

IN THE CIRCUIT COURT OF THE
SEVENTH JUDICIAL CIRCUIT, IN AND
FOR ST. JOHNS COUNTY, FLORIDA

CASE NO.: CA20-0724
DIVISION: 55

JEFFREY D. NAGER,
Plaintiff,
vs.

CITY OF ST. AUGUSTINE, a political
Subdivision of the State of Florida,
Defendant.

CITY OF ST. AUGUSTINE'S MOTION FOR JUDICIAL NOTICE

The Defendant, CITY OF ST. AUGUSTINE, Florida (the "City"), a political subdivision of the State of Florida, pursuant to sections 90.202 and 90.203, Florida Statutes, submits the following Motion for Judicial Notice (the "Motion") and requests that this Court take judicial notice of facts and items identified below. In support thereof the County states as follows:

1. Plaintiff JEFFREY D. NAGER ("Plaintiff") initiated this action on July 2, 2020, by filing the Verified Complaint for Emergency Injunctive Relief and Declaratory Judgment (the "Ver. Emer. Mot.").
2. Plaintiff seeks to enjoin Administrative Order 20-11 ("AO 20-11") issued by the City Manager for the City of St. Augustine subsequent to and in conformance with Resolution 2020-22 issued by the City Commission on June 26, 2020, which implements a face covering requirement in limited circumstances for visitors and residents of the City of St. Augustine in response to the COVID-19 pandemic. *See generally* Ver. Emer. Mot. Specifically, Plaintiff challenges the constitutionality of AO 20-11, claiming it violates the privacy clause, due process clause, and is void for vagueness. Plaintiff also claims that the City has no authority to issue AO 20-11. *Id.*

3. The City has filed its Response to Plaintiff's Emergency Motion for Temporary Injunctive Relief pursuant to the Court's Order Directing the City of St. Augustine to Respond issued July 2, 2020.

4. In furtherance of the City's Response and in accordance with the Court's Order to provide documentary support, the City requests the Court to take judicial notice of certain facts and documents enumerated herein.

5. First, the COVID-19 pandemic has been ongoing for months, resulting in executive orders from both the President of the United States and Florida's Governor DeSantis. In addition, other Florida agencies and local governments have issued orders and announcements related to the pandemic. The City requests that this Court take judicial notice of the fact that President Trump, Governor DeSantis, the Florida Department of Health, and the Florida Department of Business and Professional Regulation have declared an emergency and public health advisories concerning COVID-19, as evidenced by the following documents:

a. Governor DeSantis' Executive Order 20-51 of March 1, 2020 (Establishes COVID-19 Response Protocol and Directs Public Health Emergency), attached as **Exhibit C**;

b. Governor DeSantis' Executive Order 20-52 of March 9, 2020 (Emergency Management – COVID-19 Public Health Emergency), attached as **Exhibit D**;

c. Governor DeSantis' Executive Order 20-114 of May 8, 2020 (Emergency Management – Extension of Executive Order 20-52 – COVID-19), attached as **Exhibit E**;

d. Governor DeSantis' Executive Order 20-166 of July 7, 2020 (Emergency Management – Extension of Executive Order 20-52 – COVID-19), attached as **Exhibit F**;

e. President Donald J. Trump's Proclamation 9994 of March 13, 2020, Proclamation on Declaring a National Emergency Concerning the Novel Coronavirus Disease (COVID-19) Outbreak, attached as **Exhibit H**;

f. Florida Department of Business and Professional Regulation Emergency Order 2020-09 of June 26, 2020, attached as **Exhibit P**.

6. Judicial notice of the above items is appropriate. Specifically, section 90.202(5), Florida Statutes, permits a court to take judicial notice of “[o]fficial actions of the legislative, executive, and judicial departments of . . . any state, territory, or jurisdiction of the United States.” Indeed, Courts have frequently taken judicial notice of orders or proclamations from the executive branch. See, e.g., *Johns v. State*, 197 So. 791 (Fla. 1940) (taking judicial notice of executive orders signed by the Governor and attested by the Secretary of State under seal of the state); *Advisory Opinion to the Governor*, 206 So. 2d 641, 642 (Fla. 1968) (taking judicial notice of the Governor’s proclamation that limited the extra session to a period of ten days); see also *United States v. Holmes*, 414 F. Supp. 831, 839 (D. Md. 1976) (taking judicial notice of a presidential proclamation); *Stankus v. New York Life Ins. Co.*, 44 N.E. 2d 687 (Mass. 1942) (taking judicial notice of presidential proclamations stating a state of war existed between the United Kingdom and Germany and Italy); *Green v. State Health Benefits Comm’n*, 861 A.2d 867 (N.J. App. Div. 2004) (taking judicial notice of Governor’s Executive Order).

7. Second, the City requests that this Court take judicial notice of information published by the Florida Department of Health, Centers for Disease Control and Prevention, the World Health Organization, regarding the use of face covering to slow the spread of COVID-19, as well as the increasing number of cases in Florida, as evidenced by the attached exhibit and on the following publicly available websites:

- a. Florida Department of Health, COVID-19: Summary for Florida as of June 12, 2020 available at:
http://www11.doh.state.fl.us/comm/partners/covid19_report_archive/county_reports_latest.pdf attached as **Exhibit J**;

- b. Centers for Disease Control and Prevention, *What you should know about COVID-19 to protect yourself and others*, available at:
<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html>,
attached as **Exhibit A**;
- c. World Health Organization, *WHO Director-General's opening remarks at the media briefing on COVID-19 – 11 March 2020*, available at:
<https://www.who.int/dg/speeches/detail/who-director-general-s-opening-remarks-at-the-media-briefing-on-covid-19---11-march-2020>, attached as **Exhibit G**.

8. Pursuant to section 90.202(12), Florida Statutes, a court may take judicial notice of “[f]acts that are not subject to dispute because they are capable of accurate and ready determination by resort to sources whose accuracy cannot be questioned.” Courts have taken judicial notice of internet sites similar to those listed above. See, e.g., *Hoyte v. Stauffer Chem. Co.*, No. 98-3024-CI-7, 2002 WL 31892830 (Fla. Cir. Ct. Pinellas Cty. Nov. 6, 2002); *McCoy v. S. Baptist Hosp. of Fla., Inc.* No. 16-2009-CA-008975-XX, 2010 WL 4920639 (Fla. 4th Cir. May 6, 2010) (taking judicial notice of portions of the official internet websites of the American Board of Medical Specialties, the American Board of Emergency Medicine, the American Board of Family Medicine, and others); see also *Daniels-Hall v. Nat’l Ed. Assoc.*, 629 F. 3d 992, 999 (9th Cir. 2010) (taking judicial notice of information on two school districts’ websites); *Denius v. Dunlap*, 330 F. 3d 919, 926 (7th Cir. 2003) (taking judicial notice of information on official government website)¹; *Rogers v. State*, 957 So. 2d 538, 551 n. 15 (Fla. 2007) (citing a United States Department of Justice website to establish that an investigative report describing poor lab conditions at the FBI crime lab was released in 1997).

¹ The Federal Rule Counterpart (Federal Rule of Evidence 201(b)(2)) is similar to section 90.202(12), Florida Statutes. In Florida, interpretations of a federal rule of procedure is considered persuasive when examining Florida’s counterpart). See *Zuberhuler v. Div. of Admin.*, 344 So. 2d 1304 (Fla. 2d DCA 1977).

9. Third, the City requests that the Court take judicial notice of the City Commission's agendas, meeting transcripts, and documents presented to the City Commission during its meeting with respect to the consideration given to the requirement to wear facial coverings as follows:

- a. March 31, 2020 Executive Summary Re: Implementation Plan real Time Temperature Monitoring, attached as **Exhibit I**;
- b. Email correspondence from Simon Spencer, Kinsa Health to City Manager John Regan dated June 17, 2020, attached as **Exhibit K**;
- c. Certified Court Reporter transcript of the Emergency Meeting of the City Commission on June 26, 2020, attached as **Exhibit L**;
- d. Coronavirus Crisis: Dr. Fauci praises California, says mask wearing 'purely a public health issue,' not a political one, by Chris Nguyen and Kayla Galloway, June 24, 2020, attached as **Exhibit M**;
- e. State of Florida, Department of Health, Public Health Advisory, In Re: Updated Measures to Ensure Protection of Public Health In Response to COVID-19 issued June 22, 2020, attached as **Exhibit N**;
- f. Statement by Florida Medical Association President Ronald F. Giffler, MD, JD, MBA, Related To Usage of Face Coverings to Prevent Further Spread of COVID-19, South Florida Hospital News, July 2020, Vol. 17, Issue 1, attached as **Exhibit O**.

10. Judicial notice of city commission meetings, statements made within the meeting, and documents considered during the meeting, all of which are public records, is appropriate. See *Cash Inn of Dade, Inc. v. Metro. Dade County*, 938 F.2d 1239, 1242-43 (11th Cir. 1991) (stating that "[t]he district court was undoubtedly justified in taking notice of the [county commission meeting] minutes for several reasons" among them that "numerous courts have held that an authenticated

record of the proceedings before an administrative or legislative body are properly the subject of consideration by the district court”)2; see also *Conyers v. State*, 123 So. 817, 818 (Fla. 1929) (“Courts may take judicial cognizance of all public documents and public records.”).

11. Fourth, the City requests that this Court take judicial notice of the following news article available on-line regarding new Presidential guidance on wearing face masks to help mitigate the spread of COVID-19:

- a. David R. Baker and Margaret Newkirk, *Trump Reverses Course on Masks, Calling Them ‘Patriotic’ After Allies Split With Him*, Bloomberg-Politics (July 20, 2020, updated July 21, 2020), <https://www.bloomberg.com/news/articles/2020-07-21/trump-s-sudden-push-for-mask-wearing-follows-allies-defections>, attached as **Exhibit B**.

12. These internet news sites are appropriate for judicial notice. See, e.g., *Hoyte v. Stauffer Chemical Co.*, 2002 WL 31892830 (taking judicial notice of a May 1998 article appearing in the St. Petersburg Times that discussed the pending suit); see also *Chase v. Nova Se. Univ., Inc.*, Case No. 11-61290-CIV, 2012 WL 13005597, at *13 (S.D. Fla. Sept. 14, 2012) (taking judicial notice of information within articles from the N.Y. Times); *In re Sony Gaming Networks & Customer Data Sec. Breach Litig.*, 903 F. Supp. 2d 942, 954055 (S.D. Cal. 2012) (taking judicial notice of a CNET Article); *In re Am. Funds Sec. Litig.*, 556 F. Supp. 2d 1110 (C.D. Cal. 2008), vacated on other grounds, *In re Am. Funds Sec. Litig.*, 395 Fed. App’x 485, 486 (9th Cir. 2010) (taking judicial notice of news articles reporting SEC investigation of mutual fund companies’ alleged improper sales practices).

WHEREFORE, Defendant, CITY OF ST. AUGUSTINE, respectfully requests that this Court enter an Order taking judicial notice of the facts and documents delineated herein and attached hereto.

CITY OF ST. AUGUSTINE

/s/ Denise C. May
Denise C. May, Esquire
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CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a true and correct copy of the foregoing has been filed with the Court using Florida Court's E-Filing Portal, which will serve it on all counsel of record on this 22nd day of July, 2020.

/s/ Denise C. May

STATE OF FLORIDA

OFFICE OF THE GOVERNOR

EXECUTIVE ORDER NUMBER 20-51

(Establishes COVID-19 Response Protocol and Directs Public Health Emergency)

WHEREAS, Coronavirus Disease 2019 (COVID-19) is a severe acute respiratory illness that can spread among humans through respiratory transmission and presents with symptoms similar to those of influenza; and

WHEREAS, in late 2019, a new and significant outbreak of COVID-19 emerged in China; and

WHEREAS, the World Health Organization declared COVID-19 a Public Health Emergency of International Concern; and

WHEREAS, in response to the recent COVID-19 outbreak in China, Iran, Italy and South Korea, the Centers for Disease Control and Prevention ("CDC") has deemed it necessary to prohibit or restrict non-essential travel to or from those countries; and

WHEREAS, in response to the recent COVID-19 outbreak in Japan, the CDC has advised older travelers and those with chronic medical conditions to avoid nonessential travel and all travelers to exercise enhanced precautions; and

WHEREAS, the CDC currently recommends community preparedness and everyday prevention measures be taken by all individuals and families in the United States, including voluntary home isolation when individuals are sick with respiratory symptoms, covering coughs and sneezes with a tissue and disposal of the tissue immediately thereafter, washing hands often with soap and water for at least 20 seconds, use of alcohol-based hand sanitizers with 60%-95%

alcohol if soap and water are not readily available and routinely cleaning frequently touched surfaces and objects to increase community resilience and readiness for responding to an outbreak; and

WHEREAS, two individuals in the State of Florida tested presumptively positive for COVID-19, including a resident of Manatee County and a resident of Hillsborough County; and

WHEREAS, the CDC currently recommends mitigation measures in communities with COVID-19 cases, including staying at home when sick, keeping away from others who are sick and staying at home when a household member is sick with respiratory disease symptoms or if instructed to do so by public health officials or a health care provider; and

WHEREAS, it is necessary and appropriate to take action to ensure that COVID-19 remains controlled and that residents and visitors in Florida remain safe and secure;

NOW, THEREFORE, I, RON DESANTIS, as Governor of Florida, by virtue of the authority vested in me by Article IV, Section (1)(a) of the Florida Constitution, and all other applicable laws, promulgate the following Executive Order to take immediate effect:

Section 1. Because of the foregoing conditions, I direct the State Health Officer and Surgeon General, Dr. Scott Rivkees, to declare a public health emergency in the State of Florida, pursuant to his authority in section 381.00315, Florida Statutes. The State Health Officer is authorized and directed to use his judgment as to the duration of this public health emergency.

Section 2. In accordance with section 381.0011(7), Florida Statutes, I direct the State Health Officer to take any action necessary to protect the public health.

Section 3. I direct the State Health Officer to follow the guidelines established by the CDC in establishing protocols to control the spread of COVID-19 and educate the public on prevention.

Section 4. In accordance with section 381.0011(7), Florida Statutes, I designate the Florida Department of Health as the lead state agency to coordinate emergency response activities among the various state agencies and local governments. The State Health Officer, or his designee, shall advise the Executive Office of the Governor on the implementation of these emergency response activities.

Section 5. All actions taken by the State Health Officer with respect to this emergency before the issuance of this Executive Order are ratified.

Section 6. The Florida Department of Health will actively monitor, at a minimum, all persons meeting the definition of a Person Under Investigation ("PUI") as defined by the CDC for COVID-19 for a period of at least 14 days or until the PUI tests negative for COVID-19. Active monitoring by the Florida Department of Health will include at least the following:

- A. Risk assessment within 24 hours of learning an individual meets the criteria for a PUI.
- B. Twice-daily temperature checks.

Section 7. The Florida Department of Health, pursuant to its authority in section 381.00315, Florida Statutes, will ensure that all individuals meeting the CDC's definition of a PUI are isolated or quarantined for a period of 14 days or until the person tests negative for COVID-19.

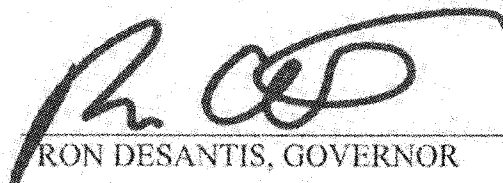
Section 8. I hereby direct the Florida Department of Health to make its own determinations as to quarantine, isolation and other necessary public health interventions as permitted under Florida law.

Section 9. I direct all agencies under the direction of the Governor to fully cooperate with the Florida Department of Health, and any representative thereof in furtherance of this Order.

Agencies not under the direction of the Governor are requested to provide such assistance as is required.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Great Seal of the State of Florida to be affixed, at Tallahassee, this 1st day of March, 2020.


