**City of Long Beach**
*Working Together to Serve*

**Office of the City Attorney**

**Memorandum**

**DATE:** November 13, 2020

**TO:** Mayor and Members of the City Council

**FROM:** Charles Parkin, City Attorney
Taylor M. Anderson, Deputy City Attorney

**SUBJECT:** **Role of City Council in Implementing and Interpreting the City's COVID-19 Health Orders**

Pursuant to your request at the October 20, 2020 City Council meeting, this memorandum provides an overview on the role of the Long Beach City Council, as a legislative body, in the City of Long Beach's implementation and interpretation of the State of California's emergency orders, health orders, and mandatory guidance in response to COVID-19 (State Health Orders).

Ultimately, and as further described herein, the Long Beach Public Health Officer (City Health Officer) has statutory authority to issue local health orders to prevent the spread of communicable diseases, such as COVID-19, which is separate and distinct from that of the City Council during a local emergency. Additionally, the City, in issuing any Health Orders, must adhere to the requirements established and mandated by the State Health Orders.

## I. BACKGROUND AND TIMELINE

On December 2019, a novel (new) coronavirus known as SARS-CoV-2 (COVID-19) was first detected in Wuhan, Hubei Province, People's Republic of China, causing outbreaks of the coronavirus disease COVID-19 that has now spread globally. The United States Secretary of Health and Human Services declared a public health emergency on January 31, 2020 in response to COVID-19.

On March 4, 2020, Governor Gavin Newsom issued a Proclamation of a State of Emergency due to the then emerging COVID-19 pandemic. On the same date the City Manager of Long Beach issued a Proclamation of Local Emergency, and the City Health Officer issued a Declaration of Local Health Emergency. On March 10, 2020, the City Council ratified the City Manager's proclamation and the City Health Officer's declaration regarding COVID-19.

On March 13, 2020, the President of the United States proclaimed a national emergency due to a COVID-19 outbreak, beginning on March 1, 2020.

On March 19, 2020, the Governor and State Public Health Officer (State Health Officer) issued a statewide Stay-at-Home Order, requiring all residents to stay at home except for Essential Critical Infrastructure Workers needed to maintain continuity of operations. Since the list of Essential Critical Infrastructure Workers was designated by the State Health Officer, any industry or business sector (sectors) not included on this list was required to close operations immediately statewide. On March 19, 2020, the City Health Officer also issued a local Long Beach Safer-At-Home Order (City Health Order). An amended version of the City Health Order remains in effect as of today.

On May 4, 2020, the Governor issued Executive Order (EO-N-60-20) allowing local health jurisdictions to gradually reopen various sectors under guidance and criteria issued by the State Health Officer. The State's initial reopening strategy (entitled "the Roadmap to Recovery") required local health officers to certify that the public health would not be jeopardized if the local health jurisdiction implemented less restrictive measures governing re-opening; and that the local jurisdiction's data had reached an acceptable level as measured by the State's standards.

As of August 28, 2020, the State eliminated the "Roadmap to Recovery" strategy and released a revised reopening strategy entitled a "Blueprint to a Safer Economy" (Blueprint), where the State revised criteria for loosening and tightening restrictions on sectors and activities. The Blueprint changed criteria for local health jurisdictions to reopen the economy by instead creating a tiered system that outlined which sectors could reopen under each tier, and to what extent.

Throughout the pandemic, the City Health Officer has issued health orders to control the spread of COVID-19, protect the public health and welfare, and to clarify or give direction and interpretation of the various State Health Orders and associated State guidance. The State Health Orders and guidance often proved to be vague and unclear which necessitated the action of the City Health Officer to provide clarity and interpretation. The City's current health orders and protocols can be found here.

The Blueprint's Activity and Business Tiers Spreadsheet, which outlines sectors that the State allows to reopen under each tier in a condensed spreadsheet, may be found here. State Industry Guidance for reopening each sector and modifications under each tier in the Blueprint may be found here. The County of Los Angeles (County) health orders may be found here. The State Health Orders and public health directives are available at the State's "Stay At Home Q&A" found here.

## II. AUTHORITY OF THE CITY COUNCIL AND THE CITY HEALTH OFFICER DURING A DECLARED EMERGENCY DUE TO A COMMUNICABLE DISEASE

The "California Emergency Services Act" provides that during a local emergency, the governing body of a political subdivision (i.e., counties and cities) or local officials designated by the governing body "may promulgate orders and regulations necessary to provide for the protection of life and property." When the Governor has also declared a

state of emergency, local ordinances, orders, and regulations may continue in effect "except as to any provision suspended or superseded by an order or regulation issued by the Governor."

