DIRECTOR’S DINE SAFE OHIO ORDER

Re: Director’s Order that Reopens Restaurants and Bars to Dine-in Service, with Exceptions

I, Amy Acton, M.D., MPH, Director of the Ohio Department of Health (ODH), pursuant to the authority granted to me in R.C. 3701.13 to “make special orders...for preventing the spread of contagious or infectious diseases” Order the following to prevent the spread of COVID-19 into the State of Ohio:

1. Preamble: The sacrifices and incredible efforts that Ohioans have undertaken, make it possible to begin to lift the mandatory requirements and restrictions that were needed during the initial phase of the COVID-19 Pandemic. The adjustment of these orders is able to proceed based upon the facts and the science existing at this time in Ohio, however if the situation continues to improve, then more restrictions will be lifted, and if the situation deteriorates additional targeted restrictions will need to be made. While government can set the baseline, it should be understood that these orders set forth the minimum acts that must be taken and if people do more than the minimum to act safely, it will benefit everyone.

2. Restaurants and Bars to reopen. All restaurants, bars and other like businesses and operations in the State, which have the onsite consumption of food, beer, wine and liquor, are permitted to reopen for full, dine-in service within the State so long as all workplace safety standards are met. These businesses and operations are encouraged to either reopen or remain open if they have not ceased operation during the prior Stay at Home or other ODH Orders. Businesses and operations shall continue to comply with Social Distancing Requirements as defined in this Order, including by maintaining six-foot social distancing for both employees and members of the public at all times, including, but not limited to, when any customers are standing in line. Reservations are to be limited to no more than 10 persons. Customers must be seated when consuming food, beer, wine and liquor on the premises of the business. While the open congregate areas in restaurants and bars that are not necessary for the preparation and service of food and beverages (billiards, card playing, pinball games, video games, arcade games, dancing, entertainment) are not reopening in this Order, the equipment/fixtures do not have to be removed and these areas will open during the next phase of reopening.

3. Elderly people and those who are vulnerable as a result of illness should take additional precautions. People at high risk of severe illness from COVID-19, including elderly people and those who are sick, are urged to stay in their residence to the extent possible except as necessary to seek medical care. According to CDC, those at high-risk for severe illness from COVID-19 include people who are sixty-five years or older and people of all ages with underlying medical conditions, particularly if not well controlled, including:
   a. People with chronic lung disease or moderate to severe asthma;
   b. People who have serious heart conditions;
   c. People who are immune compromised;
d. People with severe obesity (body mass index [BMI] of 40 or higher);
e. People with diabetes;
f. People with chronic kidney disease undergoing dialysis; and
g. People with liver disease.

4. **Facial Coverings (Masks).** Businesses must allow all customers, patrons, visitors, contractors, vendors and similar individuals to use facial coverings, except for specifically documented legal, life, health or safety considerations and limited documented security considerations. Businesses must require all employees to wear facial coverings, except for one of the following reasons:

   a. Facial coverings in the work setting are prohibited by law or regulation;
   b. Facial coverings are in violation of documented industry standards;
   c. Facial coverings are not advisable for health reasons;
   d. Facial coverings are in violation of the business’s documented safety policies;
   e. Facial coverings are not required when the employee works alone in an assigned work area;
   f. There is a functional (practical) reason for an employee not to wear a facial covering in the workplace.

Businesses must provide written justification, upon request, explaining why an employee is not required to wear a facial covering in the workplace. At a minimum, facial coverings (masks) should be cloth/fabric and cover an individual’s nose, mouth, and chin.

5. **Prior Director of Health Order.** The Director of Health Order signed March 15, 2020 that closed restaurants and bars to all but carry-out and delivery activities in the State is rescinded effective at 12:01 a.m. on May 21, 2020.

6. **Social Distancing Requirements.** For purposes of this Order, Social Distancing Requirements includes maintaining at least six-foot social distancing from other individuals, washing hands with soap and water for at least twenty seconds as frequently as possible or using hand sanitizer, covering coughs or sneezes (into the sleeve or elbow, not hands), regularly cleaning high-touch surfaces, and not shaking hands.

   a. **Required measures.** Businesses and Operations and businesses must take proactive measures to ensure compliance with Social Distancing Requirements, including where possible:

   i. **Designate six-foot distances.** Designating with signage, tape, or by other means six-foot spacing for employees and customers in line to maintain appropriate distance;
   
   ii. **Hand sanitizer and sanitizing products.** Having hand sanitizer and sanitizing products readily available for employees and customers; and

   iii. **Online and remote access.** Posting online whether a facility is open and how best to reach the facility and continue services by phone or remotely.