RON DESANTIS, GOVERNOR

ATTEST:


SECRETARY OF STATE

FILED
2020 MAR -1 PM 9:31

STATE OF FLORIDA

OFFICE OF THE GOVERNOR

EXECUTIVE ORDER NUMBER 20-52

(Emergency Management - COVID-19 Public Health Emergency)

WHEREAS, Novel Coronavirus Disease 2019 (COVID-19) is a severe acute respiratory illness that can spread among humans through respiratory transmission and presents with symptoms similar to those of influenza; and

WHEREAS, in late 2019, a new and significant outbreak of COVID-19 emerged in China; and

WHEREAS, the World Health Organization previously declared COVID-19 a Public Health Emergency of International Concern; and

WHEREAS, in response to the recent COVID-19 outbreak in China, Iran, Italy, Japan and South Korea, the Centers for Disease Control and Prevention ("CDC") has deemed it necessary to prohibit or restrict non-essential travel to or from those countries; and

WHEREAS, on March 1, 2020, I issued Executive Order number 20-51 directing the Florida Department of Health to issue a Public Health Emergency; and

WHEREAS, on March 1, 2020, the State Surgeon General and State Health Officer declared a Public Health Emergency exists in the State of Florida as a result of COVID-19; and

WHEREAS, on March 7, 2020, I directed the Director of the Division of Emergency Management to activate the State Emergency Operations Center to Level 2 to provide coordination and response to the COVID-19 emergency; and

WHEREAS, as of March 9, 2020, eight counties in Florida have positive cases for COVID-19, and COVID-19 poses a risk to the entire state of Florida; and

WHEREAS, the CDC currently recommends community preparedness and everyday prevention measures be taken by all individuals and families in the United States, including voluntary home isolation when individuals are sick with respiratory symptoms, covering coughs and sneezes with a tissue and disposal of the tissue immediately thereafter, washing hands often with soap and water for at least 20 seconds, using of alcohol-based hand sanitizers with 60%-95% alcohol if soap and water are not readily available and routinely cleaning frequently touched surfaces and objects to increase community resilience and readiness for responding to an outbreak; and

WHEREAS, the CDC currently recommends mitigation measures for communities experiencing an outbreak including staying at home when sick, keeping away from others who are sick, limiting face-to-face contact with others as much as possible, consulting with your healthcare provider if individuals or members of a household are at high risk for COVID-19 complications, wearing a facemask if advised to do so by a healthcare provider or by a public health official, staying home when a household member is sick with respiratory disease symptoms if instructed to do so by public health officials or a health care provider; and

WHEREAS, as Governor, I am responsible for meeting the dangers presented to this state and its people by this emergency.

NOW, THEREFORE, I, RON DESANTIS, as Governor of Florida, by virtue of the authority vested in me by Article IV, Section (1)(a) of the Florida Constitution, Chapter 252, Florida Statutes, and all other applicable laws, promulgate the following Executive Order to take immediate effect:

Section 1. Because of the foregoing conditions, I declare a state of emergency exists in the State of Florida.

Section 2. I designate the Director of the Division of Emergency Management ("Director") as the State Coordinating Officer for the duration of this emergency and direct him to execute the State's Comprehensive Emergency Management Plan and other response, recovery, and mitigation plans necessary to cope with the emergency. Additionally, I designate the State Health Officer and Surgeon General as a Deputy State Coordinating Officer and State Incident Commander.

Pursuant to section 252.36(1)(a), Florida Statutes, I delegate to the State Coordinating Officer the authority to exercise those powers delineated in sections 252.36(5)-(10), Florida Statutes, which he shall exercise as needed to meet this emergency, subject to the limitations of section 252.33, Florida Statutes. In exercising the powers delegated by this Order, the State Coordinating Officer shall confer with the Governor to the fullest extent practicable. The State Coordinating Officer shall also have the authority to:

- A. Seek direct assistance and enter into agreements with any and all agencies of the United States Government as may be needed to meet the emergency.
- B. Designate additional Deputy State Coordinating Officers, as necessary.
- C. Suspend the effect of any statute, rule, or order that would in any way prevent, hinder, or delay any mitigation, response, or recovery action necessary to cope with this emergency.
- D. Enter orders as may be needed to implement any of the foregoing powers; however, the requirements of sections 252.46 and 120.54(4), Florida Statutes, do not apply to any such orders issued by the State Coordinating Officer; however, no such order shall remain in effect beyond the expiration of this Executive Order, to include any extension.

Section 3. I order the Adjutant General to activate the Florida National Guard, as needed, to deal with this emergency.

Section 4. I find that the special duties and responsibilities resting upon some State, regional, and local agencies and other governmental bodies in responding to the emergency may require them to suspend the application of the statutes, rules, ordinances, and orders they administer. Therefore, I issue the following authorizations:

A. Pursuant to section 252.36(1)(a), Florida Statutes, the Executive Office of the Governor may suspend all statutes and rules affecting budgeting to the extent necessary to provide budget authority for state agencies to cope with this emergency. The requirements of sections 252.46 and 120.54(4), Florida Statutes, do not apply to any such suspension issued by the Executive Office of the Governor; however, no such suspension shall remain in effect beyond the expiration of this Executive Order, to include any extension.

B. Each State agency may suspend the provisions of any regulatory statute prescribing the procedures for conduct of state business or the orders or rules of that agency, if strict compliance with the provisions of any such statute, order, or rule would in any way prevent, hinder, or delay necessary action in coping with the emergency. This includes, but is not limited to, the authority to suspend any and all statutes, rules, ordinances, or orders which affect leasing, printing, purchasing, travel, and the condition of employment and the compensation of employees. For the purposes of this Executive Order, "necessary action in coping with the emergency" means any emergency mitigation, response, or recovery action: (1) prescribed in the State Comprehensive Emergency Management Plan ("CEMP"); or (2) ordered by the State Coordinating Officer. The requirements of sections 252.46 and 120.54, Florida Statutes, shall not apply to any such suspension issued by a State agency; however, no such suspension shall remain in effect beyond the expiration of this Executive Order, to include any extensions.

C. In accordance with section 465.0275, Florida Statutes, pharmacists may dispense up to a 30-day emergency prescription refill of maintenance medication to persons who reside in an area or county covered under this Executive Order and to emergency personnel who have been activated by their state and local agency but who do not reside in an area or county covered by this Executive Order.

D. In accordance with section 252.38, Florida Statutes, each political subdivision within the State of Florida may waive the procedures and formalities otherwise required of the political subdivision by law pertaining to:

- 1) Performance of public work and taking whatever prudent action is necessary to ensure the health, safety, and welfare of the community;
- 2) Entering into contracts; however, political subdivisions are cautioned against entering into time and materials contracts without ceiling as defined by 2 CFR 200.318(j) or cost plus percentage contracts as defined by 2 CFR 200.323(d);
- 3) Incurring obligations;
- 4) Employment of permanent and temporary workers;
- 5) Utilization of volunteer workers;
- 6) Rental of equipment;
- 7) Acquisition and distribution, with or without compensation, of supplies, materials, and facilities; and,
- 8) Appropriation and expenditure of public funds.

E. All State agencies responsible for the use of State buildings and facilities may close such buildings and facilities in those portions of the State affected by this emergency, to the extent necessary to meet this emergency. I direct each State agency to report the closure of any State

building or facility to the Secretary of the Department of Management Services. Under the authority contained in section 252.36, Florida Statutes, I direct each County to report the closure of any building or facility operated or maintained by the County or any political subdivision therein to the Secretary of the Department of Management Services. Furthermore, I direct the Secretary of the Department of Management Services to:

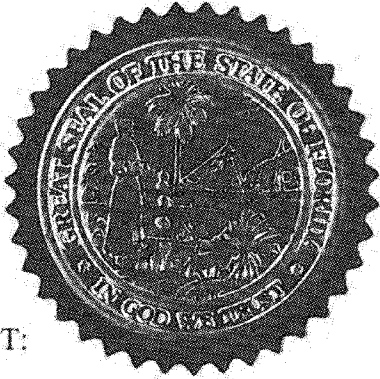
- 1) Maintain an accurate and up-to-date list of all such closures; and,
- 2) Provide that list daily to the State Coordinating Officer.

Section 5. I find that the demands placed upon the funds appropriated to the agencies of the State of Florida and to local agencies are unreasonably great and the funds currently available may be inadequate to pay the costs of coping with this emergency. In accordance with section 252.37(2), Florida Statutes, I direct that sufficient funds be made available, as needed, by transferring and expending moneys appropriated for other purposes, moneys from unappropriated surplus funds, or from the Budget Stabilization Fund.

Section 6. All State agencies entering emergency final orders or other final actions in response to this emergency shall advise the State Coordinating Officer contemporaneously or as soon as practicable.

Section 7. Medical professionals and workers, social workers, and counselors with good and valid professional licenses issued by states other than the State of Florida may render such services in Florida during this emergency for persons affected by this emergency with the condition that such services be rendered to such persons free of charge, and with the further condition that such services be rendered under the auspices of the American Red Cross or the Florida Department of Health.

Section 8. All activities taken by the Director of the Division of Emergency Management and the State Health Officer and Surgeon General with respect to this emergency before the issuance of this Executive Order are ratified. This Executive Order shall expire sixty days from this date unless extended.



ATTEST:

Laurel M. Bee

SECRETARY OF STATE

IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Great Seal of the State of Florida to be affixed, at Tallahassee, this 9th day of March, 2020.

[Signature]

RON DESANTIS, GOVERNOR

FILED
MAR 9 2020
TALLAHASSEE, FLORIDA
10:45 AM

EXHIBIT "E"

STATE OF FLORIDA

OFFICE OF THE GOVERNOR

EXECUTIVE ORDER NUMBER 20-114

(Emergency Management – Extension of Executive Order 20-52 – COVID-19)

WHEREAS, on March 1, 2020, I issued Executive Order 20-51, directing the Florida Department of Health to issue a Public Health Emergency due to COVID-19; and

WHEREAS, on March 9, 2020, I issued Executive Order 20-52, declaring a state of emergency for the entire state due to COVID-19; and

WHEREAS, on March 25, 2020, President Donald J. Trump approved my request and declared a Major Disaster due to COVID-19 in Florida; and

WHEREAS, on April 29, 2020, after consulting with my Task Force to Re-Open Florida, I issued Executive Order 20-112, my “Phase 1: Safe. Smart. Step-by-Step. Plan for Florida’s Recovery”; and

WHEREAS, I, as Governor of Florida, am committed to providing all available resources and assisting all Floridians and our local communities with their efforts; and

WHEREAS, no state of emergency declared pursuant to the Florida Emergency Management Act may continue for more than 60 days unless renewed by the Governor; and

WHEREAS, the impact of COVID-19 poses a continuing threat to the health, safety and welfare of the State of Florida and its residents.

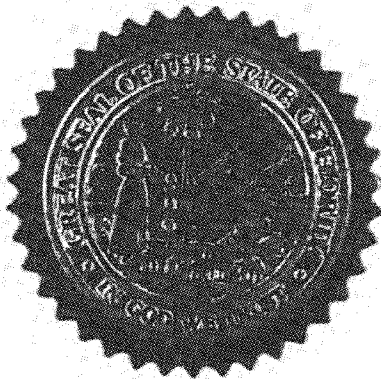
NOW, THEREFORE, I, RON DESANTIS, as Governor of Florida, by virtue of the authority vested in me by Article IV, Section 1(a) of the Florida Constitution and by the Florida Emergency Management Act, as amended, and all other applicable laws, promulgate the following Executive Order, to take immediate effect:

Section 1. The state of emergency declared in Executive Order 20-52, will be extended for 60 days following the issuance of this order for the entire State of Florida.

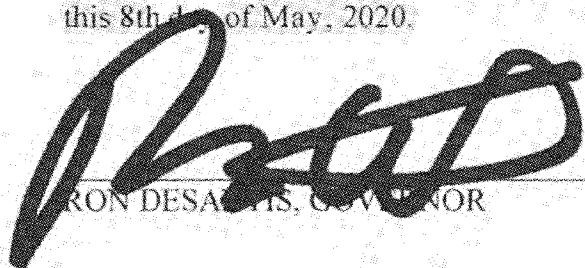
Section 2. To the extent Executive Order 20-112, Phase 1: Safe. Smart. Step-by-Step Plan for Florida's Recovery, amended or extended any executive order related to COVID-19, the referenced executive orders shall remain in effect, as modified.

Section 3. All actions taken by the Director of the Division of Emergency Management as the State Coordinating Officer with respect to this emergency before the issuance of this Executive Order are ratified, and he is directed to continue to execute the State's Comprehensive Emergency Management Plan and other response, recovery, and mitigation plans necessary to cope with the emergency.

Section 4. Except as amended herein, Executive Order 20-52 is ratified and reaffirmed.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Great Seal of the State of Florida to be affixed, at Tallahassee, this 8th day of May, 2020.


RON DESANTIS, GOVERNOR

ATTEST:


SECRETARY OF STATE

FILED
2020 MAY -8 AM 8:56
TALLAHASSEE, FLORIDA

EXHIBIT "F"

STATE OF FLORIDA

OFFICE OF THE GOVERNOR

EXECUTIVE ORDER NUMBER 20-166

(Emergency Management – Extension of Executive Order 20-52 – COVID-19)

WHEREAS, on March 9, 2020, I issued Executive Order 20-52, declaring a state of emergency for the entire state due to COVID-19; and

WHEREAS, on March 25, 2020, President Donald J. Trump approved my request and declared a Major Disaster due to COVID-19 in Florida; and

WHEREAS, on June 3, 2020, I issued Executive Order 20-139, implementing Phase 2 of my Safe. Smart. Step-by-Step. Plan for Florida's Recovery; and

WHEREAS, I, as Governor of Florida, am committed to providing all available resources and assisting all Floridians and our local communities with their efforts; and

WHEREAS, no state of emergency declared pursuant to the Florida Emergency Management Act may continue for more than 60 days unless renewed by the Governor; and

WHEREAS, the impact of COVID-19 poses a continuing threat to the health, safety and welfare of the State of Florida and its residents.

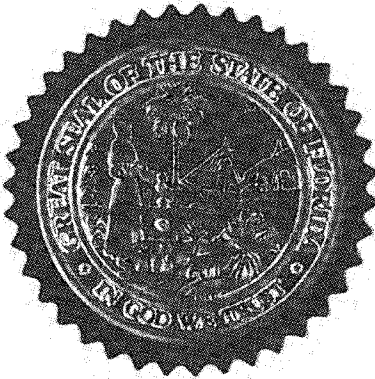
NOW, THEREFORE, I, RON DESANTIS, as Governor of Florida, by virtue of the authority vested in me by Article IV, Section 1(a) of the Florida Constitution and by the Florida Emergency Management Act, as amended, and all other applicable laws, promulgate the following Executive Order, to take immediate effect:

Section 1. The state of emergency declared in Executive Order 20-52, as extended by Executive Order 20-114, will be extended for 60 days following the issuance of this order for the entire State of Florida.

Section 2. To the extent Executive Order 20-139, Phase 2: Safe. Smart. Step-by-Step. Plan for Florida's Recovery, amended or extended any executive order related to COVID-19, the referenced executive orders shall remain in effect, as modified.

Section 3. All actions taken by the Director of the Division of Emergency Management as the State Coordinating Officer with respect to this emergency before the issuance of this Executive Order are ratified, and he is directed to continue to execute the State's Comprehensive Emergency Management Plan and other response, recovery, and mitigation plans necessary to cope with the emergency.

Section 4. Except as amended herein, Executive Order 20-52, extended by Executive Order 20-114, is ratified and reaffirmed.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Great Seal of the State of Florida to be affixed, at Tallahassee, this 7th day of July, 2020.



RON DESANTIS, GOVERNOR

ATTEST:



SECRETARY OF STATE

FILED
2020 JUL -7 AM 10:08
TALLAHASSEE, FLORIDA

Presidential Documents

Proclamation 9994 of March 13, 2020

Declaring a National Emergency Concerning the Novel Coronavirus Disease (COVID-19) Outbreak

By the President of the United States of America

A Proclamation

In December 2019, a novel (new) coronavirus known as SARS-CoV-2 (“the virus”) 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 Secretary of Health and Human Services (HHS) declared a public health emergency on January 31, 2020, under section 319 of the Public Health Service Act (42 U.S.C. 247d), in response to COVID-19. I have taken sweeping action to control the spread of the virus in the United States, including by suspending entry of foreign nationals seeking entry who had been physically present within the prior 14 days in certain jurisdictions where COVID-19 outbreaks have occurred, including the People’s Republic of China, the Islamic Republic of Iran, and the Schengen Area of Europe. The Federal Government, along with State and local governments, has taken preventive and proactive measures to slow the spread of the virus and treat those affected, including by instituting Federal quarantines for individuals evacuated from foreign nations, issuing a declaration pursuant to section 319F-3 of the Public Health Service Act (42 U.S.C. 247d-6d), and releasing policies to accelerate the acquisition of personal protective equipment and streamline bringing new diagnostic capabilities to laboratories. On March 11, 2020, the World Health Organization announced that the COVID-19 outbreak can be characterized as a pandemic, as the rates of infection continue to rise in many locations around the world and across the United States.

The spread of COVID-19 within our Nation’s communities threatens to strain our Nation’s healthcare systems. As of March 12, 2020, 1,645 people from 47 States have been infected with the virus that causes COVID-19. It is incumbent on hospitals and medical facilities throughout the country to assess their preparedness posture and be prepared to surge capacity and capability. Additional measures, however, are needed to successfully contain and combat the virus in the United States.