In short, during a state of emergency, a local government may not exercise its emergency powers in a manner that conflicts with the exercise of the Governor's emergency powers. In some instances, the Governor's emergency authority includes the ability to suspend the operation of local ordinances, orders, and regulations regardless of whether such local policies predate the declared emergency, or were enacted pursuant to the local government's own emergency powers. However, local ordinances, orders, and regulations remain valid unless and until the Governor either (1) explicitly suspends such ordinances, orders, and regulations; or (2) the ordinances, orders, and regulations conflict with any emergency action taken by the Governor, which then preempts (i.e., supersedes) actions or orders of the local government including those of the City of Long Beach.

The City Council has utilized its authority under the "California Emergency Services Act" to protect people and property by enacting regulations and policies related to COVID-19, including, but not limited to, a moratorium on evictions; an anti-tenant harassment ordinance; a street sweeping citation relief program; emergency loans for business; technical assistance for businesses; unemployment insurance benefit support; deferral of business license taxes and business-related fees; worker protections; COVID-19 supplemental sick leave; and various COVID-19 related grants.

During a declared public health emergency, State law grants local health officers' autonomous discretion to take any measure necessary to protect the public health, which includes preventing the spread of communicable diseases such as COVID-19. (*See* Ca. Health & Safety Code § 101040). A local health officer's authority under State law to protect the public from the spread of disease is independent and distinct from the City Council's authority to protect people and property.

State law grants local health officers this broad authority because local health officers have a duty to protect the public health and possess specialized medical knowledge, expertise, skills, and training to prevent the spread of communicable diseases. Furthermore, local health officers have a duty to prevent the spread of contagious, infectious, or communicable diseases, even when there is no declared public health emergency. (*See* Ca. Health & Safety Code § 120175).

For example, where a local health officer determines the public health, or the health of any particular person, is endangered by a case or suspected case of tuberculosis, a local health officer may issue any health orders necessary to protect the public health from the spread of tuberculosis. As with health-related action to prevent the spread of COVID-19, such health-related action does not require the involvement or direction of the City Council.

When adopting COVID-19 Health Orders that close or reopen sectors and activities, several factors to prevent the spread of communicable disease are and were considered by the City Health Officer, including, but not limited to: City data related to the spread of COVID-19; the risk of transmission of COVID-19 from person to person for each sector and activity; the likelihood and length of prolonged person-to-person contact; whether the activity involves or encourages gatherings or large events/groups; whether the public and workers can maintain six feet (6') or greater distance from each other; whether face coverings can be worn during an activity; whether an activity can occur outdoors; whether physical barriers or sanitation protocols can mitigate the likelihood of transmission; Centers for Disease Control and Prevention (CDC) Guidance; and State Health Orders.

While local health officers manage prevention of the spread of communicable diseases such as COVID-19 at the local level, the State Health Officer manages prevention and spread of communicable diseases at the State level on a state-wide basis. The State Health Officer issues directives, guidance, and orders addressed to each of the State's local health jurisdictions to prevent the spread of COVID-19 and to control the reopening of the State's economy, thereby establishing the minimum health standards that all the local jurisdictions are required to adhere to. In other words, any order of a local health officer may not be less restrictive than those standards established by the State.

## III. THE CITY COUNCIL'S ABILITY TO GIVE INPUT ON HEALTH ORDERS

Although the City Council does have the authority to enact legislation (as described above) to protect people and property during a declared emergency, the City Council does not have the direct authority to shape the conduct of the City Health Officer relative to the Health Officer's State mandated responsibilities to protect the public from the spread of communicable diseases.

While legislative bodies in other jurisdictions may or may not have the ability to hire, fire, and communicate directly with all employees, including public health officers, Long Beach City Charter Section 208 expressly prohibits the City Council or its Council employees from giving direction to City employees in the City Manager Departments, either publicly or privately.

Despite these limitations, the City Charter does permit the City Council to give input to the City Manager. For example, the City Council could hold study sessions in open session at a Council meeting regarding the City Health Orders to provide input and receive public comment.

The input regarding the City Health Orders received by the City Manager may be taken under advisement by the City Health Officer when adopting or amending the City Health Orders to prevent the spread of COVID-19. When issuing or amending a health order, the City Health Officer could utilize this Council input, together with other factors to prevent the spread of communicable disease enumerated in Section II. Nonetheless, the City Health Officer's actions cannot violate any requirements or restrictions established by the State Health Orders.