7. **Enforcement.** This Order may be enforced by State and local law enforcement to the extent set forth in Ohio law. Specifically, pursuant to R.C 3701.352 “[n]o person shall violate any rule the director of health or department of health adopts or any order the director or department of health issues under this chapter to prevent a threat to the public caused by a pandemic, epidemic, or bioterrorism event.” R.C. 3701.56 provides that “[b]oard of health of a general or city health district, health authorities and officials, officers of state institutions, police officers, sheriffs,
constables, and other officers and employees of the state or any county, city, or township, shall enforce quarantine and isolation orders, and the rules the department of health adopts.” To the extent any public official enforcing this Order has questions regarding what services are prohibited under this Order, the Director of Health hereby delegates to local health departments the authority to answer questions in writing and consistent with this Order, but does not require local health departments to provide advisory opinions to nongovernmental entities.

8. **Penalty.** A violation of R.C. 3701.352 is guilty of a misdemeanor of the second degree, which can include a fine of not more than $750 or not more than 90 days in jail, or both.

9. **General COVID-19 Information and Checklist for Businesses/Employers.** Business and employers are to take the following actions:

   a. Strongly encourage as many employees as possible to work from home by implementing policies in areas such as teleworking and video conferencing, subject to the discretion of the employer;

   b. Actively encourage sick employees to stay home until they are free of fever (without the use of medication) for at least 72 hours (three full days) AND symptoms have improved for at least 72 hours AND at least seven days have passed since symptoms first began. Do not require a healthcare provider’s note to validate the illness or return to work of employees sick with acute respiratory illness; healthcare provider offices and medical facilities may be extremely busy and not able to provide such documentation in a timely way;

   c. Ensure that your sick leave policies are up to date, flexible, and non-punitive to allow sick employees to stay home to care for themselves, children, or other family members. Consider encouraging employees to do a self-assessment each day to check if they have any COVID-19 symptoms (fever, cough, or shortness of breath);

   d. Separate employees who appear to have acute respiratory illness symptoms from other employees and send them home immediately. Restrict their access to the business until they have recovered;

   e. Reinforce key messages — stay home when sick, use cough and sneeze etiquette, and practice hand hygiene — to all employees, and place posters in areas where they are most likely to be seen. Provide protection supplies such as soap and water, hand sanitizer, tissues, and no-touch disposal receptacles for use by employees;

   f. Frequently perform enhanced environmental cleaning of commonly touched surfaces, such as workstations, countertops, railings, door handles, and doorknobs. Use the cleaning agents that are usually used in these areas and follow the directions on the label. Provide disposable wipes so that commonly used surfaces can be wiped down by employees before each use;

   g. Be prepared to change business practices if needed to maintain critical operations (e.g., identify alternative suppliers, prioritize customers, or temporarily suspend some of your operations); and

   h. Comply with all applicable guidance from the U.S. Centers for Disease Control and Prevention and the Ohio Department of Health regarding social distancing.
10. **Sector Specific COVID-19 Information and Checklist for Businesses/Employers Covered by this Order.** Businesses and employers, whether currently open or reopening, are to take the following actions:

a. Employees:

   i. Where possible, ensure a minimum of 6 feet distance between workers and where not possible, utilize barriers if applicable and increase the frequency of surface cleaning, hand washing, sanitizing and monitor compliance;

   ii. Businesses must allow all customers, patrons, visitors, contractors, vendors and similar individuals to use facial coverings, except for specifically documented legal, life, health or safety considerations and limited documented security considerations;

   iii. Face coverings (per CDC guidelines) must be worn at all times unless exceptions apply, see Section 4 of this Order for guidance;

   iv. Employees must perform a daily symptom assessment that should include taking temperature with a thermometer, monitoring for fever and watching for coughing or trouble breathing;

   v. Require employees to stay at home if symptomatic and perform daily symptom assessment before returning to work;

   vi. Provide ServSafe, or other approved COVID-19 education, as soon as possible. Add COVID-19 symptoms to the current standard Health Agreement required by the food safety code;