NOW, THEREFORE, I, DONALD J. TRUMP, President of the United States, by the authority vested in me by the Constitution and the laws of the United States of America, including sections 201 and 301 of the National Emergencies Act (50 U.S.C. 1601 *et seq.*) and consistent with section 1135 of the Social Security Act (SSA), as amended (42 U.S.C. 1320b-5), do hereby find and proclaim that the COVID-19 outbreak in the United States constitutes a national emergency, beginning March 1, 2020. Pursuant to this declaration, I direct as follows:

Section 1. Emergency Authority. The Secretary of HHS may exercise the authority under section 1135 of the SSA to temporarily waive or modify certain requirements of the Medicare, Medicaid, and State Children’s Health Insurance programs and of the Health Insurance Portability and Accountability Act Privacy Rule throughout the duration of the public health emergency declared in response to the COVID-19 outbreak.

Sec. 2. *Certification and Notice.* In exercising this authority, the Secretary of HHS shall provide certification and advance written notice to the Congress as required by section 1135(d) of the SSA (42 U.S.C. 1320b-5(d)).

Sec. 3. *General Provisions.* (a) Nothing in this proclamation shall be construed to impair or otherwise affect:

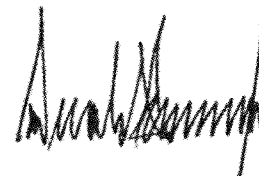
(i) the authority granted by law to an executive department or agency, or the head thereof; or

(ii) the functions of the Director of the Office of Management and Budget relating to budgetary, administrative, or legislative proposals.

(b) This proclamation shall be implemented consistent with applicable law and subject to the availability of appropriations.

(c) This proclamation is not intended to, and does not, create any right or benefit, substantive or procedural, enforceable at law or in equity by any party against the United States, its departments, agencies, or entities, its officers, employees, or agents, or any other person.

IN WITNESS WHEREOF, I have hereunto set my hand this thirteenth day of March, in the year of our Lord two thousand twenty, and of the Independence of the United States of America the two hundred and forty-fourth.



Mission:

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.

Ron DeSantis

Governor

**Florida
HEALTH**

2020 JUN 22 AM 8:16

Scott A. Rivkees, MD

State Surgeon General

Vision: To be the Healthiest State in the Nation

**STATE OF FLORIDA
DEPARTMENT OF HEALTH
PUBLIC HEALTH ADVISORY**

In Re:

**UPDATED MEASURES TO ENSURE
PROTECTION OF PUBLIC HEALTH
IN RESPONSE TO COVID-19**

WHEREAS, on March 25, 2020, I issued a public health advisory relating to protective measures for vulnerable populations, gatherings of private citizens and density of the workforce; and

WHEREAS, on May 4, 2020, Governor Ron DeSantis implemented Phase 1 of Florida's recovery, a plan in which the Governor's Task Force recommended encouraging individuals to limit their personal interactions outside of the home, permitting certain personal services to resume in the State of Florida, and advising individuals to wear face coverings in instances in which social distancing is impractical; and

WHEREAS, on June 5, 2020, Governor Ron DeSantis implemented Phase 2 of Florida's recovery plan for the majority of Florida's counties, encouraging individuals to follow appropriate social distancing and safety protocols issued by the Centers for Disease Control and Prevention (CDC) and the Occupational Safety and Health Administration (OSHA) in their personal interactions outside of the home; and

WHEREAS, pursuant to the authority granted in Section 381.00315(1), Florida Statutes, I, Scott A. Rivkees, M.D., as State Surgeon General and State Health Officer, determine that a public health advisory is necessary as a result of COVID-19 to protect the

public health and safety, and hereby issue the following public health advisory, which shall serve to amend the public health advisory issued on March 25, 2020.

WEARING FACE COVERINGS

All individuals in Florida should wear face coverings in any setting where social distancing is not possible, unless any of the following is applicable:

- A child is under two years of age;
- An individual has one or more medical conditions or disabilities that prevent wearing a face covering;
- An individual is obtaining a service involving the nose or face for which temporary removal of the face covering is necessary to perform the service;
- An individual works in a profession where use of a face covering will not be compatible with the duties of the profession; or
- An individual is engaged in outdoor work or recreation with appropriate social distancing in place.

All individuals should follow CDC guidelines on what type of face coverings are available and should be utilized.

VULNERABLE POPULATIONS

All individuals over the age of 65 and all individuals of any age with high-risk health conditions should limit personal interactions outside of the home and take all measures to limit the risk of exposure to COVID-19. These measures include, but are not limited to: distancing any unavoidable personal contact by a minimum of six feet; wearing a face covering when social distancing is not possible; washing hands often with soap and water for at least 20 seconds, or using hand sanitizer with at least 60% alcohol; avoiding unnecessary touching of eyes, nose, and mouth, and washing hands prior to doing so; and cleaning and disinfecting high-touch surfaces, including entryway door handles.

High-risk health conditions include, but are not limited to: chronic lung disease; moderate to severe asthma; serious heart conditions; immunocompromised status (as a result of cancer treatment, bone marrow or organ transplant, immune deficiencies, poorly controlled HIV or AIDS, or prolonged use of corticosteroids and other immune weakening medications); cancer; severe obesity (body mass index [BMI]>40); diabetes; renal failure; and liver disease.

GATHERINGS OF PRIVATE CITIZENS

All individuals should refrain from participation in social or recreational gatherings of more than 50 people. For all gatherings of fewer than 50 people, individuals should practice social distancing by maintaining a distance of at least six feet from each other and wear a face covering.

Issued this 20th day of June 2020, in Department of Health offices, Tallahassee, Leon County, Florida.



Scott A. Rivkees, M.D.
State Surgeon General

COVID-19: summary of persons being monitored, persons tested, and cases

Data through Jul 12, 2020 verified as of Jul 13, 2020 at 09:25 AM

Data in this report are provisional and subject to change.

Monitored persons: people the Florida Department of Health was notified of for possible monitoring because they are a contact of a case, traveled from China, or were identified by the Centers for Disease Control and Prevention (CDC) as a part of a airline/ship contact investigation

Total reports	96,577
Total persons of high, medium, or unknown risk	92,892
High/medium/unknown risk still being monitored	15,307

Persons tested: includes PCR and antigen test results received by the Department of Health from the state public health laboratory (BPHL), as well as commercial and hospital laboratories

Total tested	2,642,613
Positive	282,435
Negative	2,357,139
Inconclusive	3,039
Awaiting testing	1,995

Cases: people with positive PCR or antigen test result

Total cases	282,435
Florida residents	278,667
Non-Florida residents	3,768

Type of testing	
Florida residents	278,667
Positive by BPHL/CDC	9,888
Positive by commercial/hospital lab	268,779
Non-Florida residents	
Positive by BPHL/CDC	168
Positive by commercial/hospital lab	3,600

Characteristics	
Florida residents hospitalized	18,498
Florida resident deaths	4,277
Change in deaths since previous report	+35
Non-Florida resident deaths	104

Hospitalized counts include anyone who was hospitalized at some point during their illness. It does not reflect the number of people currently hospitalized.

More information on deaths identified through death certificate data is available on the National Center for Health Statistics website at www.cdc.gov/nchs/nvss/vsrr/COVID19/index.htm.

Risk factors for Florida residents	
Traveled	2,904
Contact with a known case	75,365
Traveled and contact with a known case	2,810
Neither	197,588
No travel and no contact	27,921
Travel is unknown	141,569
Contact is unknown	41,529
Contact is pending	125,230

Travel can be unknown and contact can be unknown or pending for the same case, these numbers will sum to more than the "neither" total.

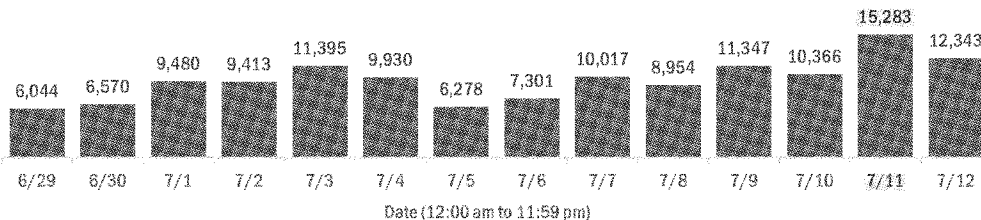
COVID-19: cases and laboratory testing over time

Data through Jul 12, 2020 verified as of Jul 13, 2020 at 09:25 AM

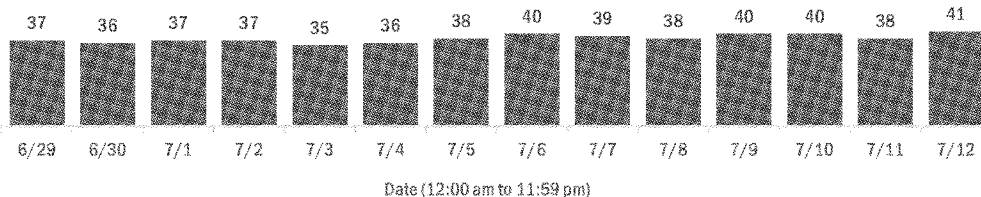
Data in this report are provisional and subject to change.

Cases in Florida residents per day for the past 2 weeks

Number of cases per day



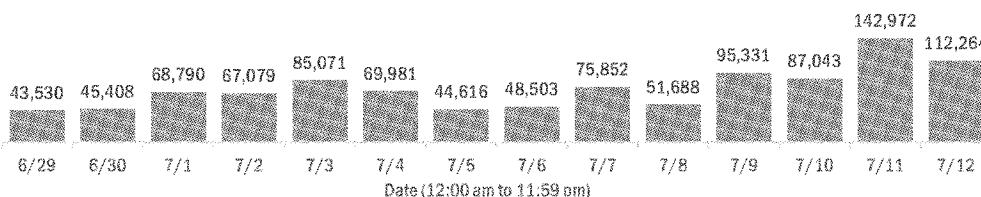
Median age of cases by day



Laboratory testing for Florida residents and non-Florida residents over the past 2 weeks

Number of people tested per day

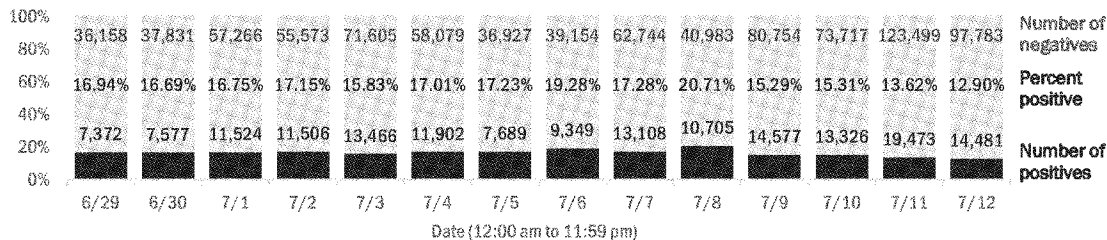
These counts include the number of people for whom the department received PCR or antigen laboratory results by day. People tested on multiple days will be included for each day a new result was received. A person is only counted once for each day they are tested, regardless of whether multiple specimens are tested or multiple results are received.



Number and percent of positive labs

The percent of positive results ranged from 12.90% to 20.71% over the past 2 weeks and was 12.90% yesterday.

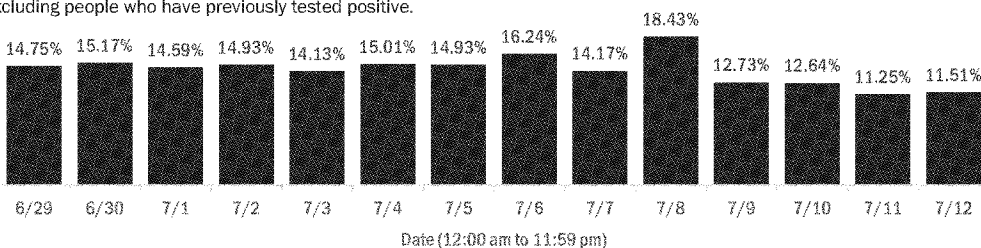
These counts include the number of people for whom the department received PCR or antigen laboratory results by day. People tested on multiple days will be included for each day a new result was received. A person is only counted once for each day they are tested, regardless of whether multiple specimens are tested or multiple results are received. If a person has a positive specimen and a negative specimen in the same day, only the positive result is counted.



Percent positivity for new cases

The percent of positive results ranged from 11.25% to 18.43% over the past 2 weeks and was 11.51% yesterday.

This percent is the number of people who test PCR- or antigen-positive for the first time divided by all the people tested that day, excluding people who have previously tested positive.



COVID-19: All persons with tests reported

Data through Jul 12, 2020 verified as of Jul 13, 2020 at 09:25 AM

Data in this report are provisional and subject to change.

The table below includes persons with laboratory results that the Department of Health has received electronically or by mail/fax for Florida residents and non-Florida residents.

County	Awaiting testing	Inconclusive	Negative	Positive	Percent positive	Total tested
Dade	181	777	365,488	67,713	16%	433,978
Broward	49	223	245,459	31,484	11%	277,166
Palm Beach	186	332	165,966	21,806	12%	188,104
Hillsborough	151	200	149,017	19,828	12%	169,045
Orange	250	224	165,958	18,937	10%	185,119
Duval	98	185	127,922	13,370	9%	141,477
Pinellas	45	80	113,013	11,442	9%	124,535
Lee	17	25	67,986	10,344	13%	78,355
Polk	24	77	56,992	7,630	12%	64,699
Collier	136	40	37,258	6,465	15%	43,763
Manatee	2	34	51,420	5,266	9%	56,720
Seminole	28	41	44,048	4,466	9%	48,555
Osceola	62	78	33,223	4,442	12%	37,743
Escambia	15	14	41,905	4,335	9%	46,254
Pasco	42	33	43,508	4,060	9%	47,601
Volusia	16	52	47,215	3,972	8%	51,239
Brevard	5	72	57,483	3,510	6%	61,065
Sarasota	18	19	45,465	3,219	7%	48,703
St. Lucie	186	33	26,340	3,061	10%	29,434
Martin	38	29	17,561	2,864	14%	20,454
Lake	48	29	41,707	2,645	6%	44,381
Leon	12	81	37,380	2,448	6%	39,909
Alachua		13	49,608	2,173	4%	51,794
St. Johns	67	29	25,575	1,905	7%	27,509
Marion	118	17	29,450	1,642	5%	31,109
Clay	10	11	21,472	1,557	7%	23,040
Okaloosa	29	22	17,193	1,385	7%	18,600
Santa Rosa	1	9	15,938	1,379	8%	17,326
Bay	2	26	11,278	1,322	10%	12,626
Indian River	28	11	17,562	1,259	7%	18,832
Hendry	1	10	5,073	1,241	20%	6,324
Charlotte	8	12	15,169	1,158	7%	16,339
Hernando	3	4	12,403	909	7%	13,316
Desoto	7	10	5,250	886	14%	6,146
Putnam	2	6	8,083	775	9%	8,864
Suwannee		2	4,357	750	15%	5,109
Sumter	25	11	11,853	679	5%	12,543
Jackson	3	11	5,931	632	10%	6,574
Gadsden	1	15	6,521	615	9%	7,151
Monroe	38	2	7,380	611	8%	7,993
Hardee		1	2,700	607	18%	3,308
Columbia	3	6	7,032	589	8%	7,627
Walton		4	4,545	582	11%	5,131
Citrus	5	8	12,194	577	5%	12,779
Okeechobee	1	7	4,041	566	12%	4,614
Highlands	5	19	10,570	557	5%	11,146
Nassau	10	8	9,334	546	6%	9,888
Flagler	3	15	9,770	509	5%	10,294

COVID-19: All persons with tests reported

Data through Jul 12, 2020 verified as of Jul 13, 2020 at 09:25 AM

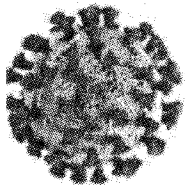
Data in this report are provisional and subject to change.

The table below includes persons with laboratory results that the Department of Health has received electronically or by mail/fax for Florida residents and non-Florida residents.

