TEXANS HELPING TEXANS

THE GOVERNOR’S REPORT TO OPEN TEXAS

APRIL 27, 2020
Texans are battling a colossal challenge—an invisible enemy that has tested our lives and our livelihoods—but overcoming challenges is part of who we are as Texans.

We have shown that Texas can continue our efforts to contain COVID-19 while also adhering to safe standards that will allow us to begin the process of opening this great state.

The Strike Force to Open Texas brings together nationally recognized medical experts with public- and private-sector business leaders to help achieve this mission.

But it will take more than experts to win this battle for our families, for our community, and for this great state.

We are each called upon to be Texans: to act responsibly as we re-engage in the economy, to continue following all health precautions and sanitizing guidelines, and to care for our vulnerable neighbors. Lives depend on our actions. I know you will respond as Texans.

That is why we are first and foremost focusing on protecting the most vulnerable among us, on nursing home mitigation measures, on ramping up testing, and on scaling up contact tracing of the unseen enemy.

We will be measured and cautious. Only with your help and with all of these measures in place can we begin to open businesses with careful adherence to health protocols.

By coming together, we can prevent the spread of COVID-19 and we can get Texas back to work.

With Texans helping Texans, we can overcome any challenge.

Governor Greg Abbott
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THE MISSION: TEXANS HELPING TEXANS

As established by Governor Greg Abbott on April 17, 2020, by Executive Order GA-17:

Under the direction of Governor Abbott, with the advice of the Lieutenant Governor, Speaker of the House, Attorney General, and Texas Comptroller:

*The Governor’s Strike Force to Open Texas will safely and strategically restart and revitalize all aspects of the Lone Star State—work, school, entertainment, and culture.*

The Governor’s Strike Force to Open Texas brings together nationally recognized medical experts with public- and private-sector business leaders to achieve this mission.

The Chief Medical Advisors on the Strike Force are health experts who are developing a medical architecture to comprehensively test and trace COVID-19 to enable Texans to gradually and safely begin the process of returning to work and other activities.

The Chief Medical Advisors are working alongside a Special Advisory Council of 39 business leaders representing the state’s regions and industries who are sharing innovative ideas to help businesses strategically open while containing the spread of COVID-19. The Council is collaborating with Working Groups to recommend strategies, statewide standards, and appropriate timeframes to open all sectors of the Lone Star State.

FROM JAMES HUFFINES, CHAIR

With Governor Abbott’s leadership and the resilience of the people of Texas, we continue to make tremendous progress in the fight against COVID-19. Thanks to Texans working together to contain the spread of this virus, our state is now positioned to gradually open Texas for business.

The health and safety measures laid out by Governor Abbott and his Chief Medical Advisors on the Strike Force provide a smart and strategic game plan for Texans to safely return to work and daily activities. But we can only achieve our mission if every Texan plays their part and follows these measures. We all bear the responsibility to protect our health and the health of those around us. If we all work to fulfill that responsibility, we will open Texas for business and get Texans back to work, while at the same time containing the spread of COVID-19. These are difficult times, but when Texans work together we can overcome any challenge.
FROM THE CHIEF MEDICAL OFFICER

There is much we know about COVID-19.
We know it has had a devastating impact across our nation.
We know there is currently no vaccine to prevent COVID-19.
And we know the best way to prevent infection is to take steps to avoid exposure. We have seen this work in Texas, where Texans are taking actions to stop infections.
But there is much more to know.
Based on our current understanding, the virus that causes COVID-19 is thought to spread:
- Mainly from person to person;
- Between people who are in close contact with one another (within about 6 feet); and
- Via respiratory droplets when an infected person coughs or sneezes; these droplets can land in the mouths or noses of people who are nearby or possibly be inhaled.
People are thought to be most contagious early in their illness, but COVID-19 can be spread to others by infected persons even before they show any symptoms.

That is why we must remain cautious — to avoid further spread or a new outbreak.

As we begin to open Texas, we must continue to follow these critical health guidelines:
- Stay home if you can.
- Wash hands often and for 20 seconds, or use hand sanitizer with at least 60% alcohol.
- Cover coughs and sneezes with a tissue, then throw the tissue away.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Disinfect surfaces, buttons, handles, doorknobs, and other places touched often.
- Avoid close contact with people who are sick.

Continue to practice social distancing, avoid crowds, and limit physical contact. The Centers for Disease Control and Prevention (CDC) also recommends using simple cloth face coverings in public to help slow the spread of the virus.

Special guidance for Texans over 65 is outlined on page 6, and for all Texans on page 8. Opening businesses have added responsibilities outlined beginning on page 19.

Every Texan is part of the solution. You can protect yourself, your family, and your community.

John William Hellerstedt, M.D., Chief Medical Officer
Commissioner, Texas Department of State Health Services
SPECIAL GUIDANCE FOR TEXANS OVER 65

People 65 years or older, especially people 65 years or older with medical issues like heart disease, diabetes, cancer, or a weakened immune system, are at a higher risk for getting very sick or dying from COVID-19. Every Texan is part of the solution. Strictly adhere to all CDC guidelines, as well as all recommendations in this document.

