Indicators. The County will, for the time being, continue to make publicly available on its website updated data on COVID-19 case rates, hospitalizations, and vaccination rates. That information can be found online at <https://sf.gov/resource/2021/covid-19-data-and-reports>. The Health Officer will monitor this data, along with other data and scientific evidence, in determining whether to modify or rescind this Order, as further described in Section 2(a) above.
9. Incorporation of State and Local Emergency Proclamations and Federal and State Health Orders. The Health Officer is issuing this Order in accordance with, and incorporates by reference, the emergency proclamations and other federal, state, and local orders and other pandemic-related orders described below in this Section. But this Order also functions independent of those emergency proclamations and other actions, and if any State, federal, or local emergency declaration, or any State or federal order or other guidance, is repealed, this Order remains in full effect in accordance with its terms (subject to Section 13 below).
 - a. State and Local Emergency Proclamations. This Order is issued in accordance with, and incorporates by reference, the March 4, 2020 Proclamation of a State of Emergency issued by the Governor, the February 25, 2020 Proclamation by the Mayor Declaring the Existence of a Local Emergency, and the March 6, 2020 Declaration of Local Health Emergency Regarding Novel Coronavirus 2019 (COVID-19) issued by the Health Officer, as each of them have been and may be modified, extended, or supplemented.
 - b. State Health Orders. This Order is also issued in light of the various orders, directives, rules, and regulations of the State, including, but not limited to, those of the State's Public Health Officer and Cal/OSHA. The State has expressly acknowledged that local health officers have authority to establish and implement public health measures within their respective jurisdictions that are more restrictive than those implemented by the State Public Health Officer.
 - c. Federal Orders. This Order is further issued in light of federal emergency declarations and orders.
10. Obligation to Follow Stricter Requirements of Orders.

Based on local health conditions, this Order includes a limited number of health and safety restrictions that are more stringent or more detailed than those contained under State orders. Where a conflict exists between this Order and any state or federal public health order related to the COVID-19 pandemic, the most restrictive provision (*i.e.*, the more protective of public health) controls. Consistent with California Health and Safety Code section 131080 and the Health Officer Practice Guide for Communicable Disease Control in California, except where the State Health Officer may issue an order expressly directed at this Order and based on a finding that a provision of this Order constitutes a



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menace to public health, any more restrictive measures in this Order continue to apply and control in this County.

11. Obligation to Follow Health Officer Orders and Directives and Mandatory State Guidance.

In addition to complying with all provisions of this Order, all individuals and entities, including all Businesses and governmental entities, must also follow any applicable orders and directives issued by the Health Officer (available online at <https://sf.gov/healthrules>) and any applicable mandatory guidance issued by the State Health Officer or California Department of Public Health. To the extent that provisions in the orders or directives of the Health Officer and the mandatory guidance of the State conflict, the more restrictive provisions (*i.e.*, the more protective of public health) apply. In the event of a conflict between provisions of any previously-issued Health Officer order or directive and this Order, this Order controls over the conflicting provisions of the other Health Officer order or directive.

12. Enforcement.

Under Government Code sections 26602 and 41601 and Health and Safety Code section 101029, the Health Officer requests that the Sheriff and the Chief of Police in the County ensure compliance with and enforce this Order. The violation of any provision of this Order (including, without limitation, any health directives) constitutes an imminent threat and immediate menace to public health, constitutes a public nuisance, and is punishable by fine, imprisonment, or both. DPH is authorized to respond to such public nuisances by issuing Notice(s) of Violation and ordering premises vacated and closed until the owner, tenant, or manager submits a written plan to eliminate all violations and DPH finds that plan satisfactory. Such Notice(s) of Violation and orders to vacate and close may be issued based on a written report made by any County employees writing the report within the scope of their duty. DPH must give notice of such orders to vacate and close to the Chief of Police or the Chief's designee to be executed and enforced by officers in the same manner as provided by San Francisco Health Code section 597. As a condition of allowing a Business to reopen, DPH may impose additional restrictions and requirements on the Business as DPH deems appropriate to reduce transmission risks, beyond those required by this Order and other applicable health orders and directives.

13. Effective Date.

This Order is effective at 12:01 a.m. on June 15, 2021 and will continue, as updated, to be in effect until the Health Officer rescinds, supersedes, or amends it in writing. The changes made in the ~~September 15~~ December 21, 2022 update are effective immediately on issuance.

14. Relation to Other Orders of the San Francisco Health Officer.

Immediately on issuance, this Order revises and entirely replaces the prior update to



ORDER OF THE HEALTH OFFICER No. C19-07y (updated)

Health Officer Order No. C19-07y (issued ~~June 16~~September 15, 2022). Leading up to and in connection with the effective date of this Order, the Health Officer has rescinded a number of other orders and directives relating to COVID-19, including those listed in the Health Officer's Omnibus Rescission of Health Officer Orders and Directives, dated June 11, 2021. On and after the effective date of this Order, the following orders and directives of the Health Officer shall continue in full force and effect: Order Nos. C19-16 (hospital patient data sharing), C19-18 (vaccine data reporting), C19-19 (minor consent to vaccination), and C19-20 (test collection sites); and the directives that this Order references in Sections 3 and 4, as the Health Officer may separately amend or later terminate any of them. Health Officer Order No. C19-15 was also reinstated on August 19, 2021, and remains in effect as outlined in that order (including as it is amended in the future). Also, this Order also does not alter the end date of any other Health Officer order or directive having its own end date or that continues indefinitely.

15. Copies.

The County must promptly provide copies of this Order as follows: (1) by posting on the County's website (<https://sf.gov/healthrules>); ~~(2) by posting at City Hall, located at 1 Dr. Carlton B. Goodlett Pl., San Francisco, CA 94102; and (3 and (2)~~ by providing to any member of the public requesting a copy.

16. Severability.

If a court holds any provision of this Order or its application to any person or circumstance to be invalid, then the remainder of the Order, including the application of such part or provision to other persons or circumstances, shall not be affected and shall continue in full force and effect. To this end, the provisions of this Order are severable.

IT IS SO ORDERED:

Susan Philip, MD, MPH,
Health Officer of the
City and County of San Francisco

Dated: ~~September 15~~December 21, 2022

Attachment:

- Appendix A – Face Covering Requirements (last updated September 15, 2022)