County	Awaiting testing	Inconclusive	Negative	Positive	Percent positive	Total tested
Hamilton	1	1	2,856	434	13%	3,291
Madison	1	6	2,655	367	12%	3,028
Unknown		18	3,315	318	9%	3,651
Liberty		2	2,345	276	11%	2,623
Levy		7	3,788	273	7%	4,068
Holmes	1	6	2,574	229	8%	2,809
Glades		2	576	209	27%	787
Washington	3	1	2,113	191	8%	2,305
Baker	7		2,985	175	6%	3,160
Calhoun	1	6	1,129	162	12%	1,297
Bradford	1	3	3,039	144	5%	3,186
Gilchrist		5	2,542	143	5%	2,690
Taylor		3	1,635	143	8%	1,781
Wakulla		3	2,829	137	5%	2,969
Dixie		1	1,568	117	7%	1,686
Union			2,549	114	4%	2,663
Gulf		4	2,300	98	4%	2,402
Jefferson		1	1,449	87	6%	1,537
Lafayette		2	644	56	8%	702
Franklin	1	1	1,652	44	3%	1,697
Total	1,995	3,039	2,357,139	282,435	11%	2,642,613

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

EXHIBIT "A"



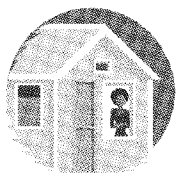
Know about COVID-19

- 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.



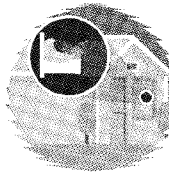
Protect yourself and others from COVID-19

- 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 alcohol-based 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

WHO Director-General's opening remarks at the media briefing on COVID-19 - 11 March 2020

11 March 2020

Good afternoon.

In the past two weeks, the number of cases of COVID-19 outside China has increased 13-fold, and the number of affected countries has tripled.

There are now more than 118,000 cases in 114 countries, and 4,291 people have lost their lives.

Thousands more are fighting for their lives in hospitals.

In the days and weeks ahead, we expect to see the number of cases, the number of deaths, and the number of affected countries climb even higher.

WHO has been assessing this outbreak around the clock and we are deeply concerned both by the alarming levels of spread and severity, and by the alarming levels of inaction.

We have therefore made the assessment that COVID-19 can be characterized as a pandemic.

Pandemic is not a word to use lightly or carelessly. It is a word that, if misused, can cause unreasonable fear, or unjustified acceptance that the fight is over, leading to unnecessary suffering and death.

Describing the situation as a pandemic does not change WHO's assessment of the threat posed by this virus. It doesn't change what WHO is doing, and it doesn't change what countries should do.

We have never before seen a pandemic sparked by a coronavirus. This is the first pandemic caused by a coronavirus.

And we have never before seen a pandemic that can be controlled, at the same time.

WHO has been in full response mode since we were notified of the first cases.

And we have called every day for countries to take urgent and aggressive action.

We have rung the alarm bell loud and clear.

===

As I said on Monday, just looking at the number of cases and the number of countries affected does not tell the full story.

Of the 118,000 cases reported globally in 114 countries, more than 90 percent of cases are in just four countries, and two of those – China and the Republic of Korea – have significantly declining epidemics.

81 countries have not reported any cases, and 57 countries have reported 10 cases or less.

We cannot say this loudly enough, or clearly enough, or often enough: all countries can still change the course of this pandemic.

If countries detect, test, treat, isolate, trace, and mobilize their people in the response, those with a handful of cases can prevent those cases becoming clusters, and those clusters becoming community transmission.

Even those countries with community transmission or large clusters can turn the tide on this virus.

Several countries have demonstrated that this virus can be suppressed and controlled.

The challenge for many countries who are now dealing with large clusters or community transmission is not whether they can do the same – it's whether they will.

Some countries are struggling with a lack of capacity.

Some countries are struggling with a lack of resources.

Some countries are struggling with a lack of resolve.

We are grateful for the measures being taken in Iran, Italy and the Republic of Korea to slow the virus and control their epidemics.

We know that these measures are taking a heavy toll on societies and economies, just as they did in China.

All countries must strike a fine balance between protecting health, minimizing economic and social disruption, and respecting human rights.

WHO's mandate is public health. But we're working with many partners across all sectors to mitigate the social and economic consequences of this pandemic.

This is not just a public health crisis, it is a crisis that will touch every sector – so every sector and every individual must be involved in the fight.

I have said from the beginning that countries must take a whole-of-government, whole-of-society approach, built around a comprehensive strategy to prevent infections, save lives and minimize impact.

Let me summarize it in four key areas.

First, prepare and be ready.

Second, detect, protect and treat.

Third, reduce transmission.

Fourth, innovate and learn.

I remind all countries that we are calling on you to activate and scale up your emergency response mechanisms;

Communicate with your people about the risks and how they can protect themselves – this is everybody's business;

Find, isolate, test and treat every case and trace every contact;

Ready your hospitals;

Protect and train your health workers.

And let's all look out for each other, because we need each other.

===

There's been so much attention on one word.

Let me give you some other words that matter much more, and that are much more actionable.

Prevention.

Preparedness.

Public health.

Political leadership.

And most of all, people.

We're in this together, to do the right things with calm and protect the citizens of the world. It's doable.

I thank you.

[Subscribe to the WHO newsletter ->](#)

EXHIBIT "I"



CITY OF
ST. AUGUSTINE
EST. 1565
NATION'S OLDEST CITY

March 31, 2020

Re: Implementation Plan to Accelerate a dense network of Real Time Temperature Monitoring in the City of St. Augustine to Aid in the COVID-19 Monitoring and Response

Tracy Upchurch, Mayor, City of St. Augustine
Leanna Freeman, Vice Mayor, City of St. Augustine
Nancy Sikes-Kline, Commissioner, City of St. Augustine
John Valdes, Commissioner, City of St. Augustine
Roxanne Horvath, Commissioner, City of St. Augustine

EXECUTIVE SUMMARY

The City of St. Augustine, in collaboration with Kinsa, Inc., is developing a pilot project to provide real-time temperature data by distributing an additional 600 thermometers to households in the city. This will enable public health officials to monitor, predict, and respond to aggregated changes in fever data with the presence of the COVID-19 pandemic in the city. The project is intended to be initiated by April 22.

Kinsa has created an internet-connected thermometer that allows it to anonymously collect and aggregate fever data. Kinsa has distributed over 1 million thermometers in homes across America today. With these real-time sensors, Kinsa has accurately predicted flu epidemics weeks in advance of the CDC's own surveillance tool. Just two weeks ago, Kinsa's data indicated an unusual rise in fevers in South Florida, even though it was not known to be a Covid-19 epicenter. Within days, testing showed that South Florida has become an epicenter.

The pilot project plan envisions the distribution of 600 thermometers to voluntary households that would maximize surveillance benefit. The project will prioritize households of first responders most likely in contact with the virus, large member households, and family households in underserved communities which might delay seeking care and treatment.

The data collected and analyzed will allow public health and government officials to identify temperature spikes and deploy testing, quarantine, and other health measures where most needed. The data will also facilitate target messaging to affected neighborhoods and the evaluation of the efficacy of orders aimed at controlling and combating the pandemic.

This project's sentinel monitoring network will not only provide immediate benefits, but will prepare the community for any future recurrence of this virus, which some health officials have predicted for later this year.

John Regan, P.E.
City Manager,
City of St. Augustine

Inder Singh
CEO & Founder, Kinsa
Former Executive Vice President,
Clinton Health Access Initiative

Nirav R. Shah, MD, MPH
Senior Scholar, Stanford University
Former Commissioner, NYS Dept of
Health

PLAN OVERVIEW

Dear Mayor and commissioners:

The authorship of this plan is the collaborative effort between myself and the individuals listed below:

Inder Singh

CEO & Founder, Kinsa Inc.

Former Executive Vice President, Clinton Health Access Initiative

Dr. Nirav Shah

Senior Scholar, Stanford University

Former Commissioner, NY State Department of Health

Additional background articles, Kinsa links and biography links are provided in the appendix. I would also like to thank Commissioner Nancy Sikes-Kline whose perseverance brought us together.

PROBLEM

With a shortage of tests and no early warning systems for where outbreaks are occurring in real time, it's difficult for public health officials to know how to respond to and triage cases of COVID-19. The current predictive tools have a long lag time in response and with the scarcity of COVID-19 test results we are unable to make predictive public health policy decisions. The purpose of predictive analytical methods is to identify trends so that there can be a rapid intervention of testing, isolation and containment. This is the basic principle of public health policy that has successfully reduced diseases throughout the world. A clear example of recent success is Vo, Italy, where the entire town's population was tested and rapid intervention was enacted, thus arresting COVID-19 spread.

PROJECT GOAL

The goal of our pilot project is to give our public health officials an additional tool to monitor and dramatically reduce illness spread from COVID-19, flu, cold and more by providing real time data to speed the public health policy cycle. The pilot project hinges on a technological platform developed by Kinsa that aggregates body temperature data. The City is looking to accelerate the statistical confidence of the tool via rapid deployment of 600 additional thermometers into voluntary households that will provide the maximum surveillance benefit for community monitoring. Between the 600 units, and the already deployed units from historical commercial sales, we are looking to have participation of 10% of City households to create a high statistical confidence monitoring network. It is anticipated that the City pilot project will be the densest temperature sentinel network to date. Besides protecting the health of our neighbors in the City of St. Augustine, the pilot results may lead to an evolution and change in the nation's public health monitoring programs.

The network will be used to develop an operational real-time monitoring system for public health officials, adding important data to existing COVID-19 responses and recovery. Importantly, it also provides a potential communication tool to aid in quick government decision making. It can then monitor the performance of public health policy decisions such as "social distancing" guidelines and mandates. Our pilot could provide the baseline information necessary for a nation wide approach that would allow government officials to better prevent, mitigate, and control the transmission of COVID-19 and other diseases.

The network will be immediately useful today and provide a dense sentinel monitoring network for a possible second wave of COVID-19 that may occur in the fall. This is a major additional benefit.

BACKGROUND

Kinsa has over 1 million smart thermometers in homes across America today -- over 90% of the market -- and with these real-time sensors is able to accurately predict how flu is spreading across the country. In February, Kinsa

modified this tool to identify anomalous spikes in fever which cannot be explained by seasonal flu trends -- and in many cases, this is the first and only signal of COVID-19 spreading in a community. A public website sharing this information was launched on March 18 at healthweather.us and profiled in the [NY Times](#) and other publications.

PROPOSAL

1. The City will work with Kinsa to **create a dashboard** for monitoring and response specific to our City for use by public health officials and first responders.
2. **Distribute 600 additional thermometers** to households in the City to achieve a level of surveillance resolution that will allow for an even more localized 'signal' of possible COVID-19 spread. The City-purchased thermometers will be distributed at cost (\$20 each) with Kinsa's in-kind support for dashboard development and back-end support.

This is an opportunity to make decisions with real data on whether our responses are having an impact within days instead of weeks or months. It uses the same principles of public health monitoring, but much more quickly. Speed is the key to limiting disease spread.

NETWORK DESIGN

The 600 units will be distributed to targeted households with the priority distribution as follows:

1. Larger households, where COVID-19 is likely to linger longer, leading to unwitting spread once social distancing regulations are relaxed.
2. Families in underserved communities, which typically seek care and treatment later, potentially spreading the virus before testing and treatment occur.
3. Families of first responders who are most likely to have contact with COVID-19 (note: this does not include distribution to clinicians for use in provider settings; Kinsa's thermometers and surveillance are designed for use at home).

DEPLOYMENT

What's important when distributing these thermometers is ensuring a high activation rate. Otherwise, we will not be able to increase the granularity of the data in the City. There needs to be an *opt-in* so that the people who get the thermometers, use and therefore automatically transmit the data via the app. An opt-in is by voluntary participation. It would be preferable to work with the St. Johns County School District to facilitate finding participants.

The City can do a public messaging campaign to find participants and screen callers using a checklist of preferred criteria. We can use our utility customer service representatives or other City phone banks to screen and select participants. Currently, there is low call load to City offices. In other words, we will use our current customer service infrastructure that has been idled down due to the drop in call and walk-in volume from the coronavirus pandemic.

The units can be delivered to the selected households by city employees following good hygiene practices for package delivery. Our employees know our city and our residents; we can distribute the units within a few days.

COMMUNICATION

Our communications team can use our social media and other traditional platforms to communicate to the public. Mr. Singh and Dr. Shah will also do their best to communicate the importance and innovative nature of the program to our community. Dr. Shah carries a large COVID-19 patient case load in the San Francisco Area and Mr. Singh is also busy working with public health officials to track and slow the coronavirus pandemic. Given their time demand, they will do their best to participate in a virtual City Commission meeting in the immediate future.

Dr. Shah, Mr. Singh and I hope our project leads to improving our public health policy and protecting the health of the City through community collaboration. Our City hopefully will also have an impact in the evolution of

technological approaches to public health at the national level.

Again, the three of us would like to thank Commissioner Nancy Sikes-Kline. Without her, this collaboration would not have occurred. If you have any questions, please do not hesitate to call me at (904) 669-1873.

Sincerely,



John Regan, P.E.
City Manager,
City of St. Augustine



Inder Singh
CEO & Founder, Kinsa
Former Executive Vice President,
Clinton Health Access Initiative



Nirav R. Shah, MD, MPH
Senior Scholar, Stanford University
Former Commissioner, NYS Dept of
Health

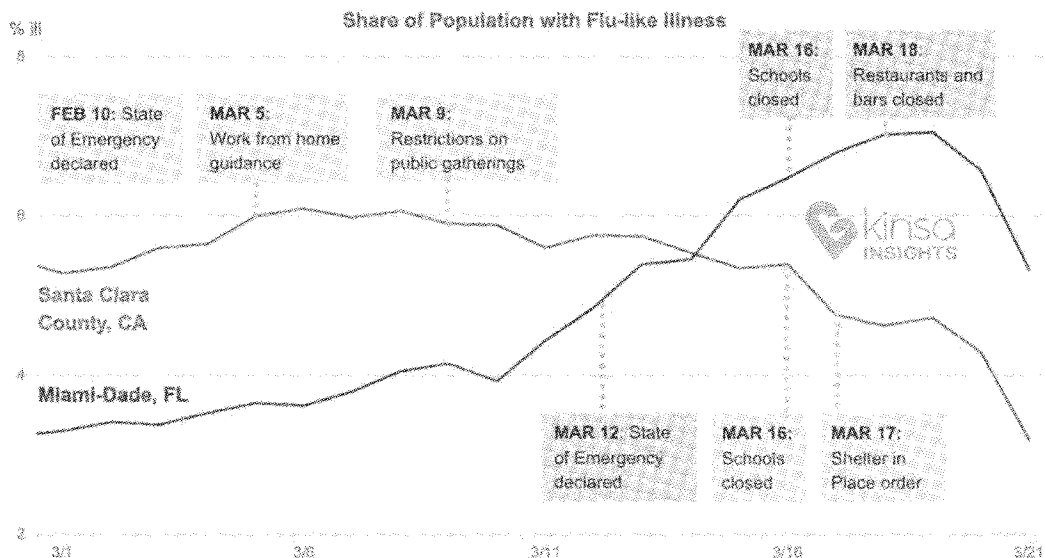
ADDITIONAL BACKGROUND

COVID-19 is spreading quickly throughout the United States. For the coming weeks we lack adequate lab-based testing capacity, personal protective equipment, and clinical staff to conduct the widespread testing seen in countries such as South Korea where the virus has been held in check. To contain the spread and efficiently target limited resources in the US, we need real-time tools that will help us predict where cases are being missed.

Data feeds from clinical locations such as emergency rooms don't help, as only a fraction of total cases show up in clinical care sites, and by then it's too late for containment. And as we've learned from China, most cases are spreading in the community because people don't know they are infected. Yet there is hope: since March 18th — as reported in the NY Times — real-time data from a network of over 1 million smart thermometers in homes has been identifying abnormal clusters of fever throughout the United States, consistent with COVID-19 in the community. Kinsa Health released this county-level data at <https://healthweather.us> to provide a tool to help stem the crisis.

HOW DOES IT WORK?

Over the past 7 years, Kinsa worked with leading scientists to create forecasting models that can accurately predict flu 20 weeks before a spike is seen in a community, using data from Kinsa's smart thermometer network. This compares to CDC models where high quality predictions extend only 3 weeks. Further, Kinsa models accurately predict flu patterns to the county level while CDC models only have granularity to the multi-state level. By taking actual, real-time levels of fever in a community from the smart thermometer network, and subtracting out the expected cases predicted by the forecasting model, Kinsa can see what's left behind — in many cases, clusters of COVID-19. Spikes in illness are represented in red in the map at the end of this memo.

