MANSFIELD MUNICIPAL COURT

City of Mansfield | Tarrant County | Texas

COVID-19/CORONAVIRUS OPERATING PLAN

The Mansfield Municipal Court (the "Court")(specifically, the court offices, the public restrooms accessed by the public visiting the court, the court clerk window, the courtroom, the security area hallway leading to the courtroom, the jury room, and any other accessory rooms to the courtroom) is a public place, a functioning branch of our municipal government. The COVID-19 outbreak has led to the Court being closed to the public, with no in-person court proceedings being conducted since March of this year.

It is now time for the Court to take action to allow in-person proceedings, but with safeguards implemented to protect the health and safety of every person visiting the Court, including defendants, court staff, judges, prosecutors, bailiffs, witnesses, and others who may appear before the Court.

The Texas Department of Health and Human Services ("Texas DSHS") recently provided:

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

To allow in-person proceedings again and to promote a safe reopening, the Court adopts this its "COVID-19/Coronavirus Operating Plan" (the "Plan") and will implement the following:

MANSFIELD MUNICIPAL COURT TEAM

Cass Robert Callaway Presiding Judge **Terri Wilson** Associate Judge Frank Cram Associate Judge **Bill Lane Prosecuting Attorney** Daniela Soria Court Administrator Karen McGee Asst. Court Administrator Sylvia Guardiola Warrant Clerk **Danetta Nelson Deputy Court Clerk Skyler Reid Deputy Court Clerk Alma Coronado Legal Assistant**

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GUIDANCE/RESOURCES

The Court sought guidance from multiple agencies and entities to build this plan. These include, the Honorable David Evans, Regional Presiding Judge for the Eighth Administrative Judicial Region ("Evans"), the Office of Court Administration ("OCA"), the Centers for Disease Control and Prevention ("CDC"), the United States Environmental Protection Agency ("EPA"), the Texas Supreme Court ("Supreme Court"); the Texas Court of Criminal Appeals ("CCA"), Dr. Catherine Colquitt ("Colquitt") the Medical Director/Public Health Authority for Tarrant County, Texas; the Texas Department of State Health Services ("Texas DSHS"), Tarrant County Public Health, ("TCPH"), the United States Food and Drug Administration ("FDA"), the World Health Organization ("WHO"), the Texas Municipal Courts Education Center ("TMCEC"), and the Texas Municipal League ("TML").

GENERAL

Emergency Orders – The judges of the Court will comply with the Emergency Orders Regarding the COVID-19 State of Disaster issued by the Texas Supreme Court and/or the Texas Criminal Court of Appeals, authorized by Texas Government Code Section 22.0035(b) including conducting in-person proceedings. The judges will also comply with the guidance issued by the OCA regarding social distancing, maximum group size, and other restrictions and precautions. The presiding judge of the Court will maintain regular communications with the local health authority and mayor and adjust this Plan as necessary. The judges of the Court will not set any in-person jury selection or jury trial setting prior to September 1, 2020.

IN-PERSON PROCEEDINGS

The Court must use all reasonable efforts to conduct proceedings remotely (video conferencing and live broadcasting), as is mandated and required by the *Eighteenth Emergency Order Regarding the COVID-19 State of Disaster* issued by the Texas Supreme Court. The only proceedings to occur <u>in-person</u> at the court shall be hearings that cannot be conducted remotely and cannot be conducted remotely for reasons beyond the judge's control, a judgment that must be made by the judge to conduct the in-person proceeding. Any person who requests to appear remotely instead of in-person will be allowed to do so, and accommodations will be made to achieve the request.

COURT STAFF AND JUDGE HEALTH

Judges and court staff who can perform the essential functions of their job remotely will telework when possible and in accordance with the city's policies and directives for teleworking. Judges and court staff will abide by the policies and procedures set forth by the city for social distancing, mask wearing, and other COVID-19 prevention of spread policies. However, when <u>in-person</u> proceedings are occurring at the court, this Plan and its requirements shall govern.

SCHEDULING/DOCKETING

The Court shall schedule in-person proceedings with social distancing and this Plan in mind. In particular, the Court shall schedule defendants in small numbers and with ample time in between docket settings to allow for defendants to come and go without offending any provision of this Plan. And, scheduling should take into consideration the ability of city cleaning staff to be able to comply with the disinfecting and cleaning provisions of this Plan.

SCREENING/PREPARING TO COME TO COURT

<u>Educational Packet</u> – the Court will educate those who are to appear <u>in-person</u> (defendants, witnesses, parents/guardians, etc.) at the court by emailing/mailing a COVID-19 prevention packet (Exhibit "A") to the individual).

<u>Temperature</u> – All individuals entering the Court – <u>will be required to submit to a temperature test</u>. If any individual's temperature is 99.6 degrees or above, that individual will be refused entry and directed to seek medical attention/observation. And, the individual will be requested to get tested for COVID-19. The Court shall maintain temperature reading equipment (thermometers) that accurately test body temperature, and with no contact with the person to be tested (infrared, or other thermometer that does not require touching the person to be tested).

<u>Direct Contact/Positive</u> – All individuals entering the Court will be pre-screened (interviewed by phone, email, or form before actual entry to the Court) on whether they have tested positive for COVID-19 or may have had direct contact with a person testing positive for COVID-19 or that displayed symptoms of COVID-19 in the previous 14 (fourteen) days. <u>If answer is yes</u> – that individual will be refused entry and directed to seek medical attention/observation. And, the individual will be requested to get tested for COVID-19.

<u>Symptoms Checklist</u> – all individuals entering the Court will be pre-screened (interviewed by phone, email, or form before actual entry to the court) on whether they have the following symptoms: 1) cough, 2) shortness of breath or difficulty breathing, 3) chills, 4) repeated shaking with chills, 4) muscle pain, 5) headache, 6) sore throat, 7) loss of taste or smell, 8) diarrhea, 9) feeling feverish, 10) fever, and/or 11) flulike symptoms.² If answer is yes to any of these symptoms – that individual will be refused entry and directed to seek medical attention/observation. And, the individual will be requested to get tested for COVID-19.

<u>Vulnerable Populations</u> – All individuals entering the Court will be pre-screened (interviewed by phone, email, or form before actual entry to the Court) on whether they are individuals who are vulnerable to COVID-19 or are caregivers/live with vulnerable individuals – those over age 65 and individuals with serious underlying conditions (high blood pressure, chronic lung disease, diabetes, obesity, asthma, weakened immune systems – chemotherapy patients or HIV/AIDS). <u>If answer is yes to any of these conditions</u> – that individual will be refused entry and accommodations made through rescheduling, setting up remote proceedings, or otherwise.

