TOWN COUNCIL PROCEEDINGS

August 30, 2021 **JACKSON, WYOMING**

The Jackson Town Council met in special workshop session at 9:00 A.M. This meeting was held through the Zoom platform. Upon roll call the following were found to be present:

TOWN COUNCIL: *In-person:* None. *via Zoom*: Mayor Hailey Morton Levinson, Arne Jorgensen, Jonathan Schechter, and Jessica Sell Chambers. Jim Rooks was absent.

STAFF: Roxanne Robinson, Larry Pardee, Lea Colasuonno, Tyler Sinclair, Michael Palazzolo, Kelly Thompson, Susan Scarlata, Floren Poliseo, and Lynsey Lenamond.

Mayor Hailey Morton Levinson led those in attendance in a moment of silence for Rylee McCollum.

Teton County Public Health Order 21-5 Extension. Larry Pardee and Lea Colasuonno made staff comment. Council held discussion with staff. Jessie Aufderheide made public comment.

JACKSON CITY COUNCIL
JACKSON, WYOMING

ORDER AFFIRMING AND EXTENDING PUBLIC HEALTH ORDER #21-5

WHEREAS, Dr. Travis Riddell, serves as the Teton District Health Officer pursuant to Wyoming Statute § 35-l-306(a); and

WHEREAS, Dr. Riddell, the Teton District Health Officer, issued Teton District Health Order #21-5 on August 26, 2021, at 4:00p.m., requiring individuals to wear face coverings in certain places, with exceptions; and

WHEREAS, pursuant to Wyoming Statute §35-1-310, any order issued by a district health officer that restricts individuals' movements or their ability to engage in any activity, that applies to individuals not under an isolation or quarantine order and that is designed to prevent or limit the transmission of a contagious or possibly contagious disease shall be effective for a period of not more than ten (10) days; and

WHEREAS, pursuant to Wyoming Statute §35-1-310, subsequent orders, including order extensions, for the same or substantially same purpose of any duration shall only be issued if the governing body of a political subdivision that is a member of the health district or the district health department, by a majority vote of the governing body, issues an order subsequent to the order issued by the district health officer; and

WHEREAS, any such order issued by a political subdivision that is a member of the health district or the district health department will only have effect within the governing body's political subdivision only; and

WHEREAS, Teton County and the City of Jackson are the two members of the Teton Health District; and

WHEREAS, the Teton Health District Board of Health met on August 27, 2021 and reviewed the District Health Officer's order issued on August 26, 2021. The Teton Health District Board of Health voted to recommend to the Jackson City Council and the Teton County Board of County Commissioners to extend the Teton District Health Officer's August 26, 2021 order beyond the ten (10) day limit. Specifically, the Teton Health District Board of Health recommended that Public Health Order #21-5 should be extended to December 31 , 2021 with the condition that in the event that the CDC lists Teton County as an area of "low" or "moderate" transmission according to criteria established and data maintained by the CDC and published daily on the CDC's COVID Tracker website, the requirements in the Order should be temporarily suspended during the time period when Teton County is deemed an area of "low" or "moderate" transmission.

NOW, THEREFORE, IT IS HEREBY ORDERED**,** by the Jackson Town Council, having duly met on August 30, 2021 at a duly scheduled meeting, which was properly noticed and open to the public, and having fully considered the matter at hand, that, in accordance with Wyoming Statute §35-1-310, Public Health Order 21-5 is extended to December 31, 2021 as follows:

TETON DISTRICT HEALTH OFFICER PUBLIC HEALTH ORDER#21-5
ORDER REQUIRING INDIVIDUALS WITHIN TETON COUNTY, WYOMING TO WEAR FACE COVERINGS IN CERTAIN PLACES, WITH EXCEPTIONS

WHEREAS, the World Health Organization declared COVID-19 a worldwide pandemic on March 11, 2020; and

WHEREAS, on March 13, 2020, the President of the United States declared a national emergency concerning the coronavirus, specifically stating that "in December 2019 a novel (new) coronavirus known as SARS-Co V-2 was first detected in Wuhan, Hubei Province, People's Republic of China, causing outbreaks of the corona virus disease (COVID-19) that has now spread globally. The spread of COVID-19 within our Nation's communities threatens to strain our Nation's healthcare systems

and cause great economic and social disruption. Additional measures are needed to successfully contain and combat the virus in the United States"; and

WHEREAS, on March 13, 2020, Wyoming Governor Mark Gordon declared a State of Emergency and Public Health Emergency in the State of Wyoming, stating that on March 11, 2020, an individual within the State of Wyoming tested presumptive positive for COVID-19; and

