LARAMIE COUNTY RECOVERY PLAN

Effective Date: January 9, 2021

This version supersedes all previous versions

Planning Subcommittee

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IMPORTANT NOTICE #1

This version of the Recovery Plan is consistent with the Nineteenth Continuation of Statewide Orders effective January 9, 2021.

This version reflects the ongoing surge in cases of COVID-19 in the state and county, and discusses, among other things, some recent relaxation in restrictions on hours of operation of restaurants and bars. The current statewide mask mandate in certain public places is still in effect.

Events that fall outside current State orders also must be approved as "variances" by both the County and State Health Departments. There is a new section on variances, and how to apply for one.

IMPORTANT NOTICE #2

Wearing a face covering or mask, in public when social distancing is not possible, protects members of society from infection as well as indicating a commitment to the safety of others.

Various exemptions are allowed, and reference is made to the actual mandate for details. People with certain medical conditions or disabilities may be exempted from mask requirements.

There is no requirement to wear a mask while outside during general open-air activity (walking, exercise, outdoor work) when not near other members of the general public, or when driving in one's private vehicle. Private households and other areas not open to the general public are not covered by the mask mandate, but are encouraged to follow mask and social distancing recommendations as much as possible when members of different households are mingling.

TABLE OF CONTENTS

Section 1 – Background	1
Current Statewide Orders	1
General Strategy	1
Section 2 – Current Status of COVID-19 in the US	2
Section 3 – Evolving Approach and Metric Overview	3
Wyoming's Evolving Approach to COVID-19	3
State-Wide Metrics	3
Laramie County Metrics	3
Laramie County Stoplight Report	5
Section 4 – What's New This Time?	6
Section 5 – Statewide Orders	7
Statewide Public Health Order #1 (Nineteenth Continuation)	7
Statewide Public Health Order #2 (Nineteenth Continuation)	7
Statewide Public Health Order #3 (Nineteenth Continuation)	8
Section 6 – Vaccinations	9
Section 7 – Variance Requests	10
Section 8 – Definitions	11

Section 1 – Background

The Cheyenne/Laramie County Health Department (C/LCHD) continues to follow the lead of the current statewide orders and guidance from Governor Gordon and the Wyoming Department of Health. The Nineteenth Continuation of these orders has been released and forms the basis for this plan in its current form.

In addition to the three statewide orders, the state-wide mask mandate, issued on November 7, 2020 by the Wyoming Department of Health, has also been continued. The state order supersedes the Laramie County mask mandate previously issued by the C/LCHD, and at this time only the state order is in effect.

Current Statewide Orders

Statewide Orders are periodically reissued and amended to reflect current COVID-19 activity in the state. The current orders are:

- Nineteenth Continuation and Modification of Statewide Public Health Order #1
 Regarding Bars, Restaurants, Theaters, Gymnasiums, Childcare Facilities, K-12 Public
 Schools, Colleges, Universities and Trade Schools
- Nineteenth Continuation and Modification of Statewide Public Health Order #2 Regarding Gatherings of More Than Twenty-five (25) People
- Nineteenth Continuation and Modification of Statewide Public Health Order #3
 Regarding Nail Salons, Barber Shops, Massage Therapy Services, Tattoo, Body Art and
 Piercing Shops, and Cosmetology, Electrology and Esthetic Services
- Statewide Public Health Order #4: Requiring Face Coverings in Certain Places, With Exceptions

General Strategy

The strategy for relaxing restrictions in Laramie County (and Wyoming in general) balances three concepts:

- The need for life to return as close as possible to normal
- The need to do this as safely as possible
- The imminent availability of one or more vaccines for COVID-19 are encouraging, but public health countermeasures remain important because widespread availability of the vaccine will not be realistic for several months

The current set of orders impose new restrictions, and a statewide mask mandate, due to increased COVID-19 activity and the threat to public health and the medical system.

Section 2 - Current Status of COVID-19 in the US

COVID-19 continues to cause unprecedented economic and social disruption in the U.S. Currently every state, including Wyoming, has seen a sharp increase in new infections, hospitalizations, and deaths.