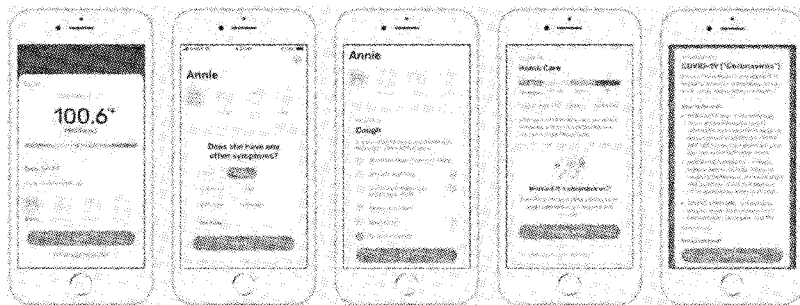


As shown in the figure above, this tracking system not only allows for hotspotting of COVID-19 in the community, but also helps evaluate the effectiveness of various public health responses in containing spread -- earlier interventions in Santa Clara correlate with a quicker "flattening of the curve."

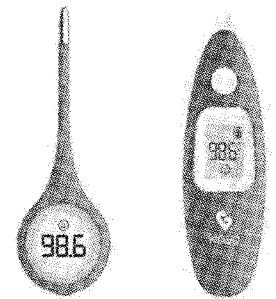
KINSA SMART THERMOMETERS AND APP

Kinsa smart thermometers are used together with a mobile application, which can be customized to direct users to appropriate local resources (e.g. clinical testing sites) or communicate targeted public health messages specific to their geographic location.

When paired with SARS-CoV-2 testing and other public health measures, such a system is a complete solution for outbreak surveillance and response. As additional Kinsa smart thermometers are distributed in a community, the ability to achieve higher fidelity signals and faster, more targeted response also increases.

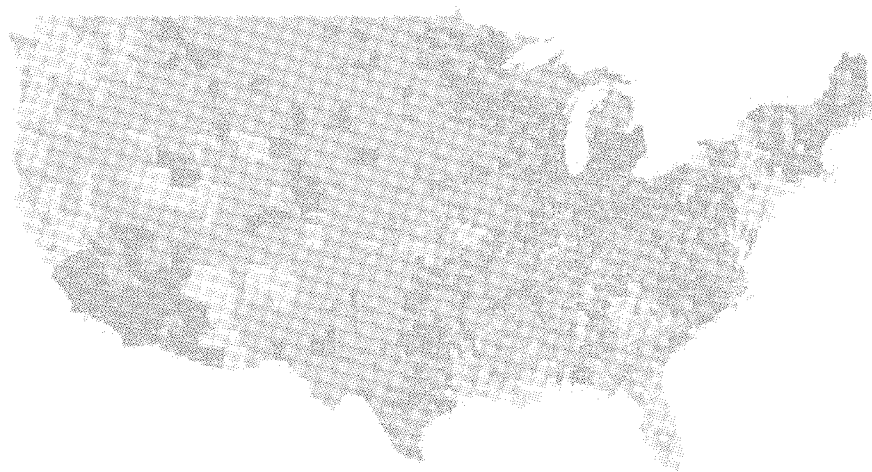


Kinsa Triage App



QuickCare and SmartEar

Thermometers The latest country-wide map is available at healthweather.us. The sample below is from March 8, 2020 before most testing began.



Kinsa temperature map of Smart Thermometers

Atypical Illness Levels



Appendix. Additional links to Background Information

Public Health Authors

Inder Singh

CEO & Founder, Kinsa Inc.,

Former Executive Vice President, Clinton Health Access Initiative

Inder Singh is the founder & CEO of Kinsa, which is using mobile technologies to create a real-time map of human health to track—and stop—the spread of communicable illness. Prior to founding Kinsa, Inder was the Executive Vice President of the Clinton Foundation's Health Access Initiative (CHAI). While at CHAI, Inder brokered deals between 70 governments and 22 pharmaceutical companies that resulted in nearly \$1.5 billion in cost savings from lower priced drugs and diagnostics for HIV/ AIDS, malaria, and TB. Inder holds five academic degrees, including three graduate degrees from Harvard and MIT.

Dr. Nirav Shah

Senior Scholar, Stanford University

Former commissioner, NY State Department of Health

Nirav R. Shah, MD, MPH, is Senior Scholar at Stanford University's School of Medicine. He is a global leader in digital health and innovation, improving care for older adults, patient safety and quality, and the strategies required to transition to high value, patient-centered care. Board-certified in Internal Medicine, Dr. Shah is a graduate of Harvard College and Yale School of Medicine, and is an elected member of the National Academy of Medicine. Dr. Shah serves as an independent director for public and private companies and foundations and helps set the nation's public health priorities as a member of the HHS Secretary's Advisory Committee (Healthy People 2030). Previously, he served as senior vice president and Chief Operating Officer for clinical operations for Kaiser Permanente in Southern California, and as Commissioner of the New York State Department of Health.

John Regan, P.E.

City Manager, City of St. Augustine

Former Senior Environmental Engineer, Gainesville Regional Utilities (GRU)

John Regan, P.E. is the City Manager and is a Professional Engineer. While at GRU, he was known for establishing monitoring networks that led to the protection of the public water supply from two contamination sites (\$.15 billion in remediation). He also managed the resolution of a water distribution system *Cryptosporidium Parvum* Outbreak. John is a graduate of the University of Florida in Environmental Engineering with a minor in Environmental Sciences. He has also been awarded the Order of Isabella the Catholic by Felipe VI, King of Spain.

Reading References

[New York Times Article Kinsa thermometers 3/18/20](#)

[Miami Herald Article 3/20/20 Florida compare to New York](#)

[The Power Of Purpose: How Kinsa Is Tackling Illness In Real ...](#)

[ABC News Article 3/26/20 St Augustine](#)

[Restrictions Are Slowing Coronavirus Infections ... - nytimes.com](#)

[Kinsa website](#)

EXHIBIT "K"

Denise May

From: John Regan
Sent: Tuesday, July 7, 2020 2:39 PM
To: Denise May
Subject: FW: Data for St. Johns Illness Levels Over the Last 2 Months

From: Simon Spencer <simon@kinsahealth.com>
Sent: Wednesday, June 17, 2020 8:09 PM
To: John Regan <jregan@citystaug.com>
Subject: Data for St. Johns Illness Levels Over the Last 2 Months

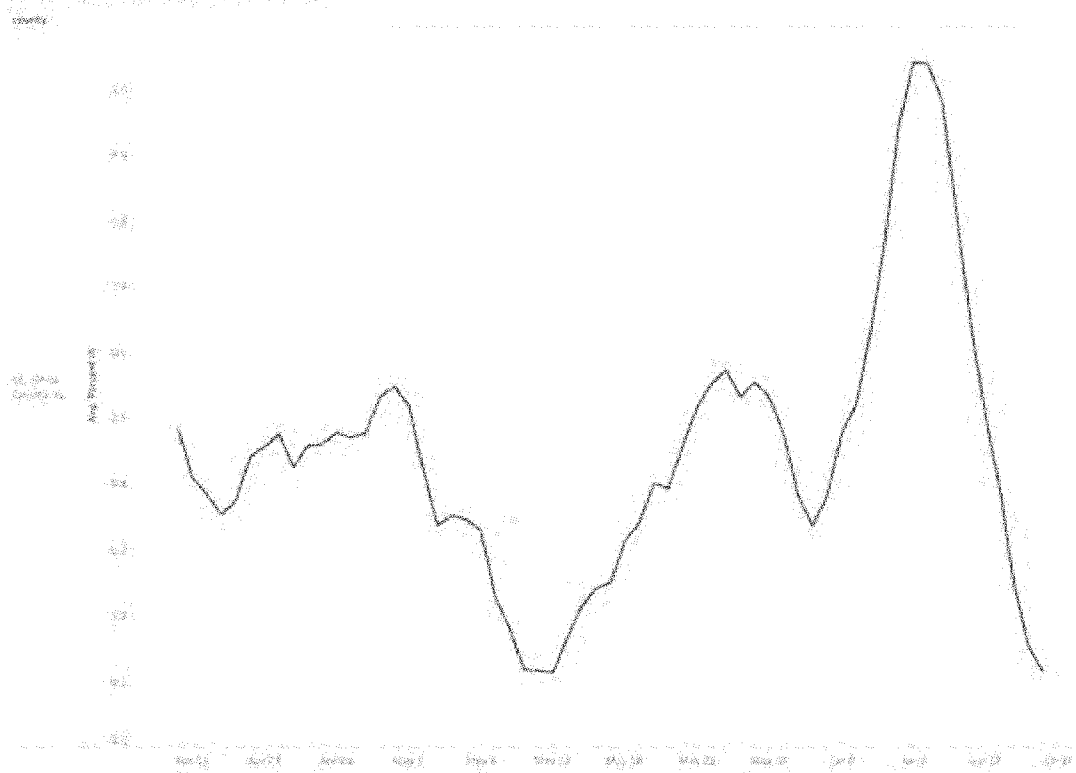
John,

Per our conversation this morning I've attached the illness chart from our data team showing the % ili for St. Johns county. The story here is that St. Johns for this period was showing some of the highest illness levels in the United States. Particularly between June 2nd and June 12th. If this trend follows any data from our other city and county data sets we'd expect to see a spike in COVID cases as well ~ 10-18 days trailing and it sounds like that's already starting to be the case.

Please note that illness levels for your county are still considerably low compared to March, but it's still concerning that there is a significant elevation of illness for this time. Do any of the peaks correlate with St. Augustine allowing business to reopen?

Simon

St. Johns County, FL (Apr 17 - June 16)



On Tue, Jun 16, 2020 at 11:14 AM Simon Spencer <simon@kinsahealth.com> wrote:

Hi John,

I hope you and your team are doing well. I wanted to follow up to make sure you saw my last email and if there was anything we could help with in the meantime.

I never got confirmation of you receiving your last shipment of 300 thermometers. Were you able to distribute those?

Simon

On Wed, Jun 10, 2020 at 11:20 AM Simon Spencer <simon@kinsahealth.com> wrote:

Hi John,

I just got alerted from our data science team that St. Johns county has seen one of the highest increases in illness in the last month.

This data is not represented on our map yet and is something our data team is identifying using other methods.

You might want to keep an eye out for increased illness and encourage healthy practices like facemasks, disinfecting, and social distancing.

Let me know if you have any other questions and stay safe!

Simon

--



Simon Spencer | Senior Marketing Manager
simon@kinsahealth.com | 971.533.5157
www.kinsahealth.com

--



Simon Spencer | Senior Marketing Manager
simon@kinsahealth.com | 971.533.5157
www.kinsahealth.com

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EXHIBIT "L"

EMERGENCY MEETING BEFORE THE
 CITY OF ST. AUGUSTINE CITY COMMISSION
 VIA COMMUNICATIONS MEDIA TECHNOLOGY (CMT)
 ST. AUGUSTINE, FLORIDA
 ON FRIDAY, JUNE 26, 2020
 RE: RESOLUTION 2020-22

* * * * *

BOARD MEMBERS PRESENT:

TRACY UPCHURCH, Mayor Commissioner
 NANCY SIKES-KLINE, Commissioner
 ROXANNE HORVATH, Commissioner
 JOHN VALDES, Commissioner

BOARD MEMBERS ABSENT:

LEANNA FREEMAN, Vice-Mayor

* * * * *

STAFF PRESENT:

ISABELLE C. LOPEZ, City Attorney
 JOHN REGAN, City Manager
 City Clerk

* * * * *

ST. AUGUSTINE COURT REPORTERS
 1510 N. Ponce de Leon Blvd., Suite A
 St. Augustine, FL 32084
 (904) 825-0570

1 P R O C E E D I N G S

2 MAYOR UPCHURCH: I would like to call the
3 special or emergency meeting of the City of
4 St. Augustine City Commission to order and ask the
5 clerk to please call the roll.

6 THE CLERK: Tracy Upchurch?

7 MAYOR UPCHURCH: Present.

8 THE CLERK: Leanna Freeman?

9 (Absent.)

10 THE CLERK: Nancy Sikes-Kline?

11 COMMISSIONER SIKES-KLINE: Here.

12 THE CLERK: Roxanne Horvath?

13 COMMISSIONER HORVATH: Here.

14 THE CLERK: John Valdes?

15 COMMISSIONER VALDES: Here.

16 MAYOR UPCHURCH: I believe that
17 Vice-Mayor Freeman had a previously scheduled
18 professional engagement that because of the short
19 notice of this, she's not able to rearrange, and so
20 she (unintelligible) not being with us for either
21 meeting today, Mr. Regan, is that correct? You're
22 muted. You are muted. I'm sure you're saying --
23 there you go.

24 MR. REGAN: Excuse me, Mayor. Good morning,
25 Mayor and Commissioners.

1 You are correct, Vice-Mayor Freeman did ask me
2 at one point in my presentation to read her
3 position statement.

4 MAYOR UPCHURCH: Perfect. Thank you.

5 With your permission, we will have the -- the
6 invocation and the Pledge of Allegiance now for
7 both our meetings. We have this and then the CRA,
8 and we'll finish this, then go to the second
9 meeting. And so, we will do it all together at
10 this point.

11 So, if you -- Madam Clerk, do we have someone
12 present to provide us with an invocation?

13 THE CLERK: We do not today.

14 MAYOR UPCHURCH: Okay. Well, I will do both
15 duties, if that's okay with you, and we'll get
16 started. So if you were so inclined to join me in
17 invocation.

18 Dear God, we thank you for this beautiful day.
19 We thank you for the privilege of serving our
20 community. We pray for your wisdom, your guidance.
21 We pray for open hearts and that you will be with
22 us today in our city during these deliberations.
23 In your name we pray, amen.

24 And if you would join me in the Pledge of
25 Allegiance. Do we have a flag, Madam Clerk?

1 THE CLERK: Yes, Mayor. Just a moment.

2 MAYOR UPCHURCH: Thank you.

3 THE CLERK: All right.

4 MAYOR UPCHURCH: Thank you.

5 (Pledge of Allegiance.)

6 MAYOR UPCHURCH: Thank you very much.

7 Okay. We have just one item on this special
8 meeting, and that is proposed -- okay.

9 (Unintelligible.) We have one substantive item on
10 the -- on the special meeting, and that is to
11 address the proposed --

12 MR. REGAN: (Unintelligible) going to use them
13 as part of my thing.

14 MAYOR UPCHURCH: Mr. Regan, your mic's on, if
15 that matters.

16 MS. LOPEZ: There are two resolutions. The
17 first one, as you mentioned, is more ministerial,
18 but it is to amend the emergency procedures for --

19 MAYOR UPCHURCH: And I'm trying --

20 MS. LOPEZ: -- public comment.

21 MAYOR UPCHURCH: Thank you. And I'm trying to
22 get there.

23 The only substantive matter we have is to
24 address the resolution concerning face coverings or
25 masks. But before that we have, as Ms. Lopez

1 stated, a ministerial resolution concerning how we
2 wish to take public comment today.

3 (Item 4 commenced as follows:)

4 MAYOR UPCHURCH: So, now what I would like to
5 do is to move to Mr. Regan to give us a general
6 introduction to Resolution 2020-22, then we will
7 pause and take public comment and then bring it
8 back to the commission. Mr. Regan.

9 MR. REGAN: Mayor Upchurch, thank you very
10 much. Again, good morning, commissioners.

11 What we have before us is what I am proposing
12 as a resolution. This is a resolution that will
13 mandate for mask usage when social distancing
14 cannot be adhered to, when you cannot maintain
15 social distancing. So you can be indoors in a
16 facility and be socially distanced and not be
17 masked, but much of our tourism industries are --
18 have a hard time with that.

19 There are a number of exceptions that have
20 been modeled on what had been recommended and what
21 other cities have done. They include persons under
22 the age of two, people observing social dent --
23 distance (unintelligible) the CDC guidelines,
24 persons who a face mask, a health condition
25 would -- causes impairment. People working in a

1 business or profession who do not have interactions
2 with other persons. People working in a business
3 or profession who maintain social distancing.
4 Persons working in a business or profession where
5 the use of a face covering prevents them from
6 performing the duties of the business such as a
7 musician. Persons exercising while maintaining
8 social distancing. People when you are eating and
9 drinking. Public safety, fire and other life
10 safety and health care personnel have their own
11 standards of PPE, and so they are exempted. And
12 hearing impaired can be exempted. And it does not
13 apply to any outdoor activity, but again we
14 encourage social distancing and use of a mask when
15 you cannot.

16 It is a -- ultimately the enforcement is a
17 civil infraction. If you pass it this morning, the
18 effective date would be one minute after midnight
19 tonight. So let me just give -- give me if you
20 would a few minutes to just walk you through how --
21 how we have arrived where I'm making this
22 recommendation to you.

23 Since the beginning of COVID, we and the city
24 commission have had a position that has been one of
25 strong encouragement. We have advocated for

1 guidelines. We have created programs to
2 (unintelligible). We have purchased masks and done
3 cost recovery. We actually sold out in about a
4 four- to five-day period. Everything about us has
5 been -- that's in the please just make -- make the
6 right decisions, educate yourself, make the right
7 decisions.

