



ORDER OF THE HEALTH OFFICER No. C19-07y

**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

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 June 15, 2021, and in connection with the State terminating the Blueprint for a Safer Economy and putting in its place new, limited COVID-19 guidance, this Order replaces the prior health order, Health Officer Order No. C19-07x (the Stay-Safer-At-Home Order), in its entirety. Based on increasing vaccination and the success of the City and County of San Francisco, the rest of the Bay Area, and the State in containing the virus that causes COVID-19, this Order lifts local capacity limits on business and other sectors, local physical distancing requirements, and many other previous health and safety restrictions. Businesses are no longer required to prepare and post social distancing protocols or in most instances submit health and safety plans to the Health Officer. Nor are they strongly urged to allow office employees to continue to work remotely as much as possible. Also, except for schools, childcare, and out-of-school time programs, sector specific guidance under local health directives no longer apply.

This Order continues to place certain safety requirements on individuals, including masking requirements in some settings, consistent with federal and state rules. And it places some requirements on businesses and government entities, such as a general requirement to report positive cases in the workplace and in schools, a new and much more limited requirement for signage, and a vaccination or testing requirement to admit people to attend indoor mega-events largely consistent with state rules. It also requires personnel working in certain high-risk settings, such as acute care hospitals, nursing homes, and jails to be fully vaccinated, with limited exemptions and within a specified timeframe. Also, this Order includes recommendations to reduce COVID-19 risk, but not requirements, for individuals, businesses, and government entities.

Even though COVID-19 case rates are now extremely low and more people are vaccinated in San Francisco and the region, there remains a risk that people may come into contact with others who may have COVID-19 when outside their Residence. Most COVID-19 infections are caused by people who have no symptoms of illness. There are also people in San Francisco who are not yet fully vaccinated, including children under 12 years old. We have also seen surges in other parts of the country and the world,



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increasingly impacting younger adults. Everyone who is eligible, including people at risk for severe illness with COVID-19—such as unvaccinated older adults and unvaccinated individuals with health risks—and members of their households, are urged to get vaccinated as soon as they can if they have not already done so.

**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.

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

- a. *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.
- b. *Cal/OSHA.* “Cal/OSHA” means the California Department of Industrial Relations, Division of Occupational Safety and Health, better known as Cal/OSHA.
- c. *CDC.* “CDC” means the United States Centers for Disease Control and Prevention.
- d. *Close Contact.* “Close Contact” means having any of following interactions with someone with COVID-19 while they were contagious: (i) being within six feet of them for a total of 15 minutes or more in a 24-hour period; (ii) living or staying overnight with them; (iii) having physical or intimate contact including hugging and kissing; (iv) taking care of them, or having being taken care of by them; or (v) having direct contact with their bodily fluids (*e.g.*, they coughed or sneezed on you or shared your food utensils). The person is considered contagious *either* if they had symptoms, from 48 hours before their symptoms began until at least 10 days after the start of symptoms, *or* if they did not have symptoms, from 48 hours before their COVID-19 test was collected until 10 days after they were tested.
- e. *County.* The “County” means the City and County of San Francisco.
- f. *COVID-19.* “COVID-19” means coronavirus disease 2019, the disease caused by the SARS-CoV-2 virus and that resulted in a global pandemic.
- g. *DPH.* “DPH” means the San Francisco Department of Public Health.
- h. *DPH Core Guidance.* “DPH Core Guidance” means the webpage and related materials titled *Core Guidance for COVID-19* that DPH regularly updates and includes health and safety recommendations for individuals and Businesses as well as web links to additional resources, available online at www.sfdph.org/dph/covid-19/core-guidance.asp.