   vii. Require regular handwashing (soap and water for at least 20 seconds) a minimum of every 2 hours or more often as necessary;

   viii. Comply with person in charge certification requirements and manager certification requirements as set forth in Ohio Admin. Code Sections 3701-21-25 and 3717-1-02.4, as applicable;

   ix. Maintain compliance with ODH sanitation and food safety regulations;

   x. Limit number of employees allowed in break rooms at the same time. Maximum to be the group size limitation set forth in the Stay Safe Ohio Order dated April 30, 2020 or as thereafter amended (currently 10 persons);

   xi. It is recommended that third party delivery services be required to wait outside or in non-congested areas while adhering to the social distancing guidelines;

   xii. It is recommended that third party delivery services be required to wear face coverings (per CDC guidelines) at all times unless exceptions apply, see Section 4 of this Order for guidance;

   xiii. It is recommended that employees be educated on the proper use, disposal and maintenance of face coverings and update and enhance the education on proper glove use pursuant to the relevant administrative code;

   xiv. It is recommended that health checks include temperature assessments, questionnaires, employee self-checks, screening apps or other tools. Files should be updated with a file of “Health Checks”;

   xv. It is recommended that telephone symptom assessments be conducted for employees that were ill and are now planning to return to work;

   xvi. It is recommended that as the rehiring of employees commences, interviews and onboarding occur virtually;
xvii. It is recommended that education be reinforced on when to wash hands pursuant to current food safety regulations, that ODH handwashing posters be placed at sinks and workstations and that set times for periodic handwashing be established; and

xviii. It is recommended that employees avoid switching tasks when possible to reduce cross contamination concerns and increase handwashing if changing tasks is necessary.

b. Customers and Guests

i. Where possible, ensure minimum of 6 feet between parties waiting and when dining, and where not possible, then utilize barriers and other protective devices;

ii. Post a list of COVID-19 symptoms in a conspicuous place;

iii. Ask customers and guests not to enter if symptomatic;

iv. Provide access to hand sanitizing methods while in the food service establishment and, if possible, place approved hand cleansing/sanitizing methods in high-contact areas;

v. Food service establishments offering dine-in service must take affirmative steps with customers to achieve safe social distancing guidelines;

vi. It is recommended that customers and guests wear face coverings at all times, except when dining;

vii. It is recommended that health questions for symptoms be posted at the entrance and follow current guidelines of the CDC and ODH;

viii. It is recommended that, if possible, separate, dedicated entrances and exit doors be identified;

ix. It is recommended that, where possible, enhance dining room ventilation (open doors and windows);

x. It is recommended that, where possible, encourage customers to make dine-in reservations or use drive through, pick-up, call-in, curbside or delivery options; and

xi. It is recommended that at-risk customers be encouraged to utilize options other than dine-in.

c. Physical spaces

i. Establish and post maximum dining capacity using updated COVID-19 compliant floor plans and with a maximum reservation or party size limitation as set forth in Stay Safe Ohio Order dated April 30, 2020 or as thereafter amended (currently 10 persons);

ii. Post a kitchen floor plan establishing safe social distancing guidelines and following established ODH guidance for masks and gloves;

iii. Perform daily cleaning (front and back of facility). Clean and sanitize tabletops, chairs, and menus between seatings. Clean all high touch areas (door handles, light switches, phones, pens, touch screens) every two hours or more frequently as needed;
iv. Provide approved hand cleansing/sanitizing methods in common areas;

v. Where appropriate, establish ordering areas and waiting areas with clearly marked safe distancing and separations per individual/social group for both restaurant and bar service;

vi. Remove self-service, table, and common area items (examples: table tents, vases, lemons, straws, stir sticks, and condiments);

vii. Salad bars and buffets are permitted if served by staff with safe 6 feet of social distancing between parties;

viii. Private dining and bar seating areas within a foodservice establishment must follow all approved social distancing guidelines;

ix. The open congregate areas in restaurants and bars that are not necessary for the preparation and service of food and beverages (billiards, card playing, pinball games, video games, arcade games, dancing, entertainment) shall remain closed;

x. It is recommended that barriers be utilized in high volume areas;

xi. It is recommended that, if possible, workstations be staggered so employees avoid standing directly opposite or next to each other and, if not possible, then that the frequency of surface cleaning, handwashing, and sanitizing be increased and compliance monitored;

xii. It is recommended that entry and exit options be limited while still maintaining compliance with all applicable administrative code requirements;

xiii. It is recommended that weekly deep cleaning checklists be updated and enhanced;

xiv. It is recommended that, where possible, disposable menus be utilized;

xv. It is recommended that ODH “Best Practices” be posted that illustrate and highlight continuous cleaning and sanitizing of all food equipment and common surfaces;

xvi. It is recommended that employee education and compliance hand washing, glove use, employee health and food handler training continue to be emphasized;

xvii. It is recommended that, if possible, HVAC systems receive updated air filtration improvements; and

xviii. It is recommended that designated curbside pickup zones for customers be continued and encouraged.