In addition to the types of ordinances already enacted by the City Council and other actions taken by the Council related to COVID-19, the City Council could also adopt an ordinance to strengthen limited portions of the City Health Order to protect people and property. An ordinance adopted by the City Council may be more restrictive than the regulations imposed by the City Health Officer.

For example, the City Council could enact an ordinance related to face coverings, which some cities throughout the State have enacted. However, most of those cities do not have their own health department or health orders, so they enacted their own requirements that go beyond their county's health order. However, by allowing regulations regarding face coverings to remain in the City Health Order, the City Health Officer can quickly respond to frequent changes in State Health Orders, whereas ordinances typically do not allow the same flexibility and take significantly longer to amend. As of the date of this memorandum, the City Health Order maintains face covering requirements that are more restrictive than the State Health Orders.

## IV. APPLICABILITY OF COUNTY EMERGENCY ORDERS WITHIN INCORPORATED CITIES

In general, ordinances adopted by county boards of supervisors are applicable only within the unincorporated areas of the county. However, it is uncertain from a legal perspective, whether this "general rule" would apply in the case of a county issued health order. Although there is no reported case law that has adjudicated this issue, there is a 1979 opinion from the California Office of the Attorney General (AG Opinion) that concluded that: *"[c]ities within a county are bound by county rules and regulations adopted by the county pursuant to [state emergency laws] during a county proclaimed local emergency when the local emergency includes both incorporated and unincorporated territory of the county."*

Noting that emergencies frequently cross jurisdictional boundaries, the AG Opinion reasoned that State emergency response laws aim to ensure coordination among governments and that this purpose would be undermined if incorporated cities within the county could adopt "different and perhaps even conflicting regulations to apply to the same problem relating to the same emergency in the same county." As such, the AG Opinion also concluded that "insofar as measures are taken by different levels of government with respect to the same emergency conflict, the measures taken by the agency with the more inclusive territorial jurisdiction (e.g., county versus a city) must govern."

In short, the AG Opinion concluded that a county order issued in response to a declared local emergency may: (i) legally apply within incorporated jurisdictions, and (ii) supersede conflicting actions taken by the incorporated jurisdiction. Importantly, state Attorney General opinions are <u>not</u> legally binding, and courts can—and often do—reach contrary conclusions. As such, while courts generally afford AG opinions considerable weight and they can help guide decision-making in unsettled areas of law, we cannot

predict how any particular State court would rule on the applicability of specific county emergency orders that purport to apply within incorporated jurisdictions such as the City of Long Beach.

Of note, several Bay Area counties—Alameda, Contra Costa, Marin, San Francisco, San Mateo, and Santa Clara—have recently adopted emergency anti-eviction policies applicable throughout the entire geographic boundaries of the counties, including all incorporated cities and unincorporated areas, citing their authority under the California Emergency Services Act and the 1979 AG Opinion mentioned above. Additionally, it is important to note that even if a county has the authority to adopt and enforce orders within incorporated jurisdictions, such authority is strictly limited to the duration of the local emergency.

It is unclear whether a local health officer's express authority under State law to prevent the spread of communicable disease will impact a court's ruling on this issue, if at all. The City of Long Beach maintains that it is legally a separate health jurisdiction from the County of Los Angeles and possesses independent local authority to regulate for the purpose of preserving the public health. However, for regional consistency, clarity for the public, and because of the State's requirement that the City is treated the same as the County for the purpose of the State's Blueprint tiers (discussed below), the City has remained generally consistent with the County through its COVID-19 health orders.

## V. LIMITATIONS ON THE CITY'S ABILITY TO MOVE THROUGH THE TIERS OF THE STATE'S BLUEPRINT

The City Health Officer's ability to reopen and close sectors and activities during the pandemic is limited by what the State Health Orders allow. If a sector is not allowed by the State to reopen in that county (even if the State allows the same sector to reopen in other counties), the local health officer does not have the authority to be less restrictive than the State Health Orders. The State Health Orders expressly allow local health officers to implement public health measures within their local jurisdictions that are more restrictive than the public health measures imposed on a statewide basis by the State Health Officer. This allows local health officers the flexibility to tailor regulations to respond to local epidemiological conditions, such as a rise or decrease in the positivity rate and the average number of daily COVID-19 cases.