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- i. *Face Covering Requirements.* “Face Covering Requirements” means the requirement to wear a Well-Fitted Mask (i) as required by federal or state law including, but not limited to, California Department of Public Health guidance and Cal/OSHA’s rules and 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; and (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.
- j. *FDA.* “FDA” means the United States Food and Drug Administration.
- k. *Fully Vaccinated.* “Fully Vaccinated” means two weeks after completing the entire recommended 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. For example, as of the date of issuance of this Order, an individual would be fully vaccinated at least two weeks after receiving a second dose of the Pfizer or Moderna COVID-19 vaccine or two weeks after receiving the single dose Johnson & Johnson’s Janssen COVID-19 vaccine. The following are acceptable as proof of full vaccination: (i) the CDC vaccination card, which includes name of person vaccinated, type of vaccine provided, and date last dose administered, (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, or (v) written self-attestation of vaccination signed (including an electronic signature) under penalty of perjury and containing the name of the person vaccinated, type of vaccine taken, and date of last dose administered. If any state or federal agency uses a more restrictive definition of what it means to be Fully Vaccinated 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 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.
- l. *Health Officer.* “Health Officer” means the Health Officer of the City and County of San Francisco.
- m. *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, residential care facilities for the elderly, homeless shelters, and jails.
- n. *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.



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- o. *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.
- p. *Mega-Event.* “Mega-Event” means an event with either more than 5,000 people attending indoors or more than 10,000 people attending outdoors, consistent with the definition of those events in the State’s Post-Blueprint Guidance. 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.
- q. *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.
- r. *Religious Beliefs.* “Religious Beliefs” means a sincerely held religious belief, practice, or observance, including any traditionally recognized religion as well as beliefs, observances, or practices, which an individual sincerely holds and which occupy a place of importance parallel to that of traditionally recognized religions.
- s. *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.
- t. *Schools.* “Schools” mean public and private schools operating in the County, including independent, parochial, and charter schools.
- u. *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 that applies from June 15, 2021 through October 1, 2021, including as the State may extend, update or supplement that guidance in the future. (See www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Beyond-Blueprint-Framework.aspx.)
- v. *Tested.* “Tested” means to have a negative test for the virus that causes COVID-19 within the prior 72 hours. 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



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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.

- w. *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, including Cal/OSHA. The DPH Core Guidance also includes ventilation guidelines.
- x. *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. DPH guidance regarding Well-Fitted Masks may be found at www.sfdcp.org/maskingupdate. A non-vented N95 mask is strongly recommended as a Well-Fitted Mask, even if not fit-tested, to provide maximum protection. 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 from COVID-19 is decreasing in the County, the Bay Area, and the State. But COVID-19 continues to pose a risk especially to individuals who are not fully vaccinated, and certain safety measures continue to be necessary to protect against COVID-19 cases and deaths. Vaccination 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 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 putting in place certain requirements 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.
- b. Intent. The primary intent of this Order is to continue to protect the community from COVID-19 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.



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- c. Interpretation. All provisions of this Order must be interpreted to effectuate the purposes and intent of this Order as described above. The 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 follow the DPH Core Guidance, containing health and safety recommendations for COVID-19.
 - 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 get Fully Vaccinated as soon as they are able to. 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 get Fully Vaccinated 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-at-increased-risk.html. For those who are not yet Fully Vaccinated, staying home or choosing outdoor activities as much as possible with physical distancing from other Households whose vaccination status is unknown is the best way to prevent the risk of COVID-19 transmission. Fully Vaccinated individuals are subject to fewer restrictions as provided in this Order, and there are allowances for certain large gatherings where all the participants are Fully Vaccinated or Tested.
 - b. Face Coverings. All persons must follow the Face Covering Requirements. People should be respectful of 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. Under current federal law, people riding or waiting to ride on public transit,



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and people at or near a public transit stop or station, must wear Well-Fitted Masks. Personnel and passengers on public transit are urged to get Fully Vaccinated, and those who are not Fully Vaccinated are strongly urged to double mask. Under Cal/OSHA's rules and regulations, employers may also be required to ensure employees continue to wear Well-Fitted Masks or respirators, particularly in indoor settings.

- 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 (i) has a positive COVID-19 test result, (ii) is diagnosed with COVID-19, or (iii) is not Fully Vaccinated (or has not had COVID-19 in the preceding 90 days) and has a COVID-19 symptom that is new or not explained by another condition must follow the COVID-19 isolation health directive (available online at www.sfcddcp.org/i&q).