WHEREAS, Governor Gordon's Declaration of a State of Emergency and Public Health Emergency directs the Wyoming Department of Health to take all appropriate and necessary actions, and that in the judgment of the Director of the Wyoming Department of Health, any actions necessary should be taken to provide aid to those locations where there is a threat or danger to public health, safety, and welfare; and

WHEREAS, a significant number of Wyoming citizens are at risk of serious health complications, including death, from COVID-19. Although most individuals who contract COVID-19 do not become seriously ill, people with mild symptoms, and even asymptomatic persons with COVID-19 place other vulnerable members of the public at significant risk; and

WHEREAS, the U.S. Centers for Disease Control and Prevention (CDC) have gathered peer-reviewed data throughout the pandemic[1] which have categorically demonstrated the safety and efficacy of masks including the following experimental and epidemiologic evidence:

- Masks are primarily intended to reduce the emission of virus-laden droplets ("source control"), which is especially relevant for asymptomatic or presymptomatic infected wearers who feel well and may be unaware of their infectiousness to others, and who are estimated to account for more than 50% of transmissions.[2] Multi-layer cloth masks block release of exhaled respiratory particles into the environment,[3-6] along with the microorganisms these particles carry.[7,8] Cloth masks not only effectively block most large droplets (i.e., 20-30 microns and larger)[9] but they can also block the exhalation of fine droplets and particles (also often referred to as aerosols) smaller than 10 microns ;[3,5] which increase in number with the volume of speech[10-12] and specific types of phonation.[13] Multi-layer cloth masks can both block up to 50-70% of these fine droplets and particles[3,14] and limit the forward spread of those that are not captured.[5,6,15,16] Upwards of 80% blockage has been achieved in human experiments that have measured blocking of all respiratory droplets,[4] with cloth masks in some studies performing on par with surgical masks as barriers for source control.[3,9,14]
- Studies also demonstrate that cloth mask materials can reduce wearers' exposure to infectious droplets through filtration, including filtration of fine droplets and particles less than 10 microns. Multiple layers of cloth with higher thread counts have demonstrated superior performance compared to single layers of cloth with lower thread counts, in some cases filtering nearly 50% of fine particles less than 1 micron .[14,17-29]
- At least ten studies have confirmed the benefit of universal masking in community level analyses: in a unified hospital system,[30] a German city,[31] two U.S. states,[32,33] a panel of 15 U.S. states and Washington, D.C.,[34,35] as well as both Canada[36] and the U.S.[37-39] nationally. Each analysis demonstrated that, following directives from organizational and political leadership for universal masking, new infections fell significantly. Two of these studies[34, 35] and an additional analysis of data from 200 countries that included the U.S.[40] also demonstrated reductions in mortality. Another 10-site study showed reductions in hospitalization growth rates following mask mandate implementation [37]. A separate series of cross-sectional surveys in the U.S. suggested that a 10% increase in self-reported mask wearing tripled the likelihood of stopping community transmission.[41]
- Investigations of "real world" COVID transmission events demonstrating the benefits of masks include:
    - An investigation of a high-exposure event, in which 2 symptomatically ill hair stylists interacted for an average of 15 minutes with each of 139 clients during an 8-day period, found that none of the 67 clients who subsequently consented to an interview and testing developed infection. The stylists and all clients universally wore masks in the salon as required by local ordinance and company policy at the time.[42]
    - In a study of 124 Beijing households with $\geq$ 1 laboratory-confirmed case of SARS-CoV-2 infection, mask use by the index patient and family contacts before the index patient developed symptoms reduced secondary transmission within the households by 79%.[43]
    - A retrospective case-control study from Thailand documented that, among more than 1,000 persons interviewed as part of contact tracing investigations, those who reported having always worn a mask during high-risk exposures experienced a greater than 70% reduced risk of acquiring infection compared with persons who did not wear masks under these circumstances.[44]
    - A study of an outbreak aboard the USS Theodore Roosevelt, an environment notable for congregate living quarters and close working environments, found that use of face coverings on-board was associated with a 70% reduced risk.[45]
    - Investigations involving infected passengers aboard flights longer than 10 hours strongly suggest that masking prevented in-flight transmissions, as demonstrated by

the absence of infection developing in other passengers and crew in the 14 days following exposure.[46,47]

- Research supports that mask wearing has no significant adverse health effects for wearers. Studies of healthy hospital workers, older adults, and adults with COPD reported no change in oxygen or carbon dioxide levels while wearing a cloth or surgical mask either during rest or physical activity.[48-50] Among 12 healthy non-smoking adults, there was minimal impact on respiration when wearing a mask compared with not wearing a mask; however, the authors noted that while some respiratory discomfort may have been present, mask use was safe even during exercise.[51] The safety of mask use during exercise has been confirmed in other studies of healthy adults.[52-54] Additionally, no oxygen desaturation or respiratory distress was observed among children less than 2 years of age when masked during normal play.[55] While some studies have found an increase in reports of dyspnea[56] (difficulty breathing) when wearing face masks, no physiologic differences were identified between periods of rest or exercise while masked or non-masked.[54]