Here are some important national numbers as of January 11, 2021¹. Wyoming numbers are readily available and summarized daily in the news. We will not repeat them here.

- Laboratory-confirmed U. S. cases: over 22.5 million. Because many infections do not cause symptoms, it is possible that the true number of infections is greater
- Confirmed U. S. deaths: over 375,000. This may also be undercounted, since many deaths likely occurred before there was any testing available for this disease
- While most people who contract COVID-19 recover, many require hospitalization, and many experience prolonged symptoms including shortness of breath, trouble concentrating (so-called "brain fog") and other symptoms.

Some have questioned whether the fatality count for COVID-19 is exaggerated or artificially inflated. The fatality data are credible. They come from death certificates completed by physicians who cared for the patients. Details are available at the National Center for Health Statistics: https://www.cdc.gov/nchs/covid19/index.htm.

For perspective, the table below shows the leading causes of death in the US in 2018². However, in December 2020, nearly 77,000 Americans died due to COVID-19³. For 2020, COVID-19 is on track to be the third leading cause of death in the US, if 2018 data hold true for other causes of death. However, in December 2020, COVID-19 was *the leading cause of death*, ahead of heart disease and cancer.

Ranking of leading causes of deaths, United States, 2018					
Cause	Yearly Deaths, 2018 Est. Monthly Deaths		<u>Rank</u>		
All causes	2,839,205				
Heart Disease	655,381	54,615	1		
Cancer (malignant neoplasms)	599,274	49,940	2		
Preventable injury	167,127	13,927	3		
Chronic lower respiratory diseases	159,486	13,291	4		
Stroke (cerebrovascular disease)	147,810	12,318	5		
Alzheimer's Disease	122,019	10,168	6		
Diabetes Mellitus	84,946	7,079	7		
Influenza and pneumonia	59,120	4,927	8		
Nephritis (kidney disease)	51,386	4,282	9		
Suicide	48,344	4,029	10		

Some other comparisons are: US deaths due to traffic accidents in 2018: 36,560⁴; and deaths due to combat casualties during the Vietnam War: 58,220⁵.

¹ Johns Hopkins University Coronavirus Resource Center, https://coronavirus.jhu.edu/map.html

² National Safety Council, https://injuryfacts.nsc.org/all-injuries/deaths-by-demographics/all-leading-causes-of-death/

³ https://covidtracking.com/data/charts/us-daily-deaths

⁴ National Highway Traffic Safety Administration, https://www.nhtsa.gov/traffic-deaths-2018

⁵ National Archives, https://www.archives.gov/research/military/vietnam-war/casualty-statistics

Section 3 – Evolving Approach and Metric Overview

Wyoming's Evolving Approach to COVID-19

Laramie County, and Wyoming in general, are currently relying on varying levels of restrictions while the vaccination program is being implemented. Vaccinations across Wyoming, and in Laramie County, have begun, and we expect the pace to increase as we fine-tune the logistics.

Two vaccines, made by Pfizer-BioNTech and Moderna, are currently being administered in Wyoming. Other vaccines, including one developed by Oxford-AstraZeneca, will probably become available in the next few months.

Most of the vaccine administered in Laramie County has been the Pfizer product, because of the need for ultra-low temperature freezers that are not readily available across the state. The Cheyenne/Laramie County Health Department has such a freezer, and is the distribution hub for Laramie County and some surrounding counties.

State-Wide Metrics

The Wyoming Department of Health (WDH) monitors a set of general state-wide COVID-19 metrics.⁶ There is no single metric that triggers a return to pre-pandemic activities. The metrics are continuously updated and provide a statewide snapshot of two broad areas:

- Overall disease and testing data
- Hospital capacity, including ICU bed availability

WDH also provides county-level data which will include:

- County level epidemiological curve (incidence of new cases)
- Percent of cases attributable to the risk factor referred to as "community spread"
- Daily lab testing volume
- Percent of positive test results
- Running two-week average of percentage of total tests that are positive
- · Age group data
- Number of cases recovered
- Statewide hospital resources related to COVID-19. These are posted online at https://sites.google.com/wyo.gov/exec-covid19/hospital-resources.