The City, as one of only three local city health jurisdictions in the State, is uniquely positioned to respond to the pandemic because the City can act independently to prevent the spread of COVID-19 by taking action such as issuing health orders, operating testing sites, contact tracing, and providing quarantine and isolation housing to those in need. Other cities in the State, without local city health departments, are subject to health orders issued by their county health department or State Health Orders where their county has issued none. However, the Cities of Long Beach and Pasadena have agreed, to the extent feasible, to act as partners in a regional approach with the County to help prevent the spread of COVID-19.

Though legally the City remains a separate health jurisdiction from the County, the State requires that COVID-19 data from Long Beach and Pasadena be combined with the County's data. This requirement from the State prevents the City from progressing through the Blueprint's tiers ahead of the County. Furthermore, the State Health Orders limit which sectors and activities may reopen and to what extent.

As of November 3, 2020, the County's data places the County and Cities of Long Beach and Pasadena within the "Purple Tier" (also known as "Widespread: Tier 1") of the State's Blueprint. Pursuant to the Blueprint's Activity and Business Tiers Chart, the State's Industry Guidance Webpage, and the State's COVID-19 Industry Guidance: Fitness Facilities, gyms and fitness centers may only open outdoors with modifications for counties in the Purple Tier. Therefore, the City Health Officer may allow gyms and fitness centers to operate outdoors only if the City's data supports reopening (i.e., if the data reflects a steady decrease or stabilization in factors such as, the positivity rate and the average number of daily cases). If the City Health Officer allows indoor operations of gyms and fitness centers while the County is in the Purple Tier, the City would be in violation of the State Health Orders.

Attached for your reference (Attachment A) is a comparison of what can operate under the Blueprint's Purple Tier and what is allowed as of November 12, 2020 under the City Health Order. The City Health Order allows all sectors to operate to the maximum extent allowed under the Purple Tier.

## VI. DIFFERING REQUIREMENTS FOR BUSINESSES IN SPECIFIC SECTORS

The City Council requested an explanation of why some services can be provided by some businesses but not others. The State Health Orders initially designated a list of Essential Critical Infrastructure Workers which were allowed to continue operations during the pandemic; while at the same time the State order required that businesses deemed "non-essential" to close, and all individuals in the State not deemed "essential" to stay at their place of residence in an effort to prevent the spread of COVID-19.

As the State Health Order evolved, it created sectors of businesses (such as "Expanded Personal Services"; "Gyms and Fitness Centers"; "Restaurants, Wineries, and Bars") which were classified differently from Essential Critical Infrastructure Services. The non-essential sectors were then allowed, or not allowed, to reopen as the State Health Officer determined it was safe to do so, depending on the risk COVID-19 would continue to spread within each sector. The State proceeded in this way in an effort to protect the public and prevent the spread of COVID-19 by either limiting sectors where there was potentially a high risk of prolonged person-to-person contact or gathering, or by allowing sectors to reopen that were deemed to pose a lower risk of spreading COVID-19.

For example, some personal services are allowed in a medical office (such as massage), but not by a business performing a similar service in a non-medical setting. Massages performed in medical offices are deemed medical treatment and therefore part of Essential Critical Infrastructure under the State Health Orders. The designation as

"essential" has allowed certain businesses and sectors to remain open throughout the Statewide shutdown. Massages performed in non-healthcare settings were deemed "non-essential" by the State Health Orders and required to reopen with the "Expanded Personal Care Services" sector along with all other non-essential personal care services.

Similar inconsistencies appear in the State Health Orders between sectors and businesses deemed "essential" or "non-essential". Since the City cannot be less restrictive than State Health Orders, the City is limited by those standards as established by the State Health Orders.

## VII. ABILITY FOR THE CITY COUNCIL TO ADVOCATE FOR CHANGES AT THE STATE LEVEL

The City Council on October 20, 2020, inquired about their ability to advocate for changes to the State Health Order at the State level. The City Council, as a legislative body, has the ability to pass resolutions and minute orders outlining policy and requests for other jurisdictions to take action that affects the City. These would be in the form of a City Council agenda item, and upon passage the City Manager would communicate those requests to the State for its consideration.

## VIII. COUNCIL ACTION TO ADOPT THE CITY MANAGER'S PROMULGATION OF THE CITY HEALTH ORDER AS AN EMERGENCY REGULATION

The City Council enacted Chapter 8.120 of the Long Beach Municipal Code ("Temporary Enforcement of the Long Beach Health Orders Related to COVID-19"). This Chapter bolsters the City's ability to enforce the City Health Order through administrative, civil, and criminal enforcement remedies by allowing the City Manager to promulgate the City Health Orders as a form of emergency regulation under the Long Beach Municipal Code (LBMC).

