LOCAL HEALTH OFFICER DIRECTIVE

Whereas, on February 29, 2020, Governor Jay Inslee proclaimed a state of emergency within the State of Washington due to COVID-19; and

Whereas, on March 14, 2020, the first confirmed cases of COVID-19 were identified in Spokane County; and

Whereas a state of emergency within Spokane County due to COVID-19 was declared on March 20, 2020; and

Whereas, on March 11, 2020, the World Health Organization declared a state of pandemic due to COVID-19; and

Whereas, on March 13, 2020, President Donald Trump declared a National Emergency due to COVID-19, and on March 22, 2020 a Major Disaster was declared for the State of Washington; and

Whereas, on March 23, 2020, Governor Inslee imposed a “Stay Home – Stay Healthy” Order throughout Washington State prohibiting all people in Washington State from leaving their homes or place of residence except (1) to conduct or participate in essential activities and/or (2) for employment in essential services, thus precluding participation in social, spiritual, and recreational gatherings of any kind regardless of the number of participants, and closing all non-essential businesses in Washington State; and

Whereas, on May 4, 2020, Governor Inslee issued a Proclamation modifying his “Stay Home – Stay Healthy” Order, with a phased-in approach to re-open Washington, which will increase the number of interactions among Spokane County residents and the frequency of their encounters with non-household members, and will increase their risk of exposure to persons with infectious COVID-19; and

Whereas, the age, condition, and health of a significant portion of the population of Spokane County and its local cities and towns places it at risk for serious health complications, including death, from COVID-19; and

Whereas, a large surge in the number of persons with serious infections can compromise the ability of the regional healthcare system to deliver necessary healthcare to the public; and

Whereas, individuals can be infected and contagious before or even without developing symptoms (pre-symptomatic and asymptomatic), and the evidence suggests a significant number of infections may be transmitted in this manner; and

Whereas, the United States Centers for Disease Control and Prevention (“CDC”) confirmed that a significant number of individuals who are infected remain asymptomatic and that as many as 25 percent of these individuals may contribute to transmission of the SARS-CoV-2 virus; and

Whereas, one key transmission method for COVID-19 is respiratory droplets that individuals expel when they breathe, talk, cough or sneeze; and

Whereas, the CDC recommends that members of the public should cover their noses and mouths with a cloth face covering to prevent inadvertently spreading COVID-19 while interacting with others outside their homes in public settings where other social distancing measures are difficult to maintain; and wearing a fabric mask can help prevent the spread of infection to others when the mask is worn by someone who already is infected with the virus that causes COVID-19, even
if they don’t have symptoms. The mask could help by blocking infectious droplets from spreading when someone with the infection coughs, sneezes, breathes or speaks; and

Whereas, there is a national shortage of medical grade masks, surgical masks, and N-95 respirators that are critically needed for healthcare providers who are on the front lines working to protect all of us, and health officials are increasingly urging non-medical workers to wear non-medical grade cloth face coverings to help curb the spread of COVID-19; and

Whereas, workers of certain essential businesses and other frontline employees must be protected because they face greater exposure and risk of contracting COVID-19 due to their frequent in person contact with members of the public and inability to work from home and widespread mask use may decrease the risk of spread from someone with unrecognized infection; and

Whereas, there is a long history of racism and discriminatory policies that Native, People of Color, immigrant and refugee, LGBTQ communities, homeless, and other marginalized communities have faced in Washington state that may impact an individual’s ability to feel safe while wearing a face covering; and

Whereas, Spokane County government is dedicated to providing all its residents with fair and equal access to services, opportunities, and protection; inviting and encouraging public engagement; and reflecting consideration for cultural differences; and

Whereas, the Revised Code of Washington, Title 70.05.070(2)-(3), requires and empowers the local health officer to take such action as is necessary to maintain health and to control and prevent the spread of any contagious or infectious diseases within the jurisdiction; and

Whereas, the Washington Administrative Code, Title 246-100-036, requires the local health officer, when necessary, to institute disease control measures as he or she deems necessary based on his or her professional judgment, current standards of practice, and the best available medical and scientific information; and

Based upon the above, as the Local Health Officer, I hereby find that directing the population of Spokane County to wear face coverings in certain public places is reasonable and conducive to maintain health and to the control and prevention throughout Spokane County of COVID-19, a contagious and infectious disease.