Laramie County Metrics

The Cheyenne/Laramie County Health Department (C/LCHD) monitors various specific county-level metrics (goals) but in general will not move faster than current state public health orders allow. In the meantime, there is a process for providing county-level exemptions (variances) from certain aspects of the state orders for events, organizations and businesses. The process for applying for a variance is explained below. Local and statewide disease metrics are considered in the variance process.

⁶ Wyoming Department of Health, https://health.wyo.gov/publichealth/infectious-disease-epidemiology-unit/disease/novel-coronavirus/

There are five important county-level metrics that C/LCHD follows, and they are summarized here.

1. County-level epidemic curve - New Daily Cases

Figure 1 shows new daily lab-confirmed cases in Laramie County for the period from December 29 through January 11. A somewhat more revealing graphic is shown in Figure 2, which shows the longer-term trend over time. The large drop-off in cases since the surge in November coincides with improved compliance with the use of face coverings in public places – a key tool in controlling the spread of COVID-19. A mask mandate in Laramie County went into effect on October 30, and has contributed to a decrease in new cases of COVID-19.

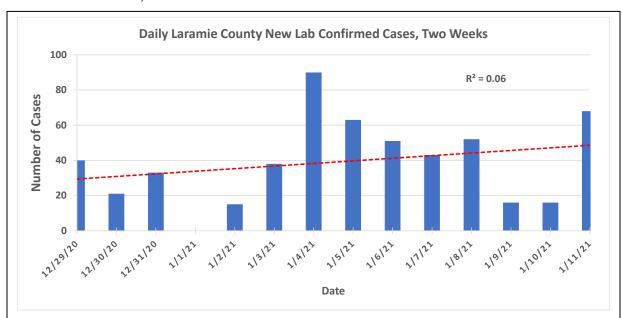


Figure 1 – Daily new lab confirmed cases in Laramie County from December 29 through January 11.

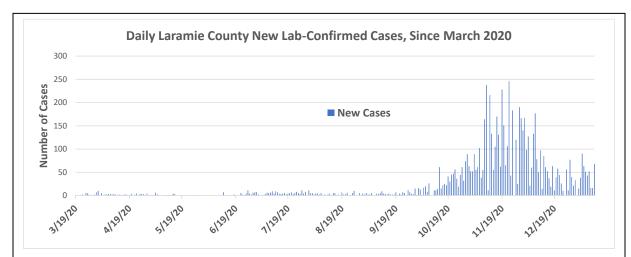


Figure 2 – Long-term epidemic curve of the COVID-19 pandemic in Laramie County. Since October 30 a mask mandate resulted in greater compliance with mask use, which we believe has contributed to a dramatic fall in cases.

2. Percentage of cases due to community spread

"Community spread" is defined as cases who have no identified contact with another labconfirmed case, and therefore are assumed to have contracted the disease due to a random contact. As of January 10, 29.5% of cases in Laramie County were due to community spread, with infected individuals not able to identify a known contact. This has been fairly constant for several weeks.

3. Total hospital admissions due to COVID-19

We track this through Cheyenne Regional Medical Center (CRMC). As of January 11, 2020, there were 25 patients hospitalized at CRMC due to COVID-19, with 5 patients in ICU and one on life support. This is still high, but nonetheless a dramatic improvement. At the height of the November surge, there were over 60 patients in the hospital with COVID-19, and 8 on life support.

4. Percentage of ICU beds occupied by COVID-19 patients

CRMC has a 15-bed ICU and as of January 10, five (5) of these beds were occupied by COVID-19 patients, for an ICU occupancy rate of 33% by COVID-19 patients. This is a dramatic improvement from one month ago, when 73% of the ICU beds were occupied by COVID-19 patients.