8 So, the key thing is that that has been going
9 for months, and I think we all know where we are
10 with regard to COVID, but I will just refresh that
11 at the beginning, we went into economic lockdown.
12 We flattened the curve. When we reopened, what was
13 expected to happen happened. We started to have
14 uptick of COVID.

15 It was twos and threes and hundreds at the
16 state level. But when we hit Phase 2, it was
17 almost like a light switch went off and the growth
18 at the state level went from hundreds to thousands
19 to consecutive days of 5000s. In St. Johns County
20 we went from twos and threes to -- and fives to 30s
21 and 50s consecutively.

22 So Kinsa is growing rapidly. And it's not
23 that you couldn't see it coming, it was what
24 everybody predicted, but the truth of the matter
25 is -- is that we actually could see it coming even

1 through some other data which we -- which was also
2 part of raising -- trying to work on everyone's
3 awareness and we've been doing that.

4 I will share with you that our Kinsa
5 thermometer program -- which we still have hundreds
6 of thermometers to continue to distribute, but we
7 have been able to build a dense network -- as early
8 as June 10th, Kinsa had sent me an e-mail that was
9 indicating that our percent illness was one of the
10 highest inflections, highest increases certainly in
11 the state, and then on June 17th actually had
12 written me an e-mail that said, "Per our
13 conversation this morning, I've attached the
14 illness chart from our data (unintelligible)
15 showing that the percent ill for St. Johns County,
16 the story here is that St. Johns for this period,"
17 the 2nd through the 12th, "was showing some of the
18 highest illness levels in the United States
19 particularly between June 2nd and June 12th. If
20 this trend continues, any data from our other city
21 and county data sets we'd expect to see a spike in
22 COVID cases 10 to 18 days trailing." Guess what?
23 It hit right on the money.

24 So, I think we all know that that
25 (unintelligible) across the country. And what

1 people -- the number one response, the most
2 immediate issue that has become highly politicized
3 is the use of face masks. Those become a red
4 versus blue matter. But it is the single largest
5 element that people are talking about that needs to
6 be done. So let me take us back to where we are
7 and divorce ourselves for a minute from the
8 politics and talk about what the health experts are
9 saying. And this is my executive summary to keep
10 it brief.

11 First, the CDC has been consistent on face use
12 policy and as of yesterday, Dr. Fauci had said in
13 the -- in a conference in Sacramonty (sic) --
14 Sacramento, California everybody should wear a
15 face mask when out in public. So, Dr. Fauci's been
16 pretty consistent.

17 More importantly, our Surgeon General, the
18 state Surgeon General for Florida, as reported on
19 the 22nd of June stated, "All individuals in
20 Florida should wear face mask coverings in any
21 setting where social distancing is not possible
22 unless any of the following is applicable," and he
23 goes through a lot of the conditions that are
24 embedded in our resolution. That -- his statement
25 applies both (unintelligible).

1 Secondly, the Florida (unintelligible), which
2 is the state's largest doctors association of
3 25,000 doctors, has passed a position on June 19th
4 urging local governments to issue orders to mandate
5 mask wearing.

6 Thirdly, I had an extensive conversation with
7 Dr. Dudley Baringer who's been a family
8 practitioner in the community for decades. He also
9 brought forward that there has been a position
10 taken by the Florida Academy of Family Physicians
11 also urging masks.

12 What happened, as predicted by Kinsa, and the
13 train came into the station right on time, was that
14 members of the health care industry reached out to
15 me personally to start telling me what was
16 happening in their clinics, in their walk-in
17 clinics, and the explosive growth of patients and
18 all the degrees of difficulties.

19 So, one, P.J. Jones, a physician assistant at
20 Flagler Care Center, formerly known as Healing Arts
21 Urgent Care, has laid down a position both with the
22 county, with me, with the city, that we should
23 mandate indoor mask policy. There are many other
24 things that he has to say, but we'll leave that for
25 another time.

1 Next, in my conversations with Jason Barrett,
2 the CEO of Flagler Health Care, hopefully I got his
3 title right, when we talked about this earlier in
4 the week, he was highly supportive of mandatory
5 mask policy. I'm going to say that what he said
6 was, wake up and look at yourself. You're
7 requiring masks mandatory in city hall it -- when
8 you can't meet social distancing. We're doing it
9 in the hospital. Why are you doing that? And the
10 answer is because it makes a difference and slows
11 the rate of transmission.

12 I also had a conversation with Dr. Dawn
13 Allicock, our public health director, who also
14 (unintelligible) indoor mask policy.
15 (Unintelligible) but certainly their opinion
16 matters, and I am representing that they're
17 supportive.

18 Now, here's the big rub about masks and these
19 policies and what everybody is concerned
20 everywhere, and that is is can it be enforced? I
21 need to tell you that Chief Barry Fox is very very
22 concerned about this and worried about the position
23 of having some type of mandatory standard in an
24 indoor setting. So let that be known, that the
25 Chief has -- has lots to think about and is

1 concerned. But I'm going to walk you through
2 something that I think is important about the
3 culture of St. Johns County, St. Augustine, and the
4 culture of the nation and also the theory of police
5 science.

6 So one of the things that -- just think about
7 any type of law. People are self-policing when
8 government passes a law. We all drive cars. How
9 many do we stop for infractions? A very very small
10 amount. The truth is that if people would just
11 blow off the laws, society wouldn't work because
12 our police force simply couldn't catch all the
13 violations.

14 I had a lawyer, formerly a police officer,
15 write me and he said, Ask Chief Fox if without
16 voluntary compliance with laws, could his
17 department catch all the violations? The answer is
18 no. If an order is given to protect public health,
19 most people will comply. A few won't. Hard heads
20 aren't new.

21 So, let's go ahead and back up and say, is --
22 is the psyche changing that can be more accepting
23 of a policy that affects a material difference in
24 the use of masks which makes a material difference
25 in changing the rate of transmission which

1 (unintelligible) our (unintelligible).

2 CDC released a poll that nearly nine in ten
3 Americans who left their home in the last week have
4 worn a face mask or covering as compared to only
5 11 percent that said they did not. This is a
6 20 percent jump from the last time the poll was
7 taken.

8 Fox News, which I'm going to call a different
9 end of spectrum of media, released a poll six days
10 ago, and in the Fox poll, they found that
11 80 percent of the nation have a favorable view of
12 mask wearers. But here's what I think is very
13 interesting.

14 The -- the city clerk is going to give you a
15 summation of e-mail, and we're also, based on what
16 you've just asked, going to identify a position
17 with a name. Then I'll give you the executive
18 summary. She's going to go through 335 e-mails.
19 Of that, 81 percent of the people that took the
20 time to sent you an e-mail support a mask policy, a
21 mandated mask policy indoors. 19 percent did not.

22 So, I think it's interesting that the -- this
23 is really -- we've teed up the most controversial
24 topic in the nation, collected some of the most
25 important quasi polling data that you could create

1 by the nature by which we're taking public input
2 which is changing the statistical validity of how
3 we can gauge the community and it jives exactly
4 with the national trend.

5 Many cities have been on the move and many
6 counties have been on the move on this going way
7 back even to April. There are 14 cities at last
8 count, probably more, that have taken some type of
9 position on this and ten of them are a mandatory
10 approach, four are not. I can count at least ten
11 counties that have taken a position. It's probably
12 higher. And so, just so you know, this is not a
13 topic that people are not addressing.

14 So one of the things that I've received some
15 criticism about is, well, what about outdoors? Why
16 is this only indoors? I'm going to say this: If I
17 could wave a magic wand, I would do something about
18 outdoors. But I also have to be pragmatic.

19 And the issue here is that the health data and
20 the risk factors and risk assessment that have been
21 associated to outdoors have been highly downgraded
22 as compared to the indoor risk assessment. Not
23 that outdoor does not have risk, but it is not even
24 half of what the indoor risk assessment is. So
25 what the -- what is before you today is a

1 resolution that addresses the highest risk factor
2 that is associated with this issue.

3 And one of the things that I think I also want
4 to bring you about the convergence of thought in
5 our community, I've had a few restaurateurs that
6 have talked to me. One of them is going to speak
7 to you in a few minutes, Tom Dolan from Meehan's.
8 I know that he's waiting in line. And last night
9 he called me. He closed again. And he's going to
10 tell you why and how all this matters, but he's
11 closed again.

12 Tom -- Mr. Dolan has been one of our biggest
13 supporters of some form of policy. He's -- he's
14 endorsed everything that we've done. He's
15 advocated for a -- mandates. And last night he
16 told me that every level of government has failed
17 him by failing to take a position about the most
18 significant public health decision that can be
19 made. And by doing that, not only have we
20 (unintelligible). And he said, John, I've also
21 supported (unintelligible), but I just need to tell
22 you that.

23 The other thing that happened last night -- so
24 that's -- let's call that one end of a spectrum of
25 a restaurateur who has always been pro standards.

1 I'm going to read another text that came in to me
2 from Mike Hyatt, the owner of Blackfly and Collage.
3 And maybe you remember, maybe you don't, but Mike
4 and his partners were highly vocal against the
5 decisions that we had made early to deal with COVID
6 and definitely against any policies of mandated
7 regulation.

8 Last night I got a note from him, and it
9 reads, "Hi, John. I would like to express my
10 support for a mandatory face mask policy. At heart
11 I am opposed to face masks. I don't like to wear
12 them and our staff hates them. But with the recent
13 spike in virus cases, especially with many of those
14 directly traced to the reopening of bars, I think
15 it might be a good idea, at least on a short-term
16 basis. After my initial vocal opposition to the
17 city's decision to close bars and restaurants, made
18 moot a few days later by Governor DeSantis, I think
19 you, Mayor Upchurch, Chief Fox, and COSA as a whole
20 have done a good job handling this. Thank you for
21 taking the time to read this. Mike Hyatt, Collage
22 Restaurant and Blackfly."

23 So, you know, people have different views
24 about do masks work. There's -- there's an
25 efficiency and efficacy in both directions about

1 masks. I'm not going to get into that.

2 I will tell you, though, if you ask me in the
3 questions, answers and discussion, I do have
4 Dr. Allicock's position on this which was outlined
5 a month ago at a county commission meeting. And in
6 that -- in that -- her statement, it basically ends
7 with that -- the expression we're hearing
8 everywhere, "My cloths -- my cloth face
9 (unintelligible) your cloth face covering protects
10 me. It works both ways. There's an efficiency at
11 all levels."

12 I will tell you that I did research the CDC,
13 and within any day, they are coming out with a new
14 position statement about the efficiency and the
15 efficacy to -- to stop transmission and to prevent
16 exposure because people debate that all the time,
17 okay? But I don't really want to go into that.

18 I'm going to end with what Leanna had asked --
19 I'm sorry, Vice-Mayor Freeman had asked me to read
20 her position statement to you.

21 MAYOR UPCHURCH: John, I'm going to ask you to
22 save that until we come -- till we have heard
23 public comment and bring it back to the commission.

24 MR. REGAN: Sure. I'll read it at the right
25 moment.

1 And then also I'm going to say this, is that
2 working with the health care industry, I have put
3 together other action steps that we can do. This
4 is the single most important action step, and we
5 need to keep moving on other action steps that are
6 very involved with St. Johns County and the Health
7 Department.

8 So while we're talking about maskings, I don't
9 think that this is where this needs to end, but I
10 don't want to belabor this meeting on this single
11 most important topic. And with that,
12 Mayor Upchurch, I would like to return the floor
13 back to you.

14 MAYOR UPCHURCH: Thank you. Mr. Regan, let me
15 just clarify two things that you stated.

16 When you were describing your e-mails from
17 Kinsa and you said that St. Johns County had the
18 highest rate of -- of fever, I forget exactly how
19 you said that, in the nation, I think to clarify
20 that, amongst communities that Kinsa monitors.

21 MR. REGAN: That -- excellent point,
22 Mayor Upchurch. And the -- and they have more
23 (unintelligible) on us, because we have
24 (unintelligible) function of the -- of the program
25 that you have authorized.

1 MAYOR UPCHURCH: Okay. And then you also said
2 that -- that in your research, there were, you
3 know, approximately 14 cities and counties that
4 have done something similar. I think you wanted to
5 clarify that that's in Florida alone, not
6 nationwide.

7 MR. REGAN: Thank you, Mayor. So, we -- we
8 have information I can provide you on 14 different
9 cities, and there are 10 different counties that I
10 can count, maybe more.

11 MAYOR UPCHURCH: In Florida.

12 MR. REGAN: In Florida, thank you.

13 MAYOR UPCHURCH: Thank you.

14 Okay. Are there any other questions of
15 Mr. Regan right now? I would like to go to public
16 comment, and then we can bring it back and discuss
17 it.

18 COMMISSIONER SIKES-KLINE: Yes. My question
19 to you is, Mayor, you -- you -- city manager
20 mentioned Tom Dolan has a statement to make and
21 that he's on the line, and I would like to extend
22 the courtesy to him to have additional time to
23 speak since he's being cited as -- as an expert
24 (unintelligible).

25 MAYOR UPCHURCH: Okay. Thank you. Thank you.

1 So, commissioners, with your permission, what
2 I'd like to do now is to begin the public comment
3 section of this special meeting, go to the city
4 clerk in the Alcazar Room, and begin there.

5 So, madam clerk, are -- is there anybody
6 present in the Alcazar Room that wishes to address
7 the city commission during the public comment
8 meeting of this special -- public comment section
9 of this special meeting?

10 THE CLERK: Yes, Mayor, I'll have them come
11 up.

12 MAYOR UPCHURCH: Thank you.

13 (Public comments given.)

14 THE CLERK: Mayor, I believe that is the last
15 of our public comments.

16 MAYOR UPCHURCH: Thank you, very much. Madam
17 clerk, I'd now like to go to the public comment
18 phone line, please. Do we have anybody there that
19 wishes to speak?

20 THE CLERK: Yes, Mayor, I have a few people on
21 hold.

22 MAYOR UPCHURCH: Thank you, very much.

23 (PHONE public comments given.)

24 MAYOR UPCHURCH: Okay. Madam clerk? Madam
25 clerk?

1 THE CLERK: Yes.

2 MAYOR UPCHURCH: You need to hold all
3 telephone calls at this point, please.

4 THE CLERK: Okay.

5 MAYOR UPCHURCH: Okay. Commissioners, we have
6 lost control of this meeting through no fault of
7 ours. (Unintelligible) ability to monitor the
8 (unintelligible) we have no ability to prohibit
9 someone from calling in multiple times. We do not
10 know how many people are waiting. We have no
11 ability to manage our meeting.

12 We absolutely accept our constitutional right
13 or the constitutional right of the people of
14 Florida to participate in their meetings. That's
15 sacrosanct to us as Floridians. But we have been
16 trapped in a situation here through no fault of
17 ours. Everyone -- everyone, the callers, all of us
18 are trying to do the right thing, but -- but we're
19 in a very very difficult situation.

20 My recommendation to you is that we adjourn
21 the emergency meeting to reconvene in person in the
22 city commission room Monday morning. We have
23 already approved social distancing. We would then
24 continue with in-person comment.

25 But in this current video virtual meeting, I

1 don't know of any other way to bring this to a
2 resolution. And you will simply as individuals
3 have to make a decision. I assume we would have a
4 quorum, but I do not know that.

5 But we have unfortunately -- and please
6 forgive me anything I have done to inadvertently
7 push us down this road, but -- but we're on -- on a
8 feedback loop here we can't break and this is the
9 only way I know to break it. So --

10 MS. LOPEZ: I -- if I may, Mayor, just from a
11 legal perspective, you've got a couple of options.

12 One, under Chapter 286.0114, which is the
13 Florida law that requires public comment, there is
14 an exception to that and it states (unintelligible)
15 public (unintelligible) do not apply to an official
16 act that must be taken to deal with an emergency
17 situation affecting the public health, welfare, or
18 safety if compliance with the requirements would
19 cause an unreasonable delay in the ability of the
20 board or commission to act. So that's one option
21 if you feel that the circumstances warrant it under
22 this exception to the public comment period.

23 The other, which is sort of unspoken but
24 perhaps we should have mentioned it at the
25 beginning of the meeting, is as you know under our

1 charter and under state statute, Mr. Regan has
2 complete authority to issue administrative orders,
3 which he has already during the COVID emergency,
4 without the city commission's input.

5 I believe his intent was pure and good, was
6 this desire to phrase this in terms of a
7 resolution, to get input from the commission and
8 the community before he issued his administrative
9 order. But he can certainly do so without that in
10 terms of legally. Now, I don't know where you-all
11 stand in terms of pragmatic politics, but I just
12 wanted those two aspects to be out there for you to
13 consider.