d. Confirmed cases

i. Immediately isolate and seek medical care for any individual who develops symptoms while at work;

ii. Contact the local health district about suspected cases or exposures;

iii. Shutdown area for deep sanitation if possible;

iv. It is recommended that businesses work with local health department to identify potentially infected or exposed individuals to help facilitate effective contact tracing/notifications;

v. It is recommended that once testing is readily available, businesses test all suspected infections or exposures; and
vi. It is recommended that following testing, businesses contact the local health department to initiate appropriate care and tracing.

11. Duration. Notwithstanding the Director of Health Order signed March 15, 2020 that closed restaurants and bars to all but carry-out and delivery activities in the State, all restaurants, bars and other businesses and operations in the State, which have the onsite consumption of food, beer, wine and liquor, are permitted to reopen for outdoor seating service only effective at 12:01 a.m. on May 15, 2020, so long as all of the safety requirements of this Order are met. This remainder of this Order shall be effective at 12:01 a.m. on May 21, 2020 and remains in full force and effect until 11:59 p.m. on July 1, 2020, unless the Director of the Ohio Department of Health rescinds or modifies this Order at a sooner time and date.

COVID-19 is a respiratory disease that can result in serious illness or death, is caused by the SARS-CoV-2 virus, which is a new strain of coronavirus that had not been previously identified in humans and can easily spread from person to person. The virus is spread between individuals who are in close contact with each other (within about six feet) through respiratory droplets produced when an infected person coughs or sneezes. It may be possible that individuals can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose or eyes.

On January 23, 2020, the Ohio Department of Health issued a Director’s Journal Entry making COVID-19 a Class A reportable disease in Ohio.

On January 28, 2020, the Ohio Department of Health hosted the first statewide call with local health departments and healthcare providers regarding COVID-19.

On January 30, 2020, the International Health Regulations Emergency Committee of the World Health Organization declared the outbreak of COVID-19 a public health emergency of international concern.

On January 31, 2020, Health and Human Services Secretary, Alex M. Azar II, declared a public health emergency for the United States to aid the nation’s healthcare community in responding to COVID-19.

On February 1, 2020, the Ohio Department of Health issued a statewide Health Alert Network to provide local health departments and healthcare providers with updated guidance for COVID-19 and revised Person Under Investigation (PUI) criteria.

On February 3, 2020, the Ohio Department of Health trained over 140 personnel to staff a call center for COVID-19, in the event it was needed.

On February 5, 2020, the Ohio Department of Health began updating and notifying the media of the number of PUIs in Ohio every Tuesday and Thursday.

On February 6, 2020, the Ohio Department of Health updated all agency assistant directors and chiefs of staff on COVID-19 preparedness and status during the Governor’s cabinet meeting.

On February 7, 2020, the Ohio Department of Health and the Ohio Emergency Management Agency met to conduct advance planning for COVID-19.
On February 13, 2020, the Ohio Department of Health conducted a Pandemic Tabletop Exercise with State agencies to review responsive actions should there be a pandemic in Ohio.

On February 14, 2020, the Ohio Department of Health held a conference call with health professionals across the state. The purpose of the call was to inform and engage the healthcare community in Ohio. Presentations were provided by the Department of Health, Hamilton County Public Health, and the Ohio State University.

On February 27, 2020, the Ohio Department of Health and the Ohio Emergency Management Agency briefed the directors of State agencies during the Governor’s cabinet meeting regarding preparedness and the potential activation of the Emergency Operations Center.

On February 28, 2020, the "Governor DeWine, Health Director Update COVID-19 Prevention and Preparedness Plan" was sent to a broad range of associations representing healthcare, dental, long-term care, K-12 schools, colleges and universities, business, public transit, faith-based organizations, non-profit organizations, and local governments.