1. STAY HOME IF YOU CAN

☑ Minimize face-to-face contact with others. Avoid young children.
☑ If someone is assisting you, you and your family members or caretaker should wear cloth face masks. Remember a family member or caretaker can give you the virus even if they don’t appear to have symptoms.
☑ Try grocery or restaurant delivery, mail order prescriptions, and phone appointments with your doctor. **Call 2-1-1 if you need help with essentials.**
☑ Reach out to friends, family, or neighbors who can deliver essential items.

2. HELP SAVE LIVES

☑ If you must go out, wear a cloth face mask, and stay six feet away from others.
☑ Wash your hands often and for at least 20 seconds, or use hand sanitizer with at least 60% alcohol.
☑ Disinfect surfaces, buttons, handles, knobs, and other places touched often.
☑ Do not share dishes, drinking glasses, cups, or eating utensils with others.
☑ If you have mild symptoms (difficulty breathing, or a rapidly worsening cough or fever), call your healthcare provider. **If symptoms are severe, call 9-1-1.**

3. CHECK IN

☑ Check in regularly with neighbors, friends, and family by calling, texting, emailing, video chatting, or even writing letters.
☑ Walking, gardening, digital books, games, and online religious services are great ways to stay active and connected.
PROTECTING THE VULNERABLE

Texans 65 years of age or older are at a higher risk for getting very sick from COVID-19 and are especially urged to follow the special guidance.

Based on data from the Texas Department of State Health Services (DSHS), of confirmed COVID-19 fatalities in Texas to date, 76% were Texans 65 and older.

AGE GROUPING OF CONFIRMED COVID-19 FATALITIES IN TEXAS
From 305 completed fatality investigations received by DSHS as of 04/26/2020

For the latest data:
https://txdshs.maps.arcgis.com/apps/opsdashboard/index.html#/ed483ecd702b4298ab01e8b9cafc8b83
GUIDELINES FOR ALL TEXANS

We are each called upon to be Texans: to act responsibly as we re-engage in the economy, to continue following all health precautions and sanitizing guidelines, and to care for our vulnerable neighbors.

Lives depend on our actions.

Find out more about how you can take personal responsibility:

- **Who Is At High Risk:** [https://youtu.be/LBHPUegGlPA](https://youtu.be/LBHPUegGlPA)
LONG-TERM CARE: HHSC/DSHS COMPREHENSIVE MITIGATION PLAN

Introduction

Recent reports highlight the rapid increase of confirmed COVID-19 cases in nursing homes and assisted living communities in Texas. According to the Health and Human Services Commission (HHSC), approximately 19 percent of nursing homes and three percent of assisted living communities have reported positive cases.

There are 1,220 nursing facilities in Texas as of April 25, 2020. As of that date, Texas has 90,689 residents in nursing facilities across the state. The Texas Health Care Association estimates 150,000 staff work in these facilities across Texas, such as healthcare workers, auxiliary, and other staff.

HHSC has developed this comprehensive mitigation plan, including recommendations to help prevent the spread of COVID-19 cases in long-term care facilities. The recommendations set forth in this plan are strategies to help mitigate the further spread of COVID-19. These recommendations are designed to further decrease the risk for spread of infection of COVID-19 in nursing facilities. These recommendations are based on observation of effective and ineffective control methods in the field as this crisis has progressed.

COVID-19 in Nursing Facilities

![Nursing Facility COVID-19 Chart](chart.png)

- **# of Staff Positive**
- **# of Residents Positive**
- **Total Deaths**
- **Facilities Affected**
Recommendations — Nursing Facilities

The number of infections of staff and residents in nursing facilities continues to grow. The number of fatalities of nursing facility residents continues to grow. Enhanced response and control measures are needed to ensure greater protection for those vulnerable Texans and their families.

A consistent and strong response is needed now to effectively bend the COVID-19 curve in these facilities. This order will ensure all nursing facilities engage in strong and comprehensive mitigation plans to control infection spread.

**Recommendation 1: Quantify the extent of the infection immediately:** The first step in the process is to know exactly what level of infection exists at a facility. Upon the first positive test result of a nursing facility staff member or resident, the facility shall work with local health authorities, DSHS, and HHSC to coordinate testing of nursing facility staff and residents. In addition, nursing facilities will have access to the Rapid Assessment Quick Response Force to provide rapid response and a medical triage team that can be deployable by DSHS through the Emergency Medical Task Force upon notification of a positive COVID-19 patient. If needed, an additional team can be sent to assist the facility with immediate needs.

**Recommendation 2: Implement a comprehensive mitigation plan:** First, the facility should immediately initiate measures to control the infection using best practices and CDC requirements. Second, as soon as any test results are available, the facility shall further implement a comprehensive mitigation plan that takes into account the extent of the test results and directly addresses all isolation, infection control, staffing, and other operational aspects of the facility. The mitigation plan must address the specific level of infection that is discovered in that facility.