5. Percentage of COVID-19 tests that are positive

Individuals who have been exposed to COVID-19 positive patients are encouraged to be tested to minimize spread in the community. As we increase testing, we expect to find more positives. Therefore, the percentage of tests that are positive is a better indicator of overall disease activity than the actual number of tests. Statewide, as of December 8, 17.0% of all COVID-19 tests were coming back positive. As of January 6, this percentage was down to about 6%

Laramie County Stoplight Report

For a quick overview of current COVID-19 status in Laramie County, we are using the "green-yellow-red" stoplight report shown below, displayed in Figure 3. The presence of metrics in the "red" column suggests the need for tightening of restrictions. Likewise, metrics in the "yellow" column suggest maintaining current precautions, while restrictions and metrics in the "green" column suggest the possibility of relaxing some restrictions on activities, as appropriate.

Ongoing adherence to the use of face coverings and social distancing are still important, and the statewide mask mandate remains critically important in Laramie County.

Phase Goals	GREEN LIGHT Improving Metric	YELLOW LIGHT Cautionary Metric	RED LIGHT Danger Metric
County level epidemic curve		х	
Percentage of cases due to community spread		х	
Total hospital admissions due to COVID-19	х		
Percentage of ICU beds occupied by COVID-19	X		
Percentage of COVID-19 tests that are positive	X		

Figure 3 – Laramie County dashboard report as of January 11, showing improvement in several key pandemic conditions in the County.

Section 4 - What's New This Time?

This section lists some highlights in the new orders. For further details or questions, we advise looking at the orders themselves, or contacting us at the health department. The orders are posted on the C/LCHD and WDH web sites.

Because control of the infection is improving, and hospitalizations are decreasing (although still higher than we like), the new orders contain certain relaxations of prior restrictions.

Order #1:

- Bars and restaurants are no longer required to close from 10:00 p.m. to 5:00 a.m., and may resume normal hours
- Group workout classes in gyms are allowed to have 25 participants.

Order #2: no changes; The following key provisions are still present:

- Gatherings (without required distancing between groups) are limited to 10 individuals (previously 25).
- Indoor events may allow more than 10 individuals but no more than 25% of venue capacity with a maximum of 100 people.
- Outdoor events may allow more than 10 individuals but no more than 50% of venue capacity with a maximum of 250 people.
- Groups of attendees seated together at any event must be limited to 6 (previously 8) but an exception may be made for groups larger than 6 if they are from the same household.
- Participants in organized sporting events and artistic performances shall not congregate in groups larger than 12 individuals (was 25).

Order #3: no changes

Statewide-wide mask mandate

- Still in effect, no changes. Much of the improvement in pandemic metrics in Laramie County can be attributed to the increased use of face coverings in public areas.
- Therefore, the statewide mask mandate will remain in effect for the near future, as we roll out the vaccination effort.

Section 5 - Statewide Orders

There are four (4) statewide orders in force (including the new state mask mandate) that are issued under the emergency proclamation signed by Governor Gordon in March 2020, and they apply to every county in Wyoming. The State reviews and reissues the orders every two weeks, and each set of orders has an expiration date two weeks after the date of issue. The State modifies the orders as needed to adapt to the changing pandemic situation.

The Wyoming Attorney General (AG) reviews all state and county public health orders to assure compliance with legal and constitutional standards. All county orders undergo additional scrutiny by the County Attorney prior to the review by the State AG.

Below is a list of the statewide orders and the types of activities that they cover. Detailed review of these orders is beyond the scope of this document, but individual businesses, organizations and event planners should review the content of the orders that affect them.

The orders are posted on the Wyoming Department of Health web site at https://health.wyo.gov/publichealth/infectious-disease-epidemiology-unit/disease/novel-coronavirus/covid-19-orders-and-guidance/.

They are also posted on the C/LCHD web site at https://www.laramiecounty.com/ departments/health/coronavirus info.aspx.