14 MAYOR UPCHURCH: Okay. Thank you.

15 So we have three options, and nobody has made
16 a motion yet, but I would open to the rest of the
17 commission what your pleasure is.

18 COMMISSIONER SIKES-KLINE: Well, I -- I think
19 we should proceed, and certainly I think we need to
20 make the decision today. I think that -- I -- I
21 guess I would like to know, what is the difference
22 between our meeting Monday and our meeting today as
23 far as taking public input?

24 MAYOR UPCHURCH: My rationale --

25 COMMISSIONER SIKES-KLINE: (Unintelligible)

1 need to work well then.

2 MAYOR UPCHURCH: My rationale would be that we
3 would revert to our traditional form of
4 (unintelligible). But I'm afraid that this is
5 divulged, and I don't mean any dis -- well, I won't
6 go there. Yes, in-person public comment.

7 COMMISSIONER SIKES-KLINE: Okay. So -- okay.
8 So you mean commissioners in -- sitting in the
9 table and that sort of thing? Oh, okay. Okay.
10 Okay. Okay. Well, so I think the Governor -- the
11 Governor just extended that order, didn't he,
12 Ms. City Attorney?

13 MS. LOPEZ: Yes. Yes, he did, correct.

14 So you have the option of doing CMT, which is
15 communication technology virtual meetings, all the
16 way until the end of July. So you could continue
17 to do CMT. You are not required to.

18 I think what -- if I'm understanding the Mayor
19 correctly, his suggestion is because this is
20 becoming difficult to manage, reconvene on Monday,
21 essentially recess today's meeting, reconvene on
22 Monday, and do it in the traditional way. You only
23 get public comment if you show up in person and
24 speak into the microphone with all the
25 commissioners present.

1 COMMISSIONER SIKES-KLINE: Thank you. And
2 since this is an emergency meeting, I think that
3 it's -- well, it's been called, we have all agreed
4 to it, I think it is an emergency.

5 I don't want to extend the emergency over the
6 weekend on this -- the report from the city manager
7 this morning was very concerning to me from the
8 information from Kinsa. This is -- we have
9 businesses appealing to us.

10 I don't know if you've seen -- heard the same
11 requests. I've talked to people in person. I've
12 gotten e-mails. I've gotten all kinds of contact
13 from the business community asking for this. So --
14 which is kind of unusual.

15 But I do think it's an emergency and I think
16 that we should proceed as if it is an emergency.
17 We're going to have to learn how to work with these
18 technical challenges. (Unintelligible) I think we
19 should make (unintelligible).

20 MAYOR UPCHURCH: Well, and I appreciate that,
21 but we have worked very very hard. We have taken
22 two hours of public comment. That does not count
23 the 335 e-mail -- now we're not reading those,
24 we've addressed that issue. Those will be
25 summarized by the city clerk.

1 But we have veered so far from the traditional
2 understanding of how you conduct a public meeting
3 that I'm exceedingly concerned. We have also
4 approved a policy and a plan for how we're going to
5 reconvene in public. We're not going to sit at the
6 traditional meeting table. And so we have -- we
7 are following every guideline that this commission
8 has approved.

9 Commissioner Horvath, I've seen you wanting to
10 speak here for a while.

11 COMMISSIONER HORVATH: Yes. Well, I also feel
12 the emergency aspect of this. I don't want to
13 leave it until Monday to deal with this. I think
14 the weekend, we're going to get a lot of traffic
15 downtown, as every weekend, and I think that
16 speaking to those e-mails, summarizing them could
17 also mean that the clerk takes the number of yeas
18 and nays and just (unintelligible) those. So I
19 don't think we have to hear a person's name
20 attached with a ye and a nay --

21 MAYOR UPCHURCH: Correct.

22 COMMISSIONER HORVATH: -- to shorten it. So I
23 think we've already gone two hours into this. I
24 would prefer to try to finish the telephone
25 conversations today and get a ye and a nay total

1 on our e-mails and make a decision.

2 MAYOR UPCHURCH: Thank you.

3 Commissioner Valdes?

4 COMMISSIONER VALDES: I agree with Roxanne and
5 I think we should continue.

6 I appreciate what you're saying, Mayor, but I
7 also appreciate the urgency of this. And it's a
8 shame we can't put a (unintelligible) how long we
9 can take phone calls, which I understand we can't
10 do, but I think we should proceed.

11 MAYOR UPCHURCH: Okay. Thank you.

12 MR. REGAN: Mayor Upchurch?

13 MAYOR UPCHURCH: Yes.

14 MR. REGAN: Mayor Upchurch, so let me just
15 share with you what has come in to me.

16 So, it's not up on the COVID dashboard yet,
17 but there's -- today's announcement is just a few
18 short of 9,000 that just came in. I don't know any
19 numbers yet for St. Johns County.

20 I also have on -- from a very reliable source
21 that I haven't verified yet, but there's been
22 effective immediately the Department of Business
23 and Professional Regulation on-premises consumption
24 of alcohol at bars statewide.

25 You've had two hours of public comment. I've

1 already summarized the yeas and nays for you. And
2 the attorney just said that you can just stop now
3 and make a motion. I -- I'm -- so I guess what I'm
4 saying is you really could just stop and make a
5 decision --

6 MAYOR UPCHURCH: Okay. So --

7 MR. REGAN: -- if I understand the city
8 attorney.

9 MAYOR UPCHURCH: What the city attorney has
10 suggested, she'll -- she'll correct me if I
11 misunderstood, is one is we could declare -- we
12 could find that this is an emergency and therefore
13 proceed without any further public comment. Is
14 that correct, Ms. Lopez?

15 MS. LOPEZ: Yes, sir. That is under
16 286.0114(3)(a).

17 MAYOR UPCHURCH: Or we could authorize
18 Mr. Regan in his capacity as city manager under the
19 authority he has to respond to the situation in his
20 best judgment.

21 MS. LOPEZ: Correct. Through an
22 administrative order, as he has already.

23 MAYOR UPCHURCH: Okay. I'm going to make a
24 motion that based upon the current COVID
25 (unintelligible) which we have (unintelligible)

1 represent a dramatic, almost a doubling of -- of
2 existing COVID cases, that the commission has
3 already received over two hours of public comment
4 in addition to I believe in excess of 300 e-mails
5 which have been reviewed by staff, and that we find
6 that it is an emergency, and using the provision
7 cited by the city attorney, that we adopt the
8 resolution without further public comment.

9 COMMISSIONER SIKES-KLINE: I'll second.

10 MAYOR UPCHURCH: Commissioners, you have a
11 motion and a second. Is there any further
12 discussion?

13 MR. REGAN: Mr. Mayor?

14 MAYOR UPCHURCH: Yes.

15 MR. REGAN: Would you like to hear
16 Commissioner Freeman's or is it really not
17 significant at the moment? Vice-Mayor Freeman's
18 (unintelligible).

19 MAYOR UPCHURCH: I think as a courtesy to her,
20 it is appropriate, yes.

21 MR. REGAN: Oh, man.

22 COMMISSIONER SIKES-KLINE: Take your time.

23 COMMISSIONER HORVATH: Mr. Regan, I have her
24 e-mail.

25 MR. REGAN: I'm sorry. I've been moving

1 different papers around. Could -- if you don't
2 mind, could you read it?

3 COMMISSIONER HORVATH: Absolutely. Yes.

4 It says "As we discussed, I have a court
5 evidentiary hearing tomorrow morning that I have
6 been waiting to participate in since June 2019. My
7 hearing conflicts with both city meetings that were
8 scheduled knowing my unavailability. I understand
9 the difficulty in coordinating all participants and
10 ask that you read this in my absence. I have heard
11 from so many individuals and business owners on the
12 issue of face masks that I would like to share
13 their feedback.

14 There have been some who have expressed their
15 disagreement with making masks mandatory as they
16 see it as a civil rights violation and/or having a
17 potential negative impact on their businesses.
18 However, with the business owners, the majority
19 have asked that we take a leadership in providing
20 them with any (unintelligible) of safety against
21 the possibility of having to shut down in the
22 future.

23 Most of the business owners are relying on
24 both our state and federal Attorney Generals and
25 see masks as decreasing the risk of transmission of

1 COVID-19 and posing a risk of closures to their
2 fragile businesses. Many business owners are
3 speaking out by writing the city on social media,
4 but I have also found a handful who want the
5 (unintelligible) ask but do not wish to become part
6 of the political debate.

7 I have found that the number of individuals
8 requesting mandatory masks is also far greater than
9 those who do not believe it to be in the best
10 interest of our community. It will be interesting
11 for the commission to see if the public hearing
12 reveals the same levels of support that I have
13 encountered.

14 I support any effort to prevent future
15 shutdowns and to secure the health of our residents
16 and visitors. Combined with common sense details,
17 such as exceptions that we see in other cities, I
18 believe we can impact the spread of the virus in
19 St. Augustine. I trust staff and my fellow
20 commissioners will make the best choice in my
21 absence and I thank you all for your hard work.
22 Sincerely, Vice-Mayor Leanna Freeman."

23 MAYOR UPCHURCH: Thank you, very much.

24 So, commissioners, we have a motion and a
25 second. You have heard from Commissioner Freeman

1 who's not directly speaking to the motion but more
2 generally to the issue. Is there any further
3 discussion?

4 COMMISSIONER SIKES-KLINE: I just wanted to
5 add one thing. We had one caller come in -- come
6 in and say that shields -- asked a question about
7 shields, why not have shields, and I would just
8 note that our pro -- our resolution does mention
9 face -- the definition of face coverings, which
10 does include shields.

11 And further I would just make one comment
12 about this in general. I am in favor and I will
13 vote positively, but I also want to stress that
14 face coverings (unintelligible) a larger strategy,
15 it is not the only strategy, and we have to remind
16 ourselves that hand washing and social distancing
17 are just as important; that while we focus on
18 face masks, we also have to remind ourselves and
19 our family members, loved ones, that the way to
20 reduce the spread of COVID-19 is going to be
21 working with all of these together. Thank you.

22 MAYOR UPCHURCH: I -- I appreciate your
23 comments.

24 The only other thing I would like to add is,
25 we are one municipality in St. Johns County. Many

1 many of our speakers are not city residents. There
2 is -- this is -- we understand that there is a
3 confusion about city boundaries, there's -- there's
4 confusion about a lot of governmental niceties
5 here.

6 I hope that the people that are the strong
7 advocates will also take their concerns to the
8 City of St. Augustine Beach and will redouble their
9 efforts with the county commissioners.

10 Commissioner Valdes?

11 COMMISSIONER VALDES: I'd like to follow up on
12 what Commissioner Sikes-Kline was saying. Masks
13 are only part of the ability for us to slow the
14 spread of this virus.

15 I know the concern is I think very soon we'll
16 be talking about extending this to
17 St. George Street and other streets where social
18 distancing is virtually impossible because it just
19 is because of the density, low air flow. I mean,
20 it is a COVID paradise down there when it's
21 crowded.

22 And this does not address that. I wish it
23 did. But it's a good start and I think as time
24 goes on, we're going to be -- we're going to be
25 probably coming back and discussing that.

1 MAYOR UPCHURCH: Thank you, very much.

2 Ms. Lopez?

3 MS. LOPEZ: Yes. Just as I mentioned earlier,
4 this was intended, the resolution, was to frame the
5 city commission's directions to Mr. Regan.

6 Under our charter, the actual admin
7 (unintelligible) the conditions change, he would be
8 able to go beyond that. And I don't know that we
9 made that very clear, but that was the intent.

10 The resolution was to frame the general
11 consensus from the commission, but of course
12 pursuant to our charter and state statute through
13 emergency orders issued that do have the force of
14 law are issued by Mr. Regan and he intends to sign
15 one to conform with today's resolution. And if --
16 if things change, and as we know it's been pretty
17 dynamic with -- with COVID cases and the exposure
18 rates, he certainly has that authority under state
19 statute and under our charter to follow up with
20 additional administrative orders.

21 COMMISSIONER VALDES: That being said, is
22 there any interest from this commission about
23 expanding the directive to Mr. Regan to extend it
24 to not just be the interior of buildings, but also
25 to the exterior?

1 COMMISSIONER HORVATH: I would on certain
2 locations like St. George Street where we have no
3 social distancing on the weekends and when it's
4 crowded.

5 MAYOR UPCHURCH: I'm not prepared to do that
6 today. It's -- it's a -- it's a concept I have not
7 considered and I think we can address that over the
8 next several days.

9 COMMISSIONER SIKES-KLINE: I have to agree
10 with the Mayor. I would like to -- time to think a
11 little bit more about the practicality of that and
12 just, yes, but definitely worth considering. Thank
13 you for bringing that up. And if it -- I can share
14 that the city manager, if (unintelligible) it's
15 needed, he will act. So...

16 MAYOR UPCHURCH: Thank you. Commission --
17 yes, Mr. Regan?

18 MR. REGAN: Mayor Upchurch, thank you.

19 Before you vote, I just want just
20 (unintelligible) very clear. The -- the nature of
21 the emergency orders and the trust that you have
22 placed in me, I hold dear and I'm very careful and
23 very judicious of doing any type of unilateral
24 action with the powers that you have vested to me.

25 And that's why I wanted to convene this

1 meeting, to make sure that we're all on board,
2 we're all together, that I am executing the policy
3 and the will of the city commission with the best
4 advice that I can give you. I hold that
5 sancrosanct -- sancrosact (sic).

6 So, I just wanted you and the public to know
7 that, you know, I have -- in my role I have to be
8 extremely judicious of doing anything outside the
9 policy of the city commission.

10 So I apologize for how this meeting has become
11 so difficult and -- and we'll -- we'll regroup on
12 that, those issues. So I just -- you know, bear
13 with us. And also you may want to think about how
14 you feel about the CRA meeting after your vote.

15 MAYOR UPCHURCH: Okay. Mr. Regan, we -- there
16 are no apologies necessary. We're all very much
17 trying to do the very best we can under very
18 difficult circumstances and, you know, we live and
19 learn and we'll march forward.

20 Okay. Any further discussion on the motion?

21 (None.)

22 MAYOR UPCHURCH: Seeing none, madam clerk,
23 please call the roll.

24 THE CLERK: Tracy Upchurch?

25 MAYOR UPCHURCH: Yes.

1 THE CLERK: Nancy Sikes-Kline?

2 COMMISSIONER SIKES-KLINE: Yes.

3 THE CLERK: Roxanne Horvath?

4 COMMISSIONER HORVATH: Yes.

5 THE CLERK: John Valdes?

6 (No response.)

7 MAYOR UPCHURCH: Try it again, John.

8 COMMISSIONER VALDES: Yes.

9 MAYOR UPCHURCH: Very good.

10 COMMISSIONER VALDES: Yes.

11 MAYOR UPCHURCH: Thank you. Thank you. The
12 motion passes unanimously. Thank you --

13 MS. LOPEZ: You're quiet.

14 MAYOR UPCHURCH: -- to the city clerk, to the
15 city attorney, and to Mr. Regan for your efforts in
16 this matter. Is there anything else to come before
17 the commission today relative to the special
18 emergency meeting?

19 MR. REGAN: No.

20 MAYOR UPCHURCH: Seeing none, then the special
21 emergency meeting is adjourned. Thank you.

22 (Special meeting adjourned.)

23

24

25

1 CERTIFICATE OF REPORTER

2

3 STATE OF FLORIDA)

4 COUNTY OF ST. JOHNS)

5

6 I, JANET M. BEASON, RPR-CP, RMR, CRR, do hereby certify
7 that the foregoing pages constitute a true and complete
8 transcript of the excerpts of proceedings transcribed by me
9 to the best of my ability in the aforementioned cause at the
10 time and place herein set forth.

11 I further certify that I am not a relative, employee,
12 attorney, or counsel of any of the parties, nor am I a
13 relative or employee of any of the parties' attorneys or
14 counsel connected with the action, nor am I financially
15 interested in the action.

16 Dated this 7th day of July, 2020.

17

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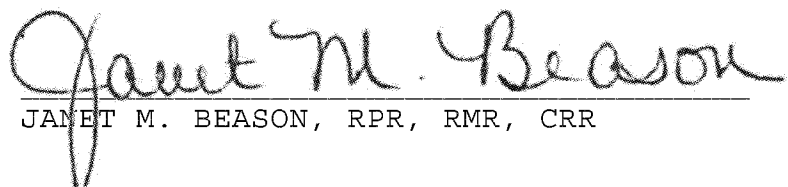
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JANET M. BEASON, RPR, RMR, CRR

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EXHIBIT "M"

CORONAVIRUS

Coronavirus Crisis: Dr. Fauci praises California, says mask wearing 'purely a public health issue,' not a political one

By Chris Nguyen and Kayla Galloway

Wednesday, June 24, 2020

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02:40

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Dr. Anthony Fauci says wearing a mask is society's responsibility to not just protect an individual, but the whole population.