On March 2, 2020, the Ohio Department of Health activated a Joint Information Center to coordinate COVID-19 communications.

On March 5, 2020, the Ohio Department of Health hosted the Governor’s Summit on COVID-19 Preparedness, a meeting with the Governor, cabinet agency directors, local health department commissioners, and their staff.

On March 6, 2020, the Ohio Department of Health opened a call center to answer questions from the public regarding COVID-19.

On March 9, 2020, testing by the Department of Health confirmed that three (3) patients were positive for COVID-19 in the State of Ohio. This confirms the presence of a potentially dangerous condition which may affect the health, safety and welfare of citizens of Ohio.

On March 9, 2020, the Ohio Emergency Management Agency activated the Emergency Operations Center.

On March 9, 2020, the Governor Declared a State of Emergency in Executive Order 2020-01D.

On March 11, 2020, the head of the World Health Organization declared COVID-19 a pandemic.

On March 11, 2020, testing by the Ohio Department of Health confirmed that one (1) more patient was positive for COVID-19 in the State of Ohio.

On March 11, 2020, the Ohio Departments of Health and Veterans Services issued a Joint Directors’ Order to limit access to Ohio nursing homes and similar facilities.

On March 15, 2020, the Ohio Department of Health issued a Director’s Order to limit access to Ohio’s jails and detention facilities.
On March 15, 2020, the Ohio Department of Health issued a Director’s Order to limit the sale of food and beverages, liquor, beer and wine to carry-out and delivery only.

On March 15, 2020, the CDC issued Interim Guidance for mass gatherings or large community events, stating that such events that consist of 50 or more people should be cancelled or postponed.

On March 16, 2020 the Ohio Department of Health issued a Director’s Order closing polling locations for the March 17, 2020 primary election.

On March 17, 2020 the Ohio Department of Health issued a Director’s Order for the management of non-essential surgeries and procedures throughout Ohio.

On March 17, 2020 the Ohio Department of Health issued an Amended Director’s Order to limit and/or prohibit mass gatherings and the closure of venues in the State of Ohio.

On March 19, 2020, the Ohio Department of Health issued a Director’s Order closing hair salons, nail salons, barber shops, tattoo parlors, body piercing locations, and massage therapy locations.

On March 21, 2020, the Ohio Department of Health issued a Director’s Order closing older adult day care services and senior centers.

On March 21, 2020, the Ohio Department of Health issued a Director’s Order closing family entertainment centers and internet cafes.

On March 22, 2020, the Ohio Department of Health issued a Director’s Order that all persons are to stay at home unless engaged in essential work or activity.

On March 24, 2020, the Ohio Department of Health issued a Director’s Order that closed facilities providing child care services.

On March 30, 2020, the Ohio Department of Health issued an Amended Director’s Order that closed all K-12 schools in the State of Ohio.

On April 2, 2020, the Ohio Department of Health issued an Amended Director’s Order that all persons are to stay at home unless engaged in essential work or activity.

On April 30, 2020, the Ohio Department of Health issued the Stay Safe Ohio Order that reopened businesses, with exceptions, and continued a stay healthy and safe at home order.

Multiple areas of the United States are experiencing “community spread” of the virus that causes COVID-19. Community spread, defined as the transmission of an illness for which the source is unknown, means that isolation of known areas of infection is no longer enough to control spread.
The CDC reports that people are most contagious when they are most symptomatic (the sickest) however some spread might be possible before people show symptoms although that is not the main way the virus spreads.

Mass gatherings (10 or more persons) increase the risk of community transmission of the virus COVID-19.

Accordingly, to avoid an imminent threat with a high probability of widespread exposure to COVID-19 with a significant risk of substantial harm to a large number of people in the general population, including the elderly and people with weakened immune systems and chronic medical conditions, I hereby **ORDER** that restaurants and bars may reopen or continue to operate as set forth in this Order. This Order shall remain in full force and effect until 11:59 p.m. on July 1, 2020, unless the Director of the Ohio Department of Health rescinds or modifies this Order at a sooner time and date. To the extent any public official enforcing this Order has questions regarding what services are prohibited under this Order, the Director of Health hereby delegates to local health departments the authority to answer questions in writing and consistent with this Order.

Amy Acton, MD, MPH
Director of Health

May 14, 2020