Anyone who is Fully Vaccinated (or who had COVID-19 in the preceding 90 days) and has a symptom of COVID-19 that is new or not explained by another condition should consult their healthcare provider. They should avoid public settings to the extent possible and consider wearing a face covering until provided further direction by their healthcare provider. While experiencing symptoms that are new or not explained by another condition, they must be excluded from High-Risk Settings (except for those who already reside in the High-Risk Setting, in which case they should be isolated from others to the extent possible until cleared by a healthcare professional). If diagnosed with COVID-19, they must follow the COVID-19 isolation health directive (available online at www.sfcddcp.org/i&q).

- e. Quarantine. Anyone who had Close Contact with someone with COVID-19 must follow these rules:
- i. If the person is not Fully Vaccinated, they must quarantine to protect others and follow the COVID-19 quarantine health directive (available online at www.sfcddcp.org/i&q).
 - ii. If the person is Fully Vaccinated (or had COVID-19 in the preceding 90 days) and *has symptoms* of COVID-19 that are new or not explained by another condition, they must consult their healthcare provider and isolate from others until cleared by a healthcare professional.
 - iii. If the person is Fully Vaccinated (or had COVID-19 in the preceding 90 days) but does not have new or unexplained COVID-19 symptoms, they may continue normal activities and should monitor themselves for symptoms closely for the next 14 days. If the person lives or works in a High-Risk Setting, is a resident or works in any non-healthcare congregate setting, works in any high-density workplace (e.g., a food processing plant), or lives in a dormitory or other high-density housing setting, they also should undergo testing as described by the State



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of California (see www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Updated-COVID-19-Testing-Guidance.aspx) and as outlined in the COVID-19 quarantine health directive (available online at www.sfdcp.org/i&q).

- f. Moving to, Traveling to, or Returning to the County. Everyone is strongly encouraged to comply with any State travel advisories and CDC travel guidelines (available online at www.cdc.gov/coronavirus/2019-ncov/travelers/travel-during-covid19.html).
 - g. Large indoor gatherings. Individuals who are neither Fully Vaccinated nor Tested are urged to wear Well-Fitted Masks and maintain physical distance when they are in large indoor gatherings with members of other Households whose vaccination status is unknown, such as public meetings. Nothing in this section limits any requirements that apply under this Order to indoor Mega-Events or that Cal/OSHA or other State authority may impose on any indoor setting involving large gatherings.
4. General Requirements for Businesses and Governmental Entities.
- a. Encourage Activities that Can Occur Outdoors. All Businesses and governmental entities are urged to consider moving operations or activities outdoors, if feasible and to the extent allowed by local law and permitting requirements, because there is generally less risk of COVID-19 transmission outdoors as opposed to indoors.
 - b. Personnel Health Screening. Businesses and governmental entities must 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.
 - c. Businesses Must Allow Personnel to Stay Home When Sick. Businesses are required to follow Cal/OSHA rules and regulations allowing Personnel to stay home where they have symptoms associated with COVID-19 that are new or not explained by another condition or if they have been diagnosed with COVID-19 (by a test or a clinician) even if they have no symptoms, and to not to have those Personnel return to work until they have satisfied certain conditions, all as further set forth in the Cal/OSHA rules. Also, Businesses must comply with California Senate Bill 95 (Labor Code, sections 248.2 and 248.3), which provides that employers with more than 25 employees must give every employee 80 hours of COVID-related sick leave retroactive to January 1, 2021 and through September 30, 2021 (pro-rated for less than full time employees), including that employees may use this paid sick leave to get vaccinated or for post-vaccination illness. Each Business is prohibited from taking any adverse action against any Personnel for staying home in any of the circumstances described in this subsection.



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d. Signage.