SHARE: SACRAMENTO, Calif. (KGO) -- Dr. Anthony Fauci, the federal health expert at the forefront of the COVID-19 pandemic in the U.S., spoke to the Sacramento Press Club Wednesday afternoon, emphasizing that tackling the virus is not just an individual effort, but a social responsibility among Americans.

As California reports a significant rise in COVID-19 cases, Fauci asked residents to reflect before trying to resume into normal life.

"You're part of a dynamic pandemic process, so you getting infected, even if you don't realize it, is propagating the continuance of the outbreak," Fauci said.

He said the state doesn't necessarily need to go back into a complete lockdown.

"You need to pause and say, wait a minute, we're starting to open and things aren't going right. What do we need to do to correct that," he said.

California's governor issued a state mandate Thursday requiring all residents to wear a face mask when out in public, something that's received pushback from some politicizing the governor's order.

Fauci emphasized the importance of following the mask requirement.

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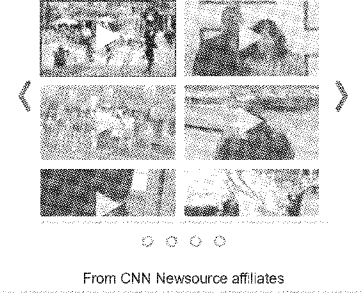
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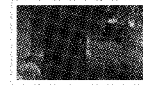
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Dr. Anthony Fauci spoke to the Sacramento Press Club Wednesday afternoon, emphasizing that tackling the virus is not just an individual effort, but something that is a social responsibility among all Americans.

"Everybody should wear a mask when out public," Fauci said during Wednesday's conversation.

Fauci says wearing a mask is society's responsibility to not just protect an individual, but the whole population.

RELATED: US coronavirus cases surge to highest level in 2 months

"It should not be a political issue," Fauci said. "It is purely a public health issue."

The federal health expert reiterated masks protect not only yourself, but the vulnerable.

When a young person get infected, they could infect someone else, who could then infect a vulnerable person, Fauci said.

During the conversation with the Sacramento Press Club, Fauci also praised Gov. Gavin Newsom's handling of the pandemic, saying he has been "ahead of the curve."

"He's got a really good sense of what to do," Fauci said.

Though communities have begun to open up, Fauci encouraged cities and states to begin preparing for a possible surge before it happens.

Dr. Fauci said these next few weeks are crucial.

RELATED: Fauci hopeful for a coronavirus vaccine by late 2020, early 2021

"I think California is starting to see little bits of surges at the community level as you're opening up," he said. "We've got to get the population to realize we're all in this together."

Showing some optimism, Fauci said the pandemic will eventually come to an end, but not without effort from communities and lawmakers.

"This will end, but it will end because we are doing things to make it end," Fauci said. "It won't end spontaneously."

Despite the toll on the economy and jobs in the U.S., the restrictive things Americans are doing now, will help the country return to normalcy, Fauci said.

In Santa Clara County, health officials are pivoting to a harm reduction strategy as the county returned to the state's watch list.

"We all are collectively grieving for the life that we don't have any more and desperately want to get back to it," said Santa Clara County's top health official Dr. Sara Cody during the event with the press club.

Dr. Cody say

reopening sectors of society.

RELATED: Once hardest hit Bay Area County sees 'worrisome' rise in new COVID-19 cases

"It's challenging because as people open up around us, it has an impact on the case and hospitalization trends in our county," she said.

Simple steps like wearing a mask, washing your hands and maintaining social distance might sound like a hassle to some.

But medical experts say they'll continue to be critical to California's success.

"That's going to protect our hospitals, our skilled nursing facilities, vulnerable communities and everyone across the board," Cody said.

Politics aside, the precautions are an opportunity to make a difference in the fight against this deadly virus moving forward.

"Californians have risen to the occasion on social issues so well in the past. You've been the leaders in the country on those things," Fauci said. "This is an issue that really has social responsibility associated with it."



Dr. Anthony Fauci: The Sacramento Press Club Interview, Als...

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**EXHIBIT "N"**

Ron DeSantis
Governor

Scott A. Rivkees, MD
State Surgeon General

2020 JUN 22 AM 8:16

Vision: To be the Healthiest State in the Nation

**STATE OF FLORIDA
DEPARTMENT OF HEALTH
PUBLIC HEALTH ADVISORY**

In Re:

**UPDATED MEASURES TO ENSURE
PROTECTION OF PUBLIC HEALTH
IN RESPONSE TO COVID-19**

WHEREAS, on March 25, 2020, I issued a public health advisory relating to protective measures for vulnerable populations, gatherings of private citizens and density of the workforce; and

WHEREAS, on May 4, 2020, Governor Ron DeSantis implemented Phase 1 of Florida's recovery, a plan in which the Governor's Task Force recommended encouraging individuals to limit their personal interactions outside of the home, permitting certain personal services to resume in the State of Florida, and advising individuals to wear face coverings in instances in which social distancing is impractical; and

WHEREAS, on June 5, 2020, Governor Ron DeSantis implemented Phase 2 of Florida's recovery plan for the majority of Florida's counties, encouraging individuals to follow appropriate social distancing and safety protocols issued by the Centers for Disease Control and Prevention (CDC) and the Occupational Safety and Health Administration (OSHA) in their personal interactions outside of the home; and

WHEREAS, pursuant to the authority granted in Section 381.00315(1), Florida Statutes, I, Scott A. Rivkees, M.D., as State Surgeon General and State Health Officer, determine that a public health advisory is necessary as a result of COVID-19 to protect the

public health and safety, and hereby issue the following public health advisory, which shall serve to amend the public health advisory issued on March 25, 2020.

WEARING FACE COVERINGS

All individuals in Florida should wear face coverings in any setting where social distancing is not possible, unless any of the following is applicable:

- A child is under two years of age;
- An individual has one or more medical conditions or disabilities that prevent wearing a face covering;
- An individual is obtaining a service involving the nose or face for which temporary removal of the face covering is necessary to perform the service;
- An individual works in a profession where use of a face covering will not be compatible with the duties of the profession; or
- An individual is engaged in outdoor work or recreation with appropriate social distancing in place.

All individuals should follow CDC guidelines on what type of face coverings are available and should be utilized.

VULNERABLE POPULATIONS

All individuals over the age of 65 and all individuals of any age with high-risk health conditions should limit personal interactions outside of the home and take all measures to limit the risk of exposure to COVID-19. These measures include, but are not limited to: distancing any unavoidable personal contact by a minimum of six feet; wearing a face covering when social distancing is not possible; washing hands often with soap and water for at least 20 seconds, or using hand sanitizer with at least 60% alcohol; avoiding unnecessary touching of eyes, nose, and mouth, and washing hands prior to doing so; and cleaning and disinfecting high-touch surfaces, including entryway door handles.

High-risk health conditions include, but are not limited to: chronic lung disease; moderate to severe asthma; serious heart conditions; immunocompromised status (as a result of cancer treatment, bone marrow or organ transplant, immune deficiencies, poorly controlled HIV or AIDS, or prolonged use of corticosteroids and other immune weakening medications); cancer; severe obesity (body mass index [BMI]>40); diabetes; renal failure; and liver disease.

GATHERINGS OF PRIVATE CITIZENS

All individuals should refrain from participation in social or recreational gatherings of more than 50 people. For all gatherings of fewer than 50 people, individuals should practice social distancing by maintaining a distance of at least six feet from each other and wear a face covering.

Issued this 20th day of June 2020, in Department of Health offices, Tallahassee, Leon County, Florida.



Scott A. Rivkees, M.D.
State Surgeon General



Wednesday July 8, 2020

July 2020 - Volume 17 - Issue 1

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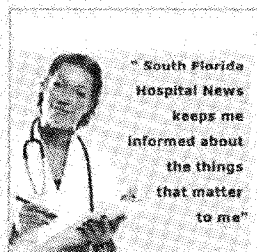
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STATEMENT BY FLORIDA MEDICAL ASSOCIATION PRESIDENT RONALD L. GIFFLER, MD, JD, MBA, RELATED TO USAGE OF FACE COVERINGS TO PREVENT FURTHER SPREAD OF COVID-19

June 19 2020 - Florida Medical Association (FMA) President Ronald F. Giffler, MD, JD, MBA, today offered the following statement urging Floridians to use face coverings to prevent the further spread of COVID-19, and calling on local officials to adopt regulations requiring the use of masks in public places.

"In response to a dramatic increase in COVID-19 cases, the Florida Medical Association (FMA) the state's largest physician organization, encourages local officials to adopt regulations requiring individuals to wear face coverings in public places. Several large municipalities in Florida have already adopted mandatory mask use ordinances. The FMA applauds these local leaders who have put the health and safety of their citizens first and foremost.



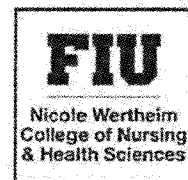
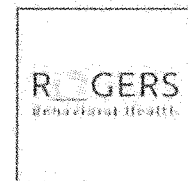
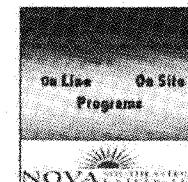
"The U.S. Centers for Disease Control and Prevention (CDC) has provided guidance that masks are essential in preventing community spread of COVID-19 and the FMA unequivocally endorses this public health measure. Wearing a mask may save your life and the lives of others.

"The science is clear. Asymptomatic infected individuals can release infectious aerosol particles while breathing and speaking. Not wearing a mask or face covering increases exposure, whereas universal masking greatly reduces the spread of viral particles. The message is simple: For the sake of your health and the health of everyone around you, Florida's doctors want you to wear a mask."

About Florida Medical Association (FMA)

Founded in 1874, the FMA is a professional association dedicated to the service and assistance of Doctors of Medicine and Doctors of Osteopathic Medicine in Florida. The FMA represents more than 25,000 members on issues of legislation and regulatory affairs, medical economics and education, public health, and ethical and legal issues. The association advocates for physicians and their patients to promote the public health, ensure the highest standards of medical practice, and to enhance the quality and availability of health care in the Sunshine State. For more information on the FMA, please visit www.flmedical.org, follow @FloridaMedical and like FB.com/FloridaMedical.

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Politics

Trump Reverses Course on Masks, Calling Them 'Patriotic' After Allies Split With Him

By David R Baker and Margaret Newkirk

July 20, 2020, 8:28 PM EDT

Updated on July 21, 2020, 7:07 AM EDT

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- Long resistant, president tweets photo of 'Patriotic' mask
 - Public acceptance can depend on the messenger, experts say
-



Donald Trump wears a protective mask while visiting Walter Reed National Military Medical Center in Maryland, on July 11. *Photographer: Chris Kleponis/Polaris/Bloomberg*

The mask may have reached a tipping point.

President Donald Trump's administration on Monday pushed to encourage mask-wearing, explicitly endorsing a measure widely seen as crucial to stemming the coronavirus pandemic, and potentially quelling a bitter debate that experts say costs lives.

The president, who for months resisted covering his face in public, tweeted that “it is Patriotic to wear a face mask when you can’t socially distance.” And Vice President Mike Pence told governors in a teleconference that he supported their mask mandates, with the administration even sending a memorandum to New Jersey recommending that it continue its order. The reversal followed polls that showed Trump’s refusal to champion masks was out of step with citizens terrified by rising case counts nationwide.



Donald Trump wears a mask while visiting Walter Reed National Military Medical Center in Bethesda, Maryland, on July 11. *Photographer: Chris Kleponis/Polaris/Bloomberg*

It also comes as Republican governors, facing outbreaks spiraling beyond control, begin to break with Trump on the issue. Texas Governor Greg Abbott last week cast masks as key to ensuring the state wouldn’t need to shut down its economy a second time, though he had previously resisted ordering their use. Mississippi Governor Tate Reeves on Monday required residents of 23 hard-hit counties to start wearing masks.

“We have to take Covid-19 seriously,” Reeves said at a news conference. “This virus is not going away. There are lives on the line.”

Coronavirus cases in the U.S. increased Monday to 3.79 million, according to data collected by Johns Hopkins University and Bloomberg. The disease has killed almost 141,000 Americans so far.

Now Engaging

The administration's refusal to formulate a national plan to fight the virus has become a major hurdle to Trump's re-election, and the president said Monday he would resume regular Covid-19 briefings. Pence told governors in the teleconference that the administration would support the mask orders, according to a person who heard the call. He also suggested that bars be closed in states or regions with high virus spread, according to Kentucky Governor Andy Beshear.

And in the afternoon, Trump sent the tweet showing himself in a mask with the presidential seal. "There is nobody more Patriotic than me, your favorite President!" he wrote. CNN, citing anonymous sources, reported that the tweet was prompted by internal polling that showed disapproval of Trump's handling of the pandemic.

Cloth masks don't guarantee protection from the virus. But they do help block droplets of water vapor, carried on breath, from spreading far beyond the face. If people are infected with the coronavirus but don't know it, a mask can help prevent them from infecting those around them.

Trump has appeared in public in a mask only once, on a visit to a military hospital, and he gave no indication Monday that he would wear one regularly. The White House didn't respond to a request for comment.

Trump's tweet muddled what had become a bitter partisan debate. He had shunned masks, and many supporters said mandating them infringed on their rights. Trump initially argued for a mask-free Republican convention, and there were anti-mask demonstrations and videos of ugly confrontations in stores.

Accelerating Acceptance

But Trump's new stance could put mask mandates in the same category as laws about seat belts, motorcycle helmets or secondhand smoke -- safety measures that, while unpopular at first, eventually won acceptance.

Researchers who have studied such shifts in public opinion say the identity of the people urging change can make a difference.

“If you have the person in charge of the country saying, ‘It’s up to you -- I’m not going to wear one,’ that’s really problematic,” said Catherine Sanderson, chair of the psychology department at Amherst College in Massachusetts and author of “Why We Act: Turning Bystanders into Moral Rebels.”

Major social changes can be triggered even if just 25% of the population adopts them at first, she said. But it has to be the right 25% -- people with genuine influence. Governors can qualify. So can presidents.

“If Trump had done this two months ago, more people would have lived,” Sanderson said Monday, after Trump’s tweet. “But this is better late than never, especially if it gives GOP governors tacit permission to require masks in their red states.”



Shoppers wearing protective masks leave a Walmart store in Lakewood, California on July 16. *Photographer: Patrick T. Fallon/Bloomberg*

Some of America’s largest retailers -- Walmart Inc., Target Corp. and CVS Health Corp.-- are now requiring all shoppers nationwide to wear one, whether local officials mandate them or not. And the number of states, counties and cities ordering the use of masks in public is growing, albeit not without a fight. One example: the ongoing dispute between Louisiana’s attorney general,

who says statewide mask orders are unconstitutional, and the same state's governor, who insists they aren't.

"With every new public-health intervention, there's always some resistance," said Julia Marcus, an epidemiologist and assistant professor at Harvard Medical School.

During the AIDS crisis, efforts to shame people into wearing condoms or abstaining from sex didn't work. Messages that offered condoms as a way to keep having sex without hurting yourself or others did.

"If we just yell at people about not wearing masks, we're not going to get anywhere," Marcus said.

Cigarette Precedent

Polls show that large majorities of Americans support wearing masks in public, although there are deep divisions along partisan lines. Public-health experts say immediate action is needed to fight the pandemic, but similar societal shifts evolved over decades.

"It took a long time to regulate smoking, to get to that point," said Jay Van Bavel, associate professor of psychology and director of the Social Perception and Evaluation Lab at New York University. "And we don't have that kind of time."

The campaign to convince Americans to wear masks, however, shares one successful element with anti-smoking efforts: It is as much about protecting other people as protecting oneself. Public understanding of the dangers of secondhand smoke, Van Bavel said, was key to the acceptance of smoking bans on planes and in restaurants.

Last week, New York Governor Andrew Cuomo launched an ad campaign stressing the same point. Marcus also pointed to a video that features California Governor Gavin Newsom and all four of his living predecessors, including two Democrats and two Republicans. The California ad dismisses partisanship, appeals to personal responsibility, makes a few quick jokes and includes Arnold Schwarzenegger -- made famous by his muscles -- saying a mask isn't a sign of weakness.

"It directly addressed those concerns around personal liberty and reframed masks as a ticket to freedom," Marcus said.

– *With assistance by Justin Sink, Alexander Ebert, and Jennifer Kay*