EFFECTIVE on May 20, 2020, as the Local Health Officer I hereby DIRECT as follows:

(Continued on next page)
FACE COVERING DIRECTIVE

1. All individuals at indoor or confined public settings must wear face coverings over their noses and mouths if they are likely to be in contact with another individual who does not share their household and distancing of approximately six feet is not able to be maintained. At this time, because it is still important to conserve medical-grade or N95 respirators for health care workers, unless a particular health reason requires it, individuals should use fabric coverings, such as cloth face masks, scarves and bandana coverings or other material as recommended by CDC. Cloth face masks must be worn properly in order to avoid contaminating the hands or face of the user. Before putting on a mask and after removing a mask, an individual should clean their hands with alcohol-based hand rub or soap and water and change masks when moist and wash after use. While in use, avoid touching the mask. Worn masks may be contaminated with infectious agents.

2. The following individuals do not need to comply with this Directive:
   a. Any child aged two years or less;
   b. Any child aged 12 years or less unless parents and caregivers supervise the use of face coverings by children to avoid misuse;
   c. Any individual who has a physical disability that prevents easily wearing or removing a face covering;
   d. Any individual who is deaf and uses facial and mouth movements as part of communication or an individual who is communicating with a person who is deaf and uses facial and mouth movements as part of communication;
   e. Any individual who has been advised by a medical professional that wearing a face covering may pose a risk to that individual for health related reasons;
   f. Any individual who has trouble breathing or is unconscious, incapacitated, or otherwise unable to remove the face covering without assistance.

3. This Directive applies to any indoor or confined public setting where a person will be in within six feet of another individual, who does not share the same household, and includes, but is not limited to the following sectors:
   a. Groceries, pharmacies, and other retail that sells food and beverage products, including but not limited to grocery stores, corner stores and convenience stores (including liquor stores that sell food), farmers’ markets, food banks, farm and produce stands, supermarkets, big box stores that sell groceries and essentials and similar food retail establishments.
   b. Commercial retail stores that supply essential sectors, including convenience stores, pet supply stores, auto supplies and repair, hardware and home improvement, garden stores and nurseries that support food cultivation and production, office supply stores that support working-from-home, and home appliance retailers.
   c. Restaurant carry-out and quick-serve food operations – including food preparation, carry-out, and delivery food employees.
   d. Cannabis retail and dietary supplement retail stores.
   e. Tobacco and vapor sellers.
   f. Buses, light rail, and other forms of public transportation.

4. Nothing in this Directive reduces or eliminates the requirements imposed by Directives and Orders from the Local Health Officer, Governor, or other regulatory local, state, or federal agency including employer specific directives from the Washington State Department of Labor and Industries.

5. Face covering use does not replace the need to practice physical distancing (staying away from ill people, staying home and avoiding all non-essential activities and contact with others), frequent handwashing, and avoiding touching of the face;
6. Violation of this Directive does not create grounds to stop, detain, issue a citation, arrest, or prosecute individuals who do not comply with it. This Directive may and should be used to educate, encourage, and persuade individuals to wear face coverings.

7. All commercial establishments in Spokane County are directed to post signage advising individuals to wear face coverings on the premises. Establishments can download a sign that can be used for this purpose at srhd.org/covid19masks.

I strongly urge all people in Spokane County to voluntarily comply with this Directive without delay.

This Directive shall EXPIRE upon determination by the Local Health Officer that there is no longer a need for face coverings due to COVID-19.

Signed and directed this 20th day of May 2020, in Spokane, Washington, by

Dr. Bob Lutz, MD, MPH, Health Officer