- i. Signage for Patrons. All Businesses and governmental entities are required to conspicuously post signage reminding individuals of COVID-19 prevention best practices to reduce transmission: Get vaccinated; Stay home if sick, and talk to your doctor; Wear a mask for added protection; Maximize fresh air; and Clean your hands. Sample signage is available online at sf.gov/outreach-toolkit-coronavirus-covid-19.
- ii. Signage for Employees. All Businesses and governmental entities are required to post signs in employee break rooms or areas encouraging employees to get vaccinated and informing them how to obtain additional information. Sample signage is available online at 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 rules and 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 the 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 learns that three or more of its Personnel are confirmed positive cases of COVID-19 and visited the workplace during their high-risk exposure period at any time during a 14-day period (*i.e.*, three cases onsite within a 14-day period), then the entity must call DPH at 628-217-6100 immediately to report the cases and in any event no later than the next business day after learning of those positive cases. 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 DPH, and excluding positive cases and unvaccinated close contacts from the workplace during these isolation and quarantine periods.

Schools and Programs for Children and Youth are subject to separate reporting requirements set forth in Health Officer Directive Nos. 2020-33 and 2020-14, respectively, including as those directives are updated in the future.



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5. Schools and Programs for Children and Youth

- a. Schools. Based on extremely low COVID-19 case rates throughout the region, and the demonstrated low risk of transmission in school settings, the Health Officer strongly believes that schools can and should reopen in full for in-person classes for all grades at the beginning of the 2021/2022 school year. Largely because not all children are eligible to be vaccinated against COVID-19 at this time, schools must follow the health and safety requirements set forth in Health Officer Directive No. 2020-33, including as it may be amended in the future, to ensure the safety of all students and Personnel at the school site.
- b. Programs for Children and Youth. Largely because not all children are eligible to be vaccinated against COVID-19 at this time, the following Programs for Children and Youth must operate in compliance with the health and safety requirements set forth in Health Officer Directive No. 2020-14, including as it may be amended in the future: (1) group care facilities for children who are not yet in elementary school—including, for example, licensed childcare centers, daycares, family daycares, and preschools (including cooperative preschools); and (2) with the exception of schools, which are addressed in subsection a above, educational or recreational institutions or programs that provide care or supervision for school-aged children and youth—including for example, learning hubs, other programs that support and supplement distance learning in schools, school-aged childcare programs, youth sports programs, summer camps, and afterschool programs.

6. Vaccination Requirements for Personnel in High-Risk Settings.

- a. Upon the FDA's full approval of any COVID-19 vaccine, Businesses and governmental entities with Personnel in High-Risk Settings must, within ten weeks of such vaccine approval:
 - i. ascertain vaccination status of all Personnel in High-Risk Settings who routinely work onsite, and ensure that before entering or working in any High-Risk Setting, all Personnel who routinely work onsite are Fully Vaccinated 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, unless any Personnel are exempt under subsection b below;
 - ii. require any unvaccinated exempt Personnel to (1) wear a non-vented N95 mask at all times at the worksite in the High-Risk Setting except while actively eating or drinking, and (2) get tested for COVID-19 at least once a week using either a nucleic acid (including polymerase chain reaction (PCR)) or antigen tests;
 - iii. consistent with applicable privacy laws and regulations, maintain records of employee vaccination or exemption status; and



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- iv. 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.

For clarity, this requirement applies to Personnel in other buildings on a hospital campus where Personnel in those other buildings have access to the acute care facilities or to common facilities on campus with Personnel who work in the acute care facilities or with patients who visit those facilities.

- b. Limited Exemptions. Personnel in High-Risk Settings are exempt from the vaccination requirements under this section upon providing the requesting Business or governmental entity a declination form, signed by the individual under penalty of perjury 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. 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). A sample ascertainment and declination form is available online at www.sfdph.org/dph/covid-19/files/declination.pdf. Personnel who qualify for an exemption due to Religious Beliefs or Qualifying Medical Reasons, as provided above, must still follow the requirements in subpart 6.a.ii, above.
 - c. Record Keeping Requirements. Businesses or governmental entities that operate High-Risk Settings subject to this section must maintain records with following information:
 - i. For vaccinated Personnel: (1) full name and date of birth; (2) vaccine manufacturer; and (3) date of vaccine administration (for first dose and, if applicable, second dose). Nothing in this subsection is intended to prevent an 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 b above.
7. Mega-Events. All Businesses, governmental entities, and other organizations must comply with the requirements in the State's Post-Blueprint Guidance for indoor Mega-Events and are urged to follow the recommendations in the State's Post-Blueprint Guidance for outdoor Mega-Events.