WHEREAS, six B.1.617.2 (Delta) variant cases in Wyoming have been detected in Teton County as of August 20, 2021.[57] The Delta variant is more infectious and leads to increased transmissibility when compared to other variants. As of August 6, 2021, the Delta variant is currently the predominant strain of the SARS-Co V-2 virus in the United States. The CDC has indicated that fully vaccinated people who are infected with the Delta variant are capable of transmitting the virus to others; and [58]

WHEREAS, in line with the above evidence, the CDC on July 27, 2021, issued a recommendation that people, regardless of vaccination status, wear face coverings in public indoor settings located in areas of substantial or high transmission of the COVID-19. [59] As of August 19, 2021, Teton County is determined by the CDC to be an area of high transmission; and [60]

WHEREAS, the busiest commercial airport in Wyoming is in Teton County and proximal to two national parks: Grand Teton and Yellowstone National Park. Both Grand Teton and Yellowstone National Park report record visitations for July 2021. Therefore, additional new variants and COVID-19 cases in general are more likely to appear here relative to other areas in Wyoming; and

WHEREAS, there has been an increase in the number of COVID-19 cases throughout the month of August 2021. As of August 19, 2021 Teton County is averaging 13.57 new cases per day with 130 active cases. 56% of cases in the past two weeks were due to community spread. Since August 19, 2021, there have been 204 new resident cases out of 276 total confirmed cases reported in Teton County in the past 2 weeks. 53.3% of total confirmed cases are breakthrough cases (occurring in fully vaccinated individuals). It is expected that more cases will be diagnosed; and

NOW, THEREFORE, IT IS HEREBY ORDERED that persons within the City of Jackson, Wyoming shall wear Face Coverings as described below:

1. “Face Covering,” as used in this Order, means a covering made of cloth, fabric, or other soft or permeable material, without holes, that covers the nose and mouth and surrounding areas of the lower face.
2. “Business” means any business entity (retail or commercial) that employs or engages workers or volunteers.
3. Except as specifically exempted below, all members of the public must wear a Face Covering in the following situations:
    a. When any person is inside any business or any government facility open to the public, including county and municipal buildings but excluding state/federal buildings.
    b. When any person is obtaining services at, or visiting healthcare operations, including, but not limited to, hospitals, clinics, and walk-in health facilities, dentists, pharmacies, blood banks, other healthcare facilities, behavioral health providers, and facilities providing veterinary and similar healthcare services for animals.
    c. When any person is riding on public transportation or paratransit, or while they are riding in a taxi, private car service, shuttle, tour, or ride-sharing vehicle. The driver shall also wear a Face Covering when passengers are in the vehicle.
4. K-12 schools including both private and public K-12 schools and postsecondary institutions shall require all students, teachers, school staff, and visitors (including parents, families, and members of the public) to wear face coverings indoors where 6 feet of separation between individuals cannot be maintained. Individuals engaged in athletic activities or performances are exempted. Individuals who have an Individual Education Program (IEP) under Individuals with Disabilities Education Act, 20 U.S.C. §1414, or an accommodation under Section 504 of the Rehabilitation Act of 1973, 29 U.S.C. §794, that would necessitate exempting the individual from wearing a Face Covering shall be exempted.
5. All businesses must post notices stating that Face Coverings are required in a clearly visible location at or near the entrance of the business.
6. All government facilities open to the public, specifically county and municipal buildings, but excluding state and federal buildings, must post notices stating that Face Coverings are required in a clearly visible location at or near the entrance of the building.

7. All employees, owners, and volunteers of businesses and employees and volunteers of government facilities open to the public, including county and municipal buildings but excluding state and federal buildings, shall wear Face Coverings at their business or government facility when they are within 6 feet of customers, clients, other staff/workers, or volunteers. They must also wear a Face Covering when working or volunteering in a space that could be visited by members of the public, such as by way of example, but not limited to: reception areas, hallways, grocery store aisles, service counters, public restrooms, cashier and checkout areas, waiting rooms, service areas, and other spaces that could be used by members of the public.
8. A Face Covering is not required under the following circumstances:

a. When a person is in a personal office (a single room) where others outside of that person's household are not present as long as the public does not regularly visit the room, but that individual must put on a Face Covering when they are within 6 feet of a client, customer, volunteer, worker, or other member of the public.