**Recommendation 3: Re-evaluate current COVID-19 positive facilities:** Those currently positive facilities that have not completed comprehensive testing will need to conduct an assessment of their current infection levels and consult with local health authorities, DSHS, and HHSC to coordinate testing of nursing facility staff and residents. The facility will then develop and implement a comprehensive mitigation plan with any additional testing results taken into consideration.

This will require the state regulatory and public health experts, local public health partners, and health system partners to engage with the nursing facility to ensure that collection kits are available, and that testing is conducted quickly and efficiently, so that the comprehensive mitigation plan is implemented immediately.

**Recommendation 4: Appropriate isolation and placement of COVID-19 patients:** The comprehensive mitigation plans should first and foremost focus on complete containment of the infection level present at that facility. The residents who are positive need to be isolated in the most effective manner available such as removal to a different facility (possibly a COVID-19 positive dedicated facility) or removal to an isolated wing of their facility. The facility should also place limitations on movement of positive residents within the facility, as well as relocate any residents to designated COVID-19 negative areas/wings.

**Recommendation 5: Implement enhanced access controls to the facility:** The mitigation plan shall manage and control access to the facility by the healthcare partners who frequent the facility and any other individuals providing critical services in the facility. The plan should keep individuals from interacting with both positive
and non-positive patients. This should include complete limitations on any unnecessary visitations, enhanced screening and decontamination techniques, and limited access to the facility through special entrances to control infection.

**Recommendation 6: Enhance control of staff access to the facility:** To the greatest extent possible, facilities should discourage staff and employees from working at multiple facilities. This is not a prohibition, which could lead to further staffing shortages, but additional control measures should be taken, and, in some circumstances, limitations are necessary. Facilities should establish very clear definitions, roles, and requirements for each different type of clinical or staffing partner which is employed by or provides services within a nursing facility. The screening criteria above should reflect the risk factors for each type of partner. Additionally, facilities should strengthen existing protocols for third party providers who “come and go” to deliver services at other facilities, ensuring the use of a separate entrance and exit, decontamination practices, and greater screening criteria or restrictions if a person has been at a facility with COVID-19 positive results.

**Recommendation 7: Effective notifications:** The facility shall implement immediate measures to inform all who interact (or may have recently interacted) with a facility with positive patient(s) so that further limitations can be enacted to control the spread of infection to residents, family members, medical staff, therapists, and other service providers who may frequent the facility. This needs to be done in strict adherence to CDC guidelines, DSHS guidance, the Centers for Medicare and Medicaid (CMS) guidance, and the HHSC Nursing Facility Response Plan.

**Recommendation 8: Continue prevention efforts in facilities that do not have an infection:** Facilities that do not have a positive detection to-date will continue to undergo infection control assessments and enhancements in compliance with guidance from CDC guidelines, DSHS guidance, the Centers for Medicare and Medicaid (CMS) guidance, and the HHSC Nursing Facility Response Plan. HHSC staff will engage with local facilities to provide additional support and help identify any required changes or enhancements to infection control strategies/procedures to minimize the risk of introducing COVID-19 into the facility.

This plan requires strong partnership and engagement between all local and state officials. Upon a positive test result, the nursing facility must notify and work with local public health department officials, HHSC regulatory staff, and DSHS public health experts to seek input so that the comprehensive mitigation plan is in compliance with this order. Nursing facilities must also adhere to reporting requirements established by CMS.

DSHS and HHSC will develop additional guidance to other long-term care facilities (such as assisted living facilities and intermediate care facilities and others) to enhance infection control standards in those facilities. Finally, agency staff will develop the standards for recovery for staff and residents in a long-term care facility, which will inform any modifications to mitigation strategies and the need for any further testing.
TESTING TEXAS

Testing is the foundation on which the plan to open Texas is built. Testing can identify critical hotspots, catch outbreaks before they spread, and indicate where support is needed most.

The level of testing needed to fight — and defeat — COVID-19 is unprecedented in history and poses a great challenge, but Texas will rise to that challenge, knowing that the health and safety of our neighbors, our first responders, and our loved ones depends on it.

In order to open Texas, we are testing widely and often. Testing and tracing of COVID-19 relies on nucleic acid detection (PCR) for acute infection. Texas has maximized testing capacity to perform 15,000 – 20,000 tests a day, with a goal to reach 30,000 per day in the near term with rapid turnaround.

These efforts span from our biggest cities to our smallest towns, reaching young and old alike. From community colleges to retail parking lots, Texas is standing up a statewide testing operation equal to the spread and severity of the disease.

More than 300 sites across the state are now listed on the state website.

At least 17 mobile drive-thru teams have been trained and deployed by the Texas Military Department primarily to serve rural areas, in order to offer state-supported testing in every Texas county. Texas will have 25 fully operational mobile testing teams before the end of April. Their service, like the service of those on the frontlines of our hospitals and nursing