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For indoor Mega-Events, Personnel and patrons age 12 and up are required to show proof, before entering the facility, that they are Fully Vaccinated or Tested. A written self-attestation of vaccination signed (including an electronic signature) under penalty of perjury and containing the name of the person vaccinated, type of vaccine taken, and date of last dose administered is acceptable as proof of full vaccination only if all Personnel and patrons two-years-old and older wear a Well-Fitted Mask at all times other than while actively eating or drinking.

The host or organizer of an indoor or outdoor Mega-Event or series of Mega-Events must submit to the Health Officer a proposed plan detailing the procedures that will be implemented to minimize the risk of transmission among patrons and Personnel. Specifically, the proposed plan should include to following:

- Description of event details (date/time; expected capacity; location; and type of event).
- Contact name for the event (*i.e.*, a person who can be reached in the event of an outbreak and/or who can be contacted to discuss the proposed plan).
- An explanation of how the host or organizer will have attendees meet requirements for providing their vaccination and/or testing status (if applicable).
- An explanation of how the host or organizer will communicate/message:
 - Information to ensure that guests are aware of testing and vaccination requirements (indoors)/recommendations (outdoors);
 - Encouragement for attendees to have completed their vaccination at least 2 weeks before the event; and
 - The safety measures being taken.
- If the Mega-Event is being held indoors, an explanation of how the host or organizer will address face coverings.
- A description of the strategies that will be implemented to avoid stagnant crowds (this can include traffic flow, advanced ticketing, touchless payment, etc.).

Plans must be submitted to HealthPlan@sfcityatty.org at least ten business days before the planned event or, if earlier, ten business days before the date on which tickets will begin to be sold or offered to the public. If tickets are already on sale as of the date of this Order, the host or organizer must submit the plan within 30 days of the date of this Order. The host or organizer does not need advance written approval of the Health Officer or the Health Officer's designee to proceed with the Mega-Event consistent with the plan. But in the event the Health Officer identifies deficiencies in the plan, DPH will contact the host or organizer, and the host or organizer is required to work with DPH to address any and all deficiencies.

8. COVID-19 Health Indicators. The City will 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 data.sfgov.org/stories/s/San-Francisco-COVID-19-Data-and-Reports/fjki-2fab/. 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.



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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 supplemented.
 - b. State Health Orders. This Order is also issued in light of the various Orders 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, including, but not limited to, the January 20, 2021 Executive Order on Protecting the Federal Workforce and Requiring Mask-Wearing, which requires all individuals in Federal buildings and on Federal land to wear masks, maintain physical distance, and adhere to other public health measures, and the February 2, 2021 Order of the CDC, which requires use of masks on public transportation, as such orders are amended, extended or supplemented.
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 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 menace to public health, any more restrictive measures in this Order continue to apply and control in this County.



ORDER OF THE HEALTH OFFICER No. C19-07y

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 www.sfdph.org/healthorders and www.sfdph.org/directives) 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. And to the extent the continuing term of another order of the Health Officer is tied to the duration of the Stay-Safer-At-Home Order, this Order shall be deemed a continuation of the Stay-Safer-At-Home Order for those purposes only.

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 City 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 becomes 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.



ORDER OF THE HEALTH OFFICER No. C19-07y

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

As of the effective date and time in Section 13 above, this Order revises and entirely replaces Health Officer Order No. C19-07y (the “Stay-Safer-At-Home Order”) issued May 20, 2021. Leading up to and in connection with this Order, the Health Officer has rescinded or is rescinding 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. C19-11 (Laguna Honda Hospital protective quarantine), C19-16 (hospital patient data sharing), C19-18 (vaccine data reporting), and C19-19 (minor consent to vaccination); and the directives that this Order references in Sections 3.e and 5, as the Health Officer may separately amend or later terminate any of them. 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 DPH website (www.sfdph.org/healthorders); (2) by posting at City Hall, located at 1 Dr. Carlton B. Goodlett Pl., San Francisco, CA 94102; and (3) 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: June 11, 2021