b. In a restaurant, coffee shop, bar, or other dining/drinking establishment once the individual has been seated.

c. Children who are under 3 years of age.

d. When a person is inside or obtaining services at a location engaged primarily in providing congregate care, residential health care, or shelter care, and the individual is engaged in activities not conducive to wearing a Face Covering, such as eating or drinking, or the individual is in an area of that facility that is not designed for community gathering, such as a sleeping area.

e. If a person has a medical condition, mental health condition, or disability that prevents him or her from wearing a Face Covering. This includes, by way of example, but is not limited to, persons with a medical condition for whom wearing a Face Covering could obstruct breathing or who are unconscious, incapacitated, or otherwise unable to remove a Face Covering without assistance. A person is not required to provide any documentation demonstrating that the person cannot wear a Face Covering for any medical condition, mental health condition, or disability.

f. Individuals who are hearing impaired, or communicating with an individual who is hearing impaired, where the ability to see the mouth is essential for communication.

g. Individuals for whom wearing a Face Covering would create a risk to the individual related to their work, as determined by local, state, or federal workplace safety guidelines.

h. Individuals who are obtaining a service involving the nose or face for which temporary removal of the Face Covering is necessary to perform the service.

i. Individuals who are purchasing a product or receiving a service that requires identification may briefly remove a Face Covering as necessary, so that the retailer or service provider can verify identity.

j. When engaged in exercise or athletic activities, or artistic performances.

k. When law enforcement asks an individual to remove a Face Covering for identification purposes.

IT IS FURTHER ORDERED that the Teton District Health Officer may grant exceptions to this Order on a case-by-case basis after evaluating the request; and

IT IS FURTHER ORDERED that this Order shall become effective on September 4, 2021 and remain in effect through December 31, 2021. In the event that the CDC lists Teton County as an area of "low" or "moderate" transmission according to criteria established and data maintained by the CDC and published daily on the CDC's COVID Tracker website, the requirements in this Order are temporarily suspended during the time period when Teton County is deemed "low" or "moderate" transmission.

IT IS FURTHER ORDERED that any business or person that violates this Order may be subject to criminal prosecution under Wyoming Statutes §§ 35-1-105 and 35-1-106.

DATED this 30th day of August, 2021.

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A motion was made by Jonathan Schechter and seconded by Jessica Sell Chambers to approve the document provided by the Town Attorney that would extend Public Health Order 21-05. Mayor Morton Levinson called for the vote. The vote showed 4-0 in favor and the motion carried.

State Legislative Agenda. Susan Scarlata, Larry Pardee and Tyler Sinclair made staff comment. Council held discussion with staff. A motion was made by Arne Jorgensen and seconded by Jessica Sell Chambers to approve the above Legislative Policy Approach for engagement with the Wyoming State Legislature over the next two years and approve the hiring of a Legislative Liaison. Mayor Morton Levinson called for the vote. The vote showed 4-0 in favor and the motion carried.

Council recessed at 10:36 a.m. and readjourned at 10:40 a.m.

Equity Task Force. Susan Scarlata made staff comment. A motion was made by Jessica Sell Chambers and seconded by Arne Jorgensen to direct staff to establish an Equity Task Force as set forth in this staff report and attached Work Plan with any Council-directed changes discussed today and authorize the expenditure of stipends for Equity Task Force members. Mayor Morton Levinson called for the vote. The vote showed 4-0 in favor and the motion carried.

Future Funding of Local Government. Larry Pardee made staff comment. A motion was made by Jessica Sell Chambers and seconded by Arne Jorgensen to continue to this item to the next available meeting. Mayor Morton Levinson called for the vote. The vote showed 4-0 in favor and the motion carried.

Executive Session. A motion was made by Jonathan Schechter and seconded by Jessica Sell Chambers to recess to an executive session to consider matters concerning litigation to which the governing body is a party or proposed litigation to which the governing body may be a party in accordance with Wyoming Statute 16-4-405(a)(iii). Mayor Morton Levinson called for the vote. The vote showed 4-0 in favor and the motion carried. Council recessed at 11:48 a.m. and readjourned at 12:13 p.m. Jonathan Schechter did not rejoin the workshop.

Adjourn. A motion was made by Jessica Sell Chambers and seconded by Arne Jorgensen to adjourn the meeting. Mayor Morton Levinson called for the vote. The vote showed 3-0 in favor and the motion carried. The meeting adjourned at 12:13 pm.

TOWN OF JACKSON

_____
Hailey Morton Levinson, Mayor

ATTEST:

_____
Lynsey Lenamond, Town Clerk
minutes:ll
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