The Laramie County Mask Mandate is posted on the C/LCHD web site at https://www.laramiecounty.com/_departments/Health/coronavirus_info.aspx

In addition, many types of specific guidance documents are available on the WDH and C/LCHD web sites at the links shown above. Organizations should be aware of these, as they often provide practical details and clarifications that are not in the orders themselves.

Statewide Public Health Order #1 (Nineteenth Continuation)

This order covers the following organizations:

- Restaurants
- Bars
- Theaters
- Gymnasiums
- Childcare facilities
- K-12 schools
- Colleges and universities
- Trade schools

Paragraphs 10 and 11 on page 9 of State Order #1 provide details on exemptions and variances, and the relative roles of the county and state public health authorities.

Statewide Public Health Order #2 (Nineteenth Continuation)

This order provides guidance regarding the size of gatherings. The basic order prohibits gatherings of more than fifty (50) people, but there are numerous exceptions. Paragraph 4 on page 2 of State Order #2 lists specific activities exempted from the order. We will not list those here, but all businesses, organizations and event planners are encouraged to consult this list to see if their business or organization falls under an exemption.

Paragraph 5 on page 3 of State Order #2 allows indoor gatherings of 250 people or less, and outdoor gatherings to a maximum of 1,000 people, with some restrictions as spelled out in that paragraph.

Organizations and activities that are exempted in this order are still encouraged to follow safe practices for preventing the spread of the COVID-19 virus. The virus behaves the same way whether it is in a church, a grocery store or at a livestock auction.

Paragraphs 6 and 7 on page 5 of State Order #2 provide details on exemptions and variances, and the relative roles of the county and state public health authorities.

Statewide Public Health Order #3 (Nineteenth Continuation)

This order covers the following types of businesses and activities:

- Nail and hair salons
- Barber shops
- Massage therapy
- Tattoo, body art and piercing shops
- · Cosmetology, electrology and esthetic services

Paragraphs 4 and 5 on pages 3 - 4 of State Order #3 provide details on exemptions and variances, and the relative roles of the county and state public health authorities.

Section 6 - Vaccinations

Vaccinations with two approved vaccines are currently under way in Wyoming and Laramie County.

The vaccines are being administered through three channels in Laramie County:

- C/LCHD is receiving regular shipments of vaccine, principally the Pfizer product that
 requires an ultra-cold freezer for storage. C/LCHD and CRMC are currently the only two
 approved vaccinations sites for the public, but planning is under way to expand the
 number of approved sites in preparation for more widespread vaccinations
- Walgreens is one of two national drug store chains delivering the vaccinations to skilled nursing and long-term care facilities, including facilities in Cheyenne.
- The military, including F.E Warren AFB, has its own supply chain for its personnel

Vaccination is proceeding in phases, in coordination with the Wyoming statewide plan. Phase 1a is essentially completed in Laramie County, and entailed initial administration of limited vaccine doses to critical personnel such as front-line health care workers. Phases 1b (currently under way) and 1c each entail successively larger target populations, and will require expanding resources and personnel for delivering vaccinations. Phase 2 is the final one, when vaccines are available to the general public.

1a and 1b priority groups are being vaccinated at C/LCHD and CRMC by appointment through their employers. Unannounced walk-ins are not yet being accepted.

Detailed information regarding the Wyoming vaccination plan can be found here:

https://health.wyo.gov/publichealth/immunization/wyoming-covid-19-vaccine-information/

NOTE: Shortly before this document went to press, the federal government announced that all available doses of COVID-19 vaccine should be released for administration, without holding back any doses for the second booster shot. The Trump administration and the Biden Transition Team have announced that second doses of COVID-19 vaccine will no longer be held back at the federal government, but instead will be sent to states.

Some other possible changes are expected from the Wyoming Department of Health based on evolving CDC recommendations. Here are some highlights of the expected changes.