Upon adoption of the City Health Order, the City Manager promulgates the City Health Order as an emergency regulation to protect life and property as affected by the COVID-19 emergency pursuant to Government Code section 8634, and LBMC sections 2.69.070.A and 8.120.020. The City Health Order is then presented to the City Council to ratify the City Manager's promulgation of the City Health Order as an emergency regulation.

If the City Council ratifies the City Manager's promulgation of the City Health Order as an emergency regulation, the City may enforce the City Health Order through administrative, civil, and criminal remedies. If the City Council does not ratify the City Manager's promulgation of the City Health Order as an emergency regulation, the City Health Order will remain in effect, but the City's enforcement options will be limited. Though State law allows for some criminal enforcement of the City Health Order, enforcement will be limited to primarily administrative and civil enforcement if the City Manager's promulgation of the City Health Order is not ratified as an emergency regulation by the City Council.

As discussed in Section III, the Long Beach City Charter only permits the City Council to give input to the City Manager. The City Council may provide input to the City Manager on the extent to which the City Council would like the City Health Order enforced, but the City Council does not have the authority to direct the City Manager to selectively enforce the City Health Orders (e.g., enforcing only certain regulations or enforcing only against certain sectors).

For example, the City Council's adoption of LBMC Ch. 8.120 authorized enforcement of the City Health Orders through the ordinance, but enforcement could only occur after a person was provided ample opportunity to comply after being notified of an alleged violation, which is a permissible type of input the City Council may give to the City Manager. The City Council could not direct the City Manager to only enforce the face covering provisions of the Health Order, or to only enforce against businesses in the Retail Sector that do not comply with the City Health Order.

## IX. ENFORCEMENT APPROACH OF THE CITY HEALTH ORDER

The City utilizes a Vendor Task Force to enforce the various requirements in the City Health Order, with a team comprised of staff from Code Enforcement, the Health Department, the Police Department, the City Attorney's Office, and Energy Resources, as needed.

The Vendor Task Force's process in enforcing the City Health Order is generally as follows:

1. Inspection #1 – The business receives education regarding the City Health Order, including a copy of the City Health Order, and a written warning is issued.

2. Inspection #2 – If the violation is not corrected, an administrative citation may be issued to both the property owner and business owner by Code Enforcement for $100.

3. Inspection #3 – If the violation is not corrected, a second administrative citation may be issued to both the property owner and business owner by Code Enforcement for $200.

4. Inspection #4 – If the violation is not corrected, a third administrative citation may be issued to both the property owner and business owner by Code Enforcement for $500 and a misdemeanor citation may be issued by the Police Department.

5. Inspection #5 - If the violation is not corrected, where deemed appropriate, the City may pursue water shut off and a fourth administrative citation to both property owner and business owner by Code Enforcement for $500.

6. Inspection #6 or greater - If the violation is not corrected, a fifth administrative citation may be issued to both the property owner and business owner by Code Enforcement for $500. If the business continues to act in violation of the City Health

Order, involved City Departments and the City Attorney will evaluate other options (e.g., revocation of Health permit (if applicable), suspension of a business license, or a court ordered injunction).

As discussed previously, LBMC Ch. 8.120 clearly prioritizes an education approach to enforcement. The Venue Task Force has been able to achieve good citywide compliance using this approach. As of November 9, 2020, staff have conducted 13,463 total inspections, and issued 77 citations. The Venue Task Force has been able to achieve compliance in nearly every case without resorting to steps 4-6 as outlined above.

A list of all website links shared in this document may be found in Attachment B. Please do not hesitate to contact our office should you have any questions or concerns.

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ATTACHMENT A: COMPARISON OF WHAT IS ALLOWED TO REOPEN UNDER STATE'S BLUEPRINT TO SAFER ECONOMY PURPLE TIER AND LONG BEACH SAFER-AT-HOME ORDER
ATTACHMENT B: APPENDIX OF WEBSITE LINKS

cc: Michael Mais, Assistant City Attorney
Tom Modica, City Manager
Linda Tatum, Assistant City Manager