COVID-19 TESTING

<u>Testing locations</u> – To find a location to be tested for COVID-19, please visit: https://arcg.is/ynPm1. This search tool will provide you a map of Mansfield/Tarrant County and surrounding counties and a listing of locations providing testing with information on making appointments, contacting the providers, cost, etc. This service is provided by the Texas DSHS (www.dshs.state.tx.us).

<u>Scheduling free/no cost testing</u> – To schedule a free COVID-19 test in Tarrant County, complete the Tarrant County Public Health Self-Screening application online at http://access.tarrantcounty.com/en/public-health.html or by calling 817-248-6299. Help is available in English, Spanish, and Vietnamese.

¹ Seventeenth Emergency Order Regarding the Covid-19 State of Disaster, Misc. Docket No. 20-9071, in the Supreme Court of Texas – 3(f).

² Id.

STOPPING THE SPREAD OF COVID-19 - THE COURT

The scientific community is working hard on a vaccine for COVID-19. And, until that vaccine exists and is available for distribution to the community, the responsibility for stopping the spread of COVID-19 is on us. The Court will take the following precautions to do its part to stop the spread. (See Exhibit "B" to learn more information about how COVID-19 spreads).

A. CONTACTLESS TRANSACTIONS

The Court will enact procedures and processes which eliminate hand-to-hand transactions (the transfer of paper/documents, court files, identification cards, money, credit cards, or otherwise) from one individual to another. And for items left in any drop box or received in the mail, court personnel will take precautions to make sure contact with these items is limited and when contact is made, hand washing follows. And, the Court will minimize the need for the opening and closing of doors – which require the touching of door handles, where possible. And the Court will enact procedures to prevent the need for signatures and the sharing of pens.

B. FACE COVERINGS

Face covering required - All individuals in the Court will be required to wear a face covering at all times.

<u>Suitable face coverings</u> – face coverings shall cover both the nose and mouth and be fitted/designed to prevent respiratory droplets from being transmitted from one's mouth to outside of the face covering. The face covering should ensure a tight-fitting seal around your mouth and nose, preventing any exhaled air to escape without passing through the face covering's material/filter. ("See Exhibit "C" an article on the scientific community's belief that COVID-19 is spread through *fine* aerosol droplets escaping a person's body by breathing, that linger in an enclosed air space longer than a sneeze or cough; a strong argument for the wearing masks to prevent the spread of COVID-19.)

<u>Preferred face coverings</u> – individuals should choose face coverings that are most effective in stopping the spread of COVID-19. Here is a list of face coverings listed most effective to least effective: N95 respirator masks, surgical/medical masks, multi-layer cloth masks, and single layer cloth masks.

Bring your own – those visiting the Court are encouraged to bring their own face covering. If unable or appearing without a face covering, the Court will supply a face covering. The Court will keep an inventory of 30 (thirty) face coverings for this purpose. Court staff will be responsible for the inventory, security, storage, and distribution of these court provided face coverings. Face coverings provided to court visitors shall be only used by one individual and become the property of the individual – not to be returned or reused by another.

Frequently Asked Questions Regarding Wearing Face Coverings During COVID-19:

1. "I am not sick. Why do I have to wear a mask?" COVID-19 is different than most contagious diseases. An individual may carry and spread the virus without showing any symptoms whatsoever – completely unaware they are infecting others around them. Wearing a face covering protects the people around you from this type of transmission. (See Exhibit "D" from the CDC "Considerations for Wearing Cloth Face Coverings").

- 2. "I am keeping six (6) feet away from everyone when I go out and don't wear a mask I'm social distancing." Social distancing (maintaining at least six (6) feet of separation from another individual) in the Court is hard to accomplish at all times/everywhere with hallways, tight doorways in the courtroom, and the sometime need to be in close proximity with another person (security scanning/searching, entering or exiting the Court through a doorway, waiting in line, etc.). Wearing a face covering protects everyone when social distancing cannot be accomplished fully; a wise extra layer of protection.
- 3. "I already had COVID-19 and have antibodies. Why do I have to wear a mask?" Wearing a face covering has more to do with preventing the spread of infection, than getting it yourself. Not enough research has been done on COVID-19 to know if you can spread COVID-19 and infect others after already having had the illness, or to know when infectiousness ends for somebody who's had it. The safe, smart, and responsible act is to wear a face covering to prevent others from getting it too particularly those in vulnerable or compromised health situations.
- 4. "What if I do not feel comfortable wearing a mask, for personal or health reasons?" The Court will accommodate those that opt not to or are unable for health reasons to wear a face covering by either providing a remote (videoconference) option for their court appearance or specially setting the individual for a one-on-one court appearance, when maximum social distancing may be achieved. Individuals opting not to wear a mask will be required to notify the Court prior to their set date and time to allow for accommodation.
- 5. "I have a child who is less than ten (10) years old. Do they have to wear a mask? The Court, during this time of COVID-19 strongly encourages children (16 and younger) not to visit the Court. And, if unavoidable, a child less than 10 is not required to wear a face covering/mask. All other ages must wear a face covering.

C. CLEANING/DISINFECTING

<u>Surfaces</u> – Prior to the use of any part of the municipal court area – common space/waiting area, bathrooms, court window, and/or courtroom (and ancillary rooms to the courtroom) each day, cleaning/disinfecting shall be performed of <u>surfaces</u> – glass windows, chairs, tables, railings, benches, sinks, toilets, nonporous wall and floor coverings, etc. following the recommended "6 Steps for Safe & Effective Disinfectant Use" guidelines as provided and updated by the Environmental Protection Agency ("EPA") and the Centers for Disease Control ("CDC"), using "List N" disinfectants approved for the fight against SARS-CoV-2³. (Exhibit E"). And, building cleaning staff will be trained on proper cleaning techniques and be provided with personal protective equipment.

D. SOCIAL DISTANCING

The Court will strictly enforce social distancing within the **Court** (lobby, courtroom, courtroom accessory rooms, jury room, court offices, and bathrooms). The Court adopts the CDC recommendation that at least six (6) feet (about two arms' length) separation between people shall be maintained. The Court will affix markers to the ground in areas where people line up, to help promote effective social distancing. The Court will also block off seating areas in a manner that prevents people sitting within six (6) feet of each other.

And, the Court will, at no time, allow more than ten (10) people to be gathered in the <u>lobby area</u> of the Court. And, the Court will, at no time allow more than ten (10) people <u>in the courtroom</u> (galleries, wells, jury box, witness stand, counsel tables, bench, seating areas, etc.). And, the Court will, at no time allow more than one (1) person in the Court's **bathrooms** at a time, with posted signs.

³ https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2

The court's bailiff will enforce social distancing in all areas of the Court. For purposes of calculating the number of people for social distancing compliance, the court staff, bailiffs, judge, lawyers, etc. all are included in the count.

If a person is attending court with a **household member** (somebody they live with or are currently quarantining with) then social distancing requirements are not required.

And, the Court will prohibit hand-shaking and other traditional contact violative of social distancing.

E. SNEEZE/COUGH BARRIERS

The Court will install plexiglass sneeze/cough barriers as needed in the Court, to create a barrier where social distancing cannot be achieved.

F. HAND WASHING/HAND SANITIZER

<u>Hand washing</u> – The Court adopts and will promote the CDC and FDA recommendation that hand washing with soap and water for at least twenty (20) seconds is the best way to prevent the spread of infections such as COVID-19, even more than the use of hand sanitizer or gloves as gloves can be contaminated and spread the virus easily.⁴

Hand sanitizer dispensers – The Court will supply at least four (4) hand sanitizer dispensers throughout the Court where visitors and staff may, without contact with the dispenser, dispense hand sanitizer. The Court is responsible for making sure these dispensers are stocked and available to all. The dispensers may be mounted on stands (station type) or mounted on a wall or other fixture, but wherever installed, shall prevent a child from accessing the dispenser. Per the recommendation of the CDC and FDA, the Court will supply hand sanitizer that is at least sixty (60%) alcohol. And the Court should be vigilant about only using hand sanitizer that is not expired.

G. SIGNAGE

<u>Hand Washing</u> – the Court will print large, in color, in English and Spanish, signs of the "How to Properly Wash Your Hands" (Exhibit "F" and Exhibit "G") sign and post them in bathrooms accessible to those visiting the Court.

<u>COVID-19 Prevention</u> – the Court will print large, in color, in English and Spanish signs of the "COVID-19: What to Do" (Exhibit "H" and Exhibit "I") sign and post in visible locations in the Court entrance lobby area and/or at the court clerk window.

<u>Face Coverings</u> – the Court will print large, in color, "Wear a Face Covering: Help Protect Texans" (Exhibit "J") sign and post in visible locations in the court entrance lobby area and/or at the court clerk window.

CONTACT TRACING COOPERATION

The Court, if notified or becomes aware, of a COVID-19 positive individual visiting the Court, will make great efforts to assist in the notification of any others that may have come into contact with the positive individual or were present in an area the positive individual occupied or may have touched. This shall include, email

⁴ Stopping the Spread of COVID-19, Angel N. Desai, MD, MPH and Payal Patel, MD, MPH, March 20, 2020, Journal of the American Medical Association (JAMA).

and/or phone notice. And, the Court will work with local health authorities to assist in any tracing or contact research, if requested. The Court will keep the COVID-19 positive individual's identity private when making notifications.

ENFORCEMENT/COMPLIANCE

If any provision of this Plan is violated, the Court will use any and all available enforcement mechanisms to gain full compliance. This includes the removal of any offender, contempt, criminal citation, etc. And, if any provision of this Plan cannot be achieved due to a temporary situation, the Court will close/cancel in-person proceedings until the circumstance has been corrected or resolved.

PLAN EXPIRATION

This Plan shall remain in effect until thirty (30) days after the expiration of Governor Abbott's COVID-19 disaster declaration, and any renewals of the declaration.

REVIEW AND ENDORSEMENT

The Court sought review and received endorsement of this Plan from the following:

David Cook

Mayor – Mansfield, Texas david.cook@mansfieldtexas.gov (Exhibit "K")

E. Allen Taylor, Jr.

City Attorney – Mansfield, Texas Taylor, Olson, Adkins Sralla, & Elam ataylor@toase.com (Exhibit "M")

Joe Smolinski

City Manager – Mansfield, Texas joe.smolinski@mansfieldtexas.gov (Exhibit "L")

Dr. Catherine Colquitt, MD

Health Authority – Tarrant County, Texas 817-321-5305 Office (Exhibit "N")

ACKNOWLEDGEMENT

On this the 9th day of July 2020, I submit this Plan to the Regional Presiding Judge and the Office of Court Administration for review, consideration, and acceptance.

Respectfully,

Cass Robert Callaway

Presiding Judge

Mansfield Municipal Court 817-276-4700 | Court Main

817-276-4705 | Chambers

214-808-8958 | Cell

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an Robert Callawa

EXHIBIT A

What you should know about COVID-19 to protect yourself and others



Know about COVID-19

- Coronavirus (COVID-19) is an illness caused by a virus that can spread from person to person.
- The virus that causes COVID-19 is a new coronavirus that has spread throughout the world.
- COVID-19 symptoms can range from mild (or no symptoms) to severe illness.



Know how COVID-19 is spread

- You can become infected by coming into close contact (about 6 feet or two arm lengths) with a person who has COVID-19. COVID-19 is primarily spread from person to person.
- You can become infected from respiratory droplets when an infected person coughs, sneezes, or talks.
- You may also be able to get it by touching a surface or object that has the virus on it, and then by touching your mouth, nose, or eyes.



Protect yourself and others from COVID-19

- There is currently no vaccine to protect against COVID-19. The best way to protect yourself is to avoid being exposed to the virus that causes COVID-19.
- Stay home as much as possible and avoid close contact with others.
- Wear a cloth face covering that covers your nose and mouth in public settings.
- Clean and disinfect frequently touched surfaces.
- Wash your hands often with soap and water for at least 20 seconds, or use an alcoholbased hand sanitizer that contains at least 60% alcohol.



Practice social distancing

- Buy groceries and medicine, go to the doctor, and complete banking activities online when possible.
- If you must go in person, stay at least 6 feet away from others and disinfect items you must touch.
- Get deliveries and takeout, and limit in-person contact as much as possible.



Prevent the spread of COVID-19 if you are sick

- Stay home if you are sick, except to get medical care.
- Avoid public transportation, ride-sharing, or taxis.
- Separate yourself from other people and pets in your home.
- There is no specific treatment for COVID-19, but you can seek medical care to help relieve your symptoms.
- If you need medical attention, call ahead.



Know your risk for severe illness

- Everyone is at risk of getting COVID-19.
- Older adults and people of any age who have serious underlying medical conditions may be at higher risk for more severe illness.



cdc.gov/coronavirus

COVID-19: What to Do



Stay 6 feet away from all people not in your household.



Wash hands often for 20 seconds and encourage others to do the same.



When soap and water aren't available, use hand sanitizer with at least 60% alcohol.



Please wear a face covering. Cover coughs and sneezes with a disposable tissue.



Avoid touching your eyes, nose, and mouth with unwashed hands.



Disinfect surfaces, buttons, handles, knobs and other places touched often.



Stay away from people who are sick.





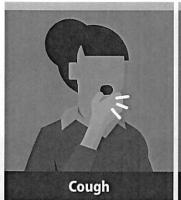
updated 05/21/20

For updates and more information, visit dshs.texas.gov/coronavirus.

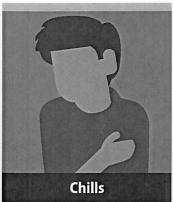


Symptoms of Coronavirus (COVID-19)

Know the symptoms of COVID-19, which can include the following:















Symptoms can range from mild to severe illness, and appear 2-14 days after you are exposed to the virus that causes COVID-19.

*Seek medical care immediately if someone has emergency warning signs of COVID-19.

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion

- Inability to wake or stay awake
- Bluish lips or face

This list is not all possible symptoms. Please call your medical provider for any other symptoms that are severe or concerning to you.



cdc.gov/coronavirus

How To Properly Wash Your Hands



Wet your hands with clean, running water (warm or cold), turn off the tap, and apply soap.



Lather your hands by rubbing them together with the soap. Be sure to lather the backs of your hands, between your fingers, and under to end twice. your nails.



Scrub your hands for at least 20 seconds. Need a timer? Hum the "Happy Birthday" song from beginning

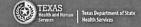


Rinse hands well under clean, running water.



Dry hands using a clean towel or air dry them.

COVID-19



For updates and more information, visit dshs.texas.gov/coronavirus

Important Information About Your Cloth Face Coverings

Print Resources Web Page: https://www.cdc.gov/coronavirus/2019-ncov/communication/print-resources.html

As COVID-19 continues to spread within the United States, CDC has recommended additional measures to prevent the spread of SARS-CoV-2, the virus that causes COVID-19. In the context of community transmission, CDC recommends that you:



Stay at home as much as possible



Practice social distancing (remaining at least 6 feet away from others)



Clean your hands often



In addition, CDC also recommends that everyone wear cloth face coverings when leaving their homes, regardless of whether they have fever or symptoms of COVID-19. This is because of evidence that people with COVID-19 can spread the disease, even when they don't have any symptoms. Cloth face coverings should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated, or otherwise unable to remove the mask without assistance.

How cloth face coverings work

Cloth face coverings may prevent the person wearing the mask from spreading respiratory droplets when talking, sneezing, or coughing. If everyone wears a cloth face covering when out in public, such as going to the grocery store, the risk of exposure to SARS-CoV-2 can be reduced for the community. Since people may spread the virus before symptoms start, or even if people never have symptoms, wearing a cloth face covering may protect others around you. Face coverings worn by others may protect you from getting the virus from people carrying the virus.



General considerations for the use of cloth face coverings

When using a cloth face covering, make sure:

- · The mouth and nose are fully covered
- The covering fits snugly against the sides of the face so there are no gaps
- You do not have any difficulty breathing while wearing the cloth face covering
- The cloth face covering can be tied or otherwise secured to prevent slipping



Wash your cloth face covering after each use in the washing machine or by hand using a bleach solution Allow it to completely dry.

For more information, go to: https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/how-to-make-cloth-face-covering.html



cdc.gov/coronavirus

Cloth Face Covering Do's and Don'ts

Do:

- Make sure you can breathe through it.
- Wear it when directed to and when in public places, like grocery stores.
- Make sure it covers your nose and mouth.
- Wash after using, like normal laundry.

Don't:

- Use if you cannot take it off yourself, like young children under 2.
- Use masks, PPE, intended for healthcare professionals.
- Stop social distancing, washing your hands, and preventing germs.

Their face covering protects you, your face covering protects them. Staying 6 feet away protects both of you.







COVID-19



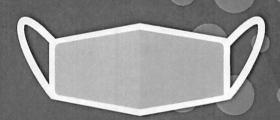
updated 05/01/20

You Must Wear Cloth Face Coverings in Public

Medical or surgical masks should be reserved for health care workers.



Reserve Medical or Surgical masks for health care workers.



Use cloth face coverings. Reuse as needed, but wash at least once a day.

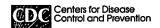




Updated **05**/19/20

For updates and more information, visit dshs.texas.gov/coronavirus

EXHIBIT B



Coronavirus Disease 2019 (COVID-19)

How COVID-19 Spreads

Updated June 16, 2020

Print Page

COVID-19 is thought to spread mainly through close contact from person-to-person. Some people without symptoms may be able to spread the virus. We are still learning about how the virus spreads and the severity of illness it causes.

Person-to-person spread

The virus is thought to spread mainly from person-to-person.

- Between people who are in close contact with one another (within about 6 feet).
- · Through respiratory droplets produced when an infected person coughs, sneezes, or talks.
- These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.
- COVID-19 may be spread by people who are not showing symptoms.

The virus spreads easily between people

How easily a virus spreads from person-to-person can vary. Some viruses are highly contagious, like measles, while other viruses do not spread as easily. Another factor is whether the spread is sustained, which means it goes from person-to-person without stopping.

The virus that causes COVID-19 is spreading very easily and sustainably between people. Information from the ongoing COVID-19 pandemic suggests that this virus is spreading more efficiently than influenza, but not as efficiently as measles, which is highly contagious. In general, the more closely a person interacts with others and the longer that interaction, the higher the risk of COVID-19 spread.

The virus may be spread in other ways

It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes. This is not thought to be the main way the virus spreads, but we are still learning more about how this virus spreads.

Spread between animals and people

- At this time, the risk of COVID-19 spreading from animals to people is considered to be low. Learn about COVID-19 and pets
 and other animals.
- It appears that the virus that causes COVID-19 can spread from people to animals in some situations. CDC is aware of a small number of pets worldwide, including cats and dogs, reported to be infected with the virus that causes COVID-19, mostly after close contact with people with COVID-19. Learn what you should do if you have pets.

Protect yourself and others

The best way to prevent illness is to avoid being exposed to this virus. You can take steps to slow the spread.

- Maintain good social distance (about 6 feet). This is very important in preventing the spread of COVID-19.
- Wash your hands often with soap and water. If soap and water are not available, use a hand sanitizer that contains at least 60% alcohol.
- · Routinely clean and disinfect frequently touched surfaces.

• Cover your mouth and nose with a cloth face covering when around others.

Learn more about what you can do to protect yourself and others.

More Information

ASL Video Series: How does COVID-19 Spread?

Page last reviewed: June 16, 2020

COVID-2019 Menu

Coronavirus Home

2 Your Health

Community, Work & School

Healthcare Workers

A Laboratories

Health Departments

Lite Cases, Data & Surveillance

More Resources

EXHIBIT C

239 Experts With 1 Big Claim: The Coronavirus Is Airborne

The W.H.O. has resisted mounting evidence that viral particles floating indoors are infectious, some scientists say. The agency maintains the research is still inconclusive.

By Apoorva Mandavilli

July 4, 2020

The coronavirus is finding new victims worldwide, in bars and restaurants, offices, markets and casinos, giving rise to frightening clusters of infection that increasingly confirm what many scientists have been saying for months: The virus lingers in the air indoors, infecting those nearby.

If airborne transmission is a significant factor in the pandemic, especially in crowded spaces with poor ventilation, the consequences for containment will be significant. Masks may be needed indoors, even in socially-distant settings. Health care workers may need N95 masks that filter out even the smallest respiratory droplets as they care for coronavirus patients.

Ventilation systems in schools, nursing homes, residences and businesses may need to minimize recirculating air and add powerful new filters. Ultraviolet lights may be needed to kill viral particles floating in tiny droplets indoors.

The World Health Organization has long held that the coronavirus is spread primarily by large respiratory droplets that, once expelled by infected people in coughs and sneezes, fall quickly to the floor.

But in an open letter to the W.H.O., 239 scientists in 32 countries have outlined the evidence showing that smaller particles can infect people, and are calling for the agency to revise its recommendations. The researchers plan to publish their letter in a scientific journal next week.

Even in its latest update on the coronavirus, released June 29, the W.H.O. said airborne transmission of the virus is possible only after medical procedures that produce aerosols, or droplets smaller than 5 microns. (A micron is equal to one millionth of a meter.)

Proper ventilation and N95 masks are of concern only in those circumstances, according to the W.H.O. Instead, its infection control guidance, before and during this pandemic, has heavily promoted the importance of handwashing as a primary prevention strategy, even though there is limited evidence for transmission of the virus from surfaces. (The Centers for Disease Control and Prevention now says surfaces are likely to play only a minor role.)

Dr. Benedetta Allegranzi, the W.H.O.'s technical lead on infection control, said the evidence for the virus spreading by air was unconvincing.

"Especially in the last couple of months, we have been stating several times that we consider airborne transmission as possible but certainly not supported by solid or even clear evidence," she said. "There is a strong debate on this."

But interviews with nearly 20 scientists — including a dozen W.H.O. consultants and several members of the committee that crafted the guidance — and internal emails paint a picture of an organization that, despite good intentions, is out of step with science.

Whether carried aloft by large droplets that zoom through the air after a sneeze, or by much smaller exhaled droplets that may glide the length of a room, these experts said, the coronavirus is borne through air and can infect people when inhaled.

Latest Updates: Global Coronavirus Outbreak Updated 11m ago

- In Texas, caseloads soar as hospital beds dwindle and political divisions sharpen.
- Health experts push back on Trump's false claim that 99 percent of U.S. infections are 'totally harmless.'
- The pandemic has dulled some July 4 weekend celebrations but not all.

See more updates

More live coverage:

Most of these experts sympathized with the W.H.O.'s growing portfolio and shrinking budget, and noted the tricky political relationships it has to manage, especially with the United States and China. They praised W.H.O. staff for holding daily briefings and tirelessly answering questions about the pandemic.

But the infection prevention and control committee in particular, experts said, is bound by a rigid and overly medicalized view of scientific evidence, is slow and risk-averse in updating its guidance and allows a few conservative voices to shout down dissent.

"They'll die defending their view," said one longstanding W.H.O. consultant, who did not wish to be identified because of her continuing work for the organization. Even its staunchest supporters said the committee should diversify its expertise and relax its criteria for proof, especially in a fast-moving outbreak.

"I do get frustrated about the issues of airflow and sizing of particles, absolutely," said Mary-Louise McLaws, a committee member and epidemiologist at the University of New South Wales in Sydney.

"If we started revisiting airflow, we would have to be prepared to change a lot of what we do," she said. "I think it's a good idea, a very good idea, but it will cause an enormous shudder through the infection control society."

In early April, a group of 36 experts on air quality and aerosols urged the W.H.O. to consider the growing evidence on airborne transmission of the coronavirus. The agency responded promptly, calling Lidia Morawska, the group's leader and a longtime W.H.O. consultant, to arrange a meeting.

But the discussion was dominated by a few experts who are staunch supporters of handwashing and felt it must be emphasized over aerosols, according to some participants, and the committee's advice remained unchanged.

Dr. Morawska and others pointed to several incidents that indicate airborne transmission of the virus, particularly in poorly ventilated and crowded indoor spaces. They said the W.H.O. was making an artificial distinction between tiny aerosols and larger droplets, even though infected people produce both.

"We've known since 1946 that coughing and talking generate aerosols," said Linsey Marr, an expert in airborne transmission of viruses at Virginia Tech.

Scientists have not been able to grow the coronavirus from aerosols in the lab. But that doesn't mean aerosols are not infective, Dr. Marr said: Most of the samples in those experiments have come from hospital rooms with good air flow that would dilute viral levels.

In most buildings, she said, "the air-exchange rate is usually much lower, allowing virus to accumulate in the air and pose a greater risk."

The W.H.O. also is relying on a dated definition of airborne transmission, Dr. Marr said. The agency believes an airborne pathogen, like the measles virus, has to be highly infectious and to travel long distances.

People generally "think and talk about airborne transmission profoundly stupidly," said Bill Hanage, an epidemiologist at the Harvard T.H. Chan School of Public Health.

"We have this notion that airborne transmission means droplets hanging in the air capable of infecting you many hours later, drifting down streets, through letter boxes and finding their way into homes everywhere," Dr. Hanage said.



Dr. Soumya Swaminathan, chief scientist of the World Health Organization, at a recent news conference. "We don't shy away from being challenged — it's good for us to be challenged," she said in an interview. Pool photo by Fabrice Coffrini

Experts all agree that the coronavirus does not behave that way. Dr. Marr and others said the coronavirus seemed to be most infectious when people were in prolonged contact at close range, especially indoors, and even more so in superspreader events — exactly what scientists would expect from aerosol transmission.

Precautionary principle

The W.H.O. has found itself at odds with groups of scientists more than once during this pandemic.

The agency lagged behind most of its member nations in endorsing face coverings for the public. While other organizations, including the C.D.C., have long since acknowledged the importance of transmission by people without symptoms, the W.H.O. still maintains that asymptomatic transmission is rare.

"At the country level, a lot of W.H.O. technical staff are scratching their heads," said a consultant at a regional office in Southeast Asia, who did not wish to be identified because he was worried about losing his contract. "This is not giving us credibility."

The consultant recalled that the W.H.O. staff members in his country were the only ones to go without masks after the government there endorsed them.

Many experts said the W.H.O. should embrace what some called a "precautionary principle" and others called "needs and values" — the idea that even without definitive evidence, the agency should assume the worst of the virus, apply common sense and recommend the best protection possible.

"There is no incontrovertible proof that SARS-CoV-2 travels or is transmitted significantly by aerosols, but there is absolutely no evidence that it's not," said Dr. Trish Greenhalgh, a primary care doctor at the University of Oxford in Britain.

"So at the moment we have to make a decision in the face of uncertainty, and my goodness, it's going to be a disastrous decision if we get it wrong," she said. "So why not just mask up for a few weeks, just in case?"

After all, the W.H.O. seems willing to accept without much evidence the idea that the virus may be transmitted from surfaces, she and other researchers noted, even as other health agencies have stepped back emphasizing this route.

"I agree that fomite transmission is not directly demonstrated for this virus," Dr. Allegranzi, the W.H.O.'s technical lead on infection control, said, referring to objects that may be infectious. "But it is well known that other coronaviruses and respiratory viruses are transmitted, and demonstrated to be transmitted, by contact with fomite."

The agency also must consider the needs of all its member nations, including those with limited resources, and make sure its recommendations are tempered by "availability, feasibility, compliance, resource implications," she said.

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Aerosols may play some limited role in spreading the virus, said Dr. Paul Hunter, a member of the infection prevention committee and professor of medicine at the University of East Anglia in Britain.

But if the W.H.O. were to push for rigorous control measures in the absence of proof, hospitals in low- and middle-income countries may be forced to divert scarce resources from other crucial programs.

"That's the balance that an organization like the W.H.O. has to achieve," he said. "It's the easiest thing in the world to say, 'We've got to follow the precautionary principle,' and ignore the opportunity costs of that."

In interviews, other scientists criticized this view as paternalistic. "'We're not going to say what we really think, because we think you can't deal with it?' I don't think that's right," said Don Milton, an aerosol expert at the University of Maryland.

Even cloth masks, if worn by everyone, can significantly reduce transmission, and the W.H.O. should say so clearly, he added.

Several experts criticized the W.H.O.'s messaging throughout the pandemic, saying the staff seems to prize scientific perspective over clarity.

"What you say is designed to help people understand the nature of a public health problem," said Dr. William Aldis, a longtime W.H.O. collaborator based in Thailand. "That's different than just scientifically describing a disease or a virus."

The W.H.O. tends to describe "an absence of evidence as evidence of absence," Dr. Aldis added. In April, for example, the W.H.O. said, "There is currently no evidence that people who have recovered from Covid-19 and have antibodies are protected from a second infection."

The statement was intended to indicate uncertainty, but the phrasing stoked unease among the public and earned rebukes from several experts and journalists. The W.H.O. later walked back its comments.

In a less public instance, the W.H.O. said there was "no evidence to suggest" that people with H.I.V. were at increased risk from the coronavirus. After Joseph Amon, the director of global health at Drexel University in Philadelphia who has sat on many agency committees, pointed out that the phrasing was misleading, the W.H.O.

changed it to say the level of risk was "unknown."

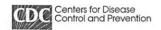
But W.H.O. staff and some members said the critics did not give its committees enough credit.

"Those that may have been frustrated may not be cognizant of how W.H.O. expert committees work, and they work slowly and deliberately," Dr. McLaws said.

Dr. Soumya Swaminathan, the W.H.O.'s chief scientist, said agency staff members were trying to evaluate new scientific evidence as fast as possible, but without sacrificing the quality of their review. She added that the agency will try to broaden the committees' expertise and communications to make sure everyone is heard.

"We take it seriously when journalists or scientists or anyone challenges us and say we can do better than this," she said. "We definitely want to do better."

EXHIBIT D



Coronavirus Disease 2019 (COVID-19)

Considerations for Wearing Cloth Face Coverings

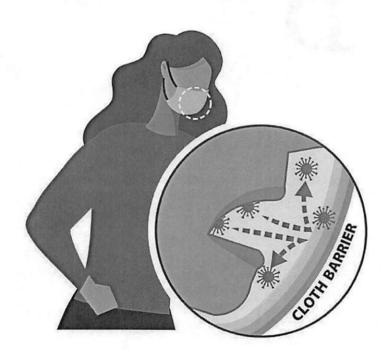
Help Slow the Spread of COVID-19

Updated June 28, 2020

Print Page

- CDC recommends that people wear cloth face coverings in public settings and when around people who don't live in your household, especially when other social distancing measures are difficult to maintain.
- · Cloth face coverings may help prevent people who have COVID-19 from spreading the virus to others.
- Cloth face coverings are most likely to reduce the spread of COVID-19 when they are widely used by people in public settings.
- Cloth face coverings should NOT be worn by children under the age of 2 or anyone who has trouble breathing, is
 unconscious, incapacitated, or otherwise unable to remove the mask without assistance.

Evidence for Effectiveness of Cloth Face Coverings



Cloth face coverings are recommended as a simple barrier to help prevent respiratory droplets from traveling into the air and onto other people when the person wearing the cloth face covering coughs, sneezes, talks, or raises their voice. This is called source control. This recommendation is based on what we know about the role respiratory droplets play in the spread of the virus that causes COVID-19, paired with emerging evidence from clinical and laboratory studies that shows cloth face coverings reduce the spray of droplets when worn over the nose and mouth. COVID-19 spreads mainly among people who are in close contact with one another (within about 6 feet), so the use of cloth face coverings is particularly important in settings where people are close to each other or where social distancing is difficult to maintain.

Who Should Wear A Cloth Face Covering?

General public

- CDC recommends all people 2 years of age and older wear a cloth face covering in public settings and when around people who don't live in your household, especially when other social distancing measures are difficult to maintain.
- COVID-19 can be spread by people who do not have symptoms and do not know that they are infected. That's why it's
 important for everyone to wear cloth face coverings in public settings and practice social distancing (staying at least 6 feet
 away from other people).
- While cloth face coverings are strongly encouraged to reduce the spread of COVID-19, CDC recognizes there are specific
 instances when wearing a cloth face covering may not be feasible. In these instances, adaptations and alternatives should
 be considered whenever possible (see below for examples).

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- If you are sick with COVID-19 or think you might have COVID-19, do not visit public areas. Stay home except to get medical care. As much as possible stay in a specific room and away from other people and pets in your home. If you need to be around other people or animals, wear a cloth face covering (including in your home).
- The cloth face covering helps prevent a person who is sick from spreading the virus to others. It helps keep respiratory droplets contained and from reaching other people.

Caregivers of people with COVID-19

Those caring for someone who is sick with COVID-19 at home or in a non-healthcare setting may also wear a cloth face
covering. However, the protective effects—how well the cloth face covering protects healthy people from breathing in the
virus—are unknown. To prevent getting sick, caregivers should also continue to practice everyday preventive actions: avoid
close contact as much as possible, clean hands often; avoid touching your eyes, nose, and mouth with unwashed hands;
and frequently clean and disinfect surfaces.

Who Should Not Wear a Cloth Face Covering

Cloth face coverings should not be worn by:

- · Children younger than 2 years old
- · Anyone who has trouble breathing
- · Anyone who is unconscious, incapacitated, or otherwise unable to remove the cloth face covering without assistance

Feasibility and Adaptations

CDC recognizes that wearing cloth face coverings may not be possible in every situation or for some people. In some situations, wearing a cloth face covering may exacerbate a physical or mental health condition, lead to a medical emergency, or introduce significant safety concerns. Adaptations and alternatives should be considered whenever possible to increase the feasibility of wearing a cloth face covering or to reduce the risk of COVID-19 spreading if it is not possible to wear one.

For example,

- People who are deaf or hard of hearing—or those who care for or interact with a person who is hearing impaired—may be
 unable to wear cloth face coverings if they rely on lipreading to communicate. In this situation, consider using a clear face
 covering. If a clear face covering isn't available, consider whether you can use written communication, use closed
 captioning, or decrease background noise to make communication possible while wearing a cloth face covering that blocks
 your lips.
- Some people, such as people with intellectual and developmental disabilities, mental health conditions or other sensory
 sensitivities, may have challenges wearing a cloth face covering. They should consult with their healthcare provider for
 advice about wearing cloth face coverings.
- Younger children (e.g., preschool or early elementary aged) may be unable to wear a cloth face covering properly,
 particularly for an extended period of time. Wearing of cloth face coverings may be prioritized at times when it is difficult to
 maintain a distance of 6 feet from others (e.g., during carpool drop off or pick up, or when standing in line at school).
 Ensuring proper cloth face covering size and fit and providing children with frequent reminders and education on the
 importance and proper wear of cloth face coverings may help address these issues.
- People should not wear cloth face coverings while engaged in activities that may cause the cloth face covering to become
 wet, like when swimming at the beach or pool. A wet cloth face covering may make it difficult to breathe. For activities like
 swimming, it is particularly important to maintain physical distance from others when in the water.
- People who are engaged in high intensity activities, like running, may not be able to wear a cloth face covering if it causes
 difficulty breathing. If unable to wear a cloth face covering, consider conducting the activity in a location with greater
 ventilation and air exchange (for instance, outdoors versus indoors) and where it is possible to maintain physical distance
 from others.
- People who work in a setting where cloth face coverings may increase the risk of heat-related illness or cause safety
 concerns due to introduction of a hazard (for instance, straps getting caught in machinery) may consult with an
 occupational safety and health professional to determine the appropriate face covering for their setting. Outdoor workers
 may prioritize use of cloth face coverings when in close contact with other people, like during group travel or shift meetings,
 and remove face coverings when social distancing is possible. Find more information here and below.

Cloth face coverings are a critical preventive measure and are most essential in times when social distancing is difficult. If cloth face coverings cannot be used, make sure to take other measures to reduce the risk of COVID-19 spread, including social distancing, frequent hand washing, and cleaning and disinfecting frequently touched surfaces.

Face Shields

It is not known if face shields provide any benefit as source control to protect others from the spray of respiratory particles. CDC does not recommend use of face shields for normal everyday activities or as a substitute for cloth face coverings. Some people may choose to use a face shield when sustained close contact with other people is expected. If face shields are used without a mask, they should wrap around the sides of the wearer's face and extend to below the chin. Disposable face shields should only be worn for a single use. Reusable face shields should be cleaned and disinfected after each use. Plastic face shields for newborns and infants are NOT recommended.

Surgical Masks

Cloth face coverings are not surgical masks or respirators. Currently, those are critical supplies that should continue to be reserved for healthcare workers and other medical first responders, as recommended by current CDC guidance. Cloth face coverings also are not appropriate substitutes for them in workplaces where masks or respirators are recommended or required and available.

Recent Studies:

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Page last reviewed: June 28, 2020

COVID-2019 Menu

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Your Health

Community, Work & School

Healthcare Workers

Laboratories



Health Departments

Cases, Data & Surveillance

More Resources

EXHIBIT E

6 Steps for Safe & Effective Disinfectant Use



Step 1: Check that your product is EPA-approved

Find the EPA registration number on the product. Then, check to see if it is on EPA's list of approved disinfectants at: epa.gov/listn





Step 2: Read the directions

Follow the product's directions. Check "use sites" and "surface types" to see where you can use the product. Read the "precautionary statements."

Step 3: Pre-clean the surface

Make sure to wash the surface with soap and water if the directions mention pre-cleaning or if the surface is visibly dirty.





Step 4: Follow the contact time

You can find the contact time in the directions. The surface should remain wet the whole time to ensure the product is effective.

Step 5: Wear gloves and wash your hands

For disposable gloves, discard them after each cleaning. For reusable gloves, dedicate a pair to disinfecting COVID-19. Wash your hands after removing the gloves.





Step 6: Lock it up

Keep lids tightly closed and store out of reach of children.

EXHIBIT F

How To Properly Wash Your Hands



Wet your hands with clean, running water (warm or cold), turn off the tap, and apply soap.



Lather your hands by rubbing them together with the soap. Be sure to lather the backs of your hands, between your fingers, and under to end twice. your nails.



Scrub your hands for at least 20 seconds. Need a timer? Hum the "Happy Birthday" song from beginning

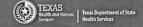


Rinse hands well under clean, running water.



Dry hands using a clean towel or air dry them.

COVID-19



For updates and more information, visit dshs.texas.gov/coronavirus

EXHIBIT G

Cómo lavarse bien las manos



Mójese las manos con agua corriente limpia (tibia o fría), cierre el grifo y enjabónese las manos.



Frótese las manos con el jabón hasta que haga espuma. Asegúrese de frotarse la espuma por el dorso de las manos, entre los dedos y debajo de las uñas.



Restriéguese las manos durante al menos 20 segundos. ¿Necesita algo para medir el tiempo? Tararee dos veces la canción de "Feliz cumpleaños" de principio a fin.



Enjuáguese bien las manos con agua corriente limpia.



Séquese las manos con una toalla limpia o al aire.





Para obtener más información, visite dshs.texas.gov/coronavirus-sp/

EXHIBIT H

COVID-19: What to Do



Stay 6 feet away from all people not in your household.



Wash hands often for 20 seconds and encourage others to do the same.



When soap and water aren't available, use hand sanitizer with at least 60% alcohol.



Please wear a face covering.

Cover coughs and sneezes with a disposable tissue.



Avoid touching your eyes, nose, and mouth with unwashed hands.



Disinfect surfaces, buttons, handles, knobs and other places touched often.



Stay away from people who are sick.





updated 05/21/20 4:00 pm

For updates and more information, visit dshs.texas.gov/coronavirus.

Dial: 21

or: Visit: 211texas.org | COVID-19 Mental Health Support Line: 1.833.986.1919

EXHIBIT I

COVID-19: Qué hacer



Manténgase a 6 pies de distancia de toda persona ajena a su hogar.



Lávese las manos frecuentemente durante 20 segundos y pida a los demás que hagan lo mismo.



Si no dispone de agua y jabón, use un desinfectante de manos a base de alcohol que contenga por lo menos 60% de alcohol.



Use una cubierta para la cara. Cúbrase la boca con un pañuelo desechable al toser y estornudar.



Evite tocarse los ojos, la nariz y la boca sin antes lavarse las manos.



Desinfecte superficies, botones, manijasy toda superficie que se toque con frecuencia.



Manténgase alejado de las personas enfermas.





updated 05/21/20

Para más información y ver las últimas noticias, visite dshs.texas.gov/coronavirus.

Marcar: (2111 or: Visite: 211texas.org | COVID-19 Linea de Apoyo de Salud Mental:

EXHIBIT J

Wear a Face Covering Help Protect Texans







Your face covering protects others Their face covering protects you

The Texas Department of State Health Services recommends Texans wear face coverings in public places to stop COVID-19 from spreading.

Those who cannot take off a face covering by themselves or have trouble breathing should not wear a face covering.

COVID-19
CORONAVIRUS DISEASE 2019



EXHIBIT K

Wednesday, July 8, 2020

Honorable David L. Evans Regional Presiding Judge Eighth Administrative Judicial Region Tom Vandergriff Civil Courts Building 100 North Calhoun Street Fort Worth, Texas 76196

Re: Mansfield Municipal Court Operating Plan Endorsement/Approval

Dear Judge Evans,

My name is David Cook. I serve the City of Mansfield as mayor. I, and the City Council of Mansfield are charged with keeping the city operational during these times of COVID-19. It is important that we maintain all departments within the city – keeping them operational and in service to the community. One such department is the municipal court. Our presiding municipal judge has developed an operating plan to allow in-person proceedings to make sure all who visit the court stay safe and healthy. I have reviewed the plan and approve/endorse it.

Thank you for your help in this process.

Sincerely,

David L. Cook

Mayor

Mansfield, Texas

EXHIBIT L

Wednesday, July 8, 2020

Honorable David L. Evans Regional Presiding Judge Eighth Administrative Judicial Region Tom Vandergriff Civil Courts Building 100 North Calhoun Street Fort Worth, Texas 76196

Re: Mansfield Municipal Court Operating Plan Endorsement/Approval

Dear Judge Evans,

My name is Joe Smolinski. I serve the City of Mansfield as interim city manager. I am responsible for the operations of the city, and in particular the operation of the municipal court. Our presiding municipal judge has developed an operating plan to allow in-person proceedings, if needed, in our court during these times of COVID-19.

I have reviewed the plan and approve/endorse it.

We appreciate your assistance in getting the plan fully adopted and implemented, in accordance with the law.

Sincerely,

Joe Smolinski

Interim City Manager

Mansfield, Texas

EXHIBIT M

Wednesday, July 8, 2020

Honorable David L. Evans Regional Presiding Judge Eighth Administrative Judicial Region Tom Vandergriff Civil Courts Building 100 North Calhoun Street Fort Worth, Texas 76196

Re: Mansfield Municipal Court Operating Plan Endorsement/Approval

Dear Judge Evans,

My name is Allen Taylor. I serve the City of Mansfield as city attorney.

Our municipal court has developed an operating plan to allow for in-person proceedings, per the Supreme Court orders.

I have reviewed the plan and endorse it. We thank you for your assistance in getting all the necessary approvals and notices accomplished to implement this plan.

Sincerely,

Allen Taylor/City Attorney

Mansfield, Texas

EXHIBIT N



CATHERINE A. COLQUITT, M.D. LOCAL HEALTH AUTHORITY & MEDICAL DIRECTOR

TARRANT COUNTY PUBLIC HEALTH Safeguarding Our Community's Health

Date Joly 7, 2020

To Whom it May Concern,

Tarrant County Local Health Authority & Medical Director or Tarrant County Deputy Local Health Authority & Assistant Medical Director has reviewed and approved the Guidance for All Court Proceedings During COVID-19 Pandemic.

Sincerely,

Catherine A. Colquitt, M.D.

Local Health Authority and Medical Director

Tarrant County, Texas

Dr. Kenton K. Murthy

Deputy Local Health Authority &

Assistant Medical Director

Tarrant County, Texas

Tarrant County Public Health

Accountability. Quality. Innovation.