- CDC is expected to recommend before the end of this week that individuals 65 and older be included in phase 1b. The Wyoming Department of Health is expected to follow CDC's recommendation and include individuals 65 and older in phase 1b. This will be a significant expansion of phase 1b, and will require some time to ramp up for that increased volume.
- This has several implications, one being that Wyoming (and Laramie County) will be receiving many more doses per week than originally planned for, and also that the responsibility to ensure vaccine availability for second doses is now at the state level.
- 3. This situation is evolving rapidly and further details will be announced as soon as they become available.
- 4. At this time, emphasize that this is a huge undertaking, and it will take time to ramp the process up, so patience on everyone's part is advised.

Section 7 – Variance Requests

None of the current public health orders require the complete closure of any businesses or organizations, although the worsening pandemic situation has caused the state to impose some new limits on gathering sizes in general, and certain hours of operation (for bars and restaurants). Some businesses and organizations may still find the current restrictions unduly onerous.

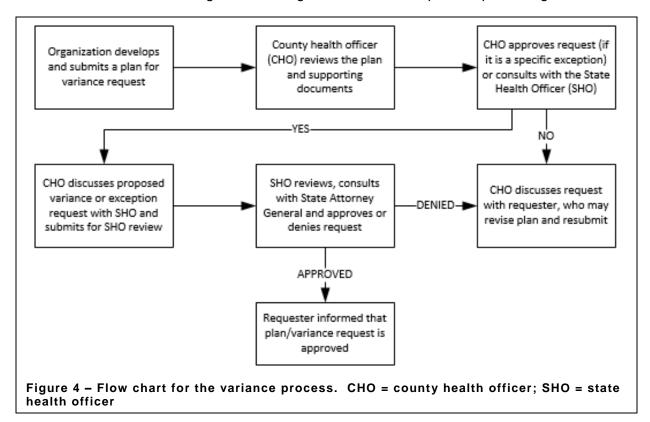
There is a procedure for requesting a county-wide variance or exception request. However, before requesting a variance, businesses and organizations should contact C/LCHD to find out if current pandemic conditions make a variance feasible.

The Health Department is currently calling a temporary moratorium on variance requests until the pandemic situation stabilizes, but hopes to resume considering variance requests soon.

In the meantime, organizations should develop a plan to operate effectively under the current orders. Some examples of possible approaches may include:

- Changes to the prior business model to make it more adaptable to the current reality
- Re-engineering key processes to minimize disease risk and maximize safety of staff and clientele, while allowing the business to operate efficiently
- Re-arranging or redesigning work areas to increase capacity and maintain safety

As soon as it is feasible to begin considering variance and exception requests, Figure 4 shows



how the process will flow.

Section 8 – Definitions

- Community spread cases appearing in patients who, after contact tracing, have no identifiable contact with someone with COVID-19.
- Contact tracing a primary intervention by public health to mitigate the spread of disease. It consists of interviewing individuals with a contagious disease, eliciting that person's social contacts, and following up with those individuals for symptom monitoring, counseling, and referral for appropriate treatments and services. This activity is a cornerstone of public health practice.
- Masks and face coverings These refer to any fabric covering of the lower face including the mouth and nose. Overwhelming evidence indicates effectiveness in reducing the spread of coronavirus. Masks are especially important when social distancing cannot be maintained.
- SARS-CoV-2 a short form of "Severe Acute Respiratory Syndrome Coronavirus 2", the name of the virus that causes COVID-19. COVID-19 is the name of the disease caused by SARS-CoV-2. The term COVID-19 is an acronym for <u>Corona Virus Disease</u> 2019, for the year it first emerged.
- Social distancing the practice of staying at least six feet away from other people while
 in public, except for others who share the same household. Because the virus that
 causes COVID-19 is transmitted through the air and on contaminated surfaces, social
 distancing (along with frequent cleaning and hand hygiene) is a primary method for
 preventing spread of the disease.
- High-risk populations at risk for severe COVID-19 disease:
 - o Persons 65 years or older, regardless of baseline state of health.
 - Individuals with underlying health conditions, including high blood pressure, chronic lung disease, diabetes, obesity, asthma, and those whose immune system is compromised (such as by cancer therapy, or certain medical conditions).