# ATTACHMENT A
# COMPARISON OF WHAT IS ALLOWED TO REOPEN UNDER STATE'S BLUEPRINT TO SAFER ECONOMY PURPLE TIER AND LONG BEACH SAFER-AT-HOME ORDER

| SECTORS | PURPLE TIER (WIDESPREAD TIER 1) | 11/12/20 LONG BEACH SAFER-AT-HOME HEALTH ORDER |
|---|---|---|
| **Critical Infrastructure** | Open with modifications | Open with modifications |
| **Limited Services** | Open with modifications | Open with modifications |
| **Outdoor Playgrounds & Outdoor Recreational Facilities** | Open with modifications | Open with modifications |
| **Hair Salons & Barbershops** | Open indoors with modifications | Open indoors with modifications |
| **All Retail** (including critical infrastructure, except standalone grocers) | Open Indoors with modifications<br>• Max 25% capacity | Open indoors with modifications & maximum of 25% capacity |
| **Shopping Centers** (Malls, Destination Centers, Swap Meets) | Open Indoors with modifications<br>• Max 25% capacity<br>• Closed common areas<br>• Closed food courts | Open indoors with modifications<br>• Max 25% capacity<br>• Closed common areas<br>• Closed food courts for indoor dining. Curbside pickup for food courts okay |
| **Personal Care Services** | Open indoors with modifications | Open Indoors with modifications. Includes nail salons, tanning salons, esthetician, skin care and cosmetology services; electrology; body art professionals, tattoo parlors, microblading and permanent make-up; and piercing shops; and massage therapy (in non-healthcare setting) |
| **Museums, Zoos, and Aquariums** | Open outdoors only with modifications | Open outdoors only with modifications |
| **Places of Worship** | Open outdoors only with modifications | Open outdoors only with modifications |
| **Movie theaters** | Open outdoors only w/modifications | Open outdoors only (i.e. drive-in) with modifications |
| **Hotels and lodging** | Open with modifications | Open with modifications |
| **Gyms and Fitness Centers** | Open outdoors only with modifications | Open outdoors only with modifications |
| **Restaurants** | Open outdoors only with modifications | Open outdoors only with modifications |
| **Wineries** | Open outdoors only with modifications | Open outdoors only with modifications |
| **Bars, Breweries, and Distilleries** | Closed both outdoors and indoors where no meal is provided. May operate under Restaurant Protocol outdoors where meal is provided. | Closed both outdoors and indoors where no meal is provided. May operate under Restaurant Protocol outdoors where meal is provided. |
| **Family Entertainment Centers** | Outdoor Only with modifications e.g.<br>• Kart Racing<br>• Mini Golf<br>• Batting Cages | Outdoor Only with modifications e.g.<br>• Kart Racing<br>• Mini Golf<br>• Batting Cages |
| **Cardrooms, Satellite Wagering** | Open outdoors only with modifications | Not applicable |
| **Non-Essential Office Worksites** | Allowed to operate remote only | Allowed to operate remote only |
| **Professional sports** | Open<br>• Without live audiences<br>• With modifications | Open<br>• Without live audiences<br>• With modifications |

# ATTACHMENT B: APPENDIX OF WEBSITE LINKS

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|---|---|
| Governor and State Health Officer Stay-At-Home Executive Order N-33-20 | https://covid19.ca.gov/img/Executive-Order-N-33-20.pdf |
| State's List Designing Essential Critical Infrastructure Workers | https://covid19.ca.gov/essential-workforce/ |
| State Stay Stay-At-Home Order Q&A (with links to orders and guidance) | https://covid19.ca.gov/stay-home-except-for-essential-needs/ |
| State Health Officer Orders | https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Guidance.aspx |
| Governor's May 4, 2020 Executive Order N-60-20 for Reopening Economy | https://www.gov.ca.gov/wp-content/uploads/2020/05/5.4.20-EO-N-60-20.pdf |
| State Blueprint To A Safer Economy Webpage | https://covid19.ca.gov/safer-economy/ |
| State Blueprint Activity and Business Tiers Spreadsheet | https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH Document Library/COVID-19/Dimmer-Framework-September_2020.pdf |
| State COVID-19 Industry Guidance | https://covid19.ca.gov/industry-guidance/ |
| State COVID-19 Industry Guidance: Fitness Facilities | https://files.covid19.ca.gov/pdf/guidance-fitness--en.pdf |
| State COVID-19 Industry Guidance: Expanded Personal Care Services | https://files.covid19.ca.gov/pdf/guidance-expanded-personal-care-services--en.pdf |
| City of Long Beach Health Orders and Protocols | http://www.longbeach.gov/health/diseases-and-condition/information-on/coronavirus/covid-19-orders/ |
| County of Los Angeles Health Orders and Protocols | http://publichealth.lacounty.gov/media/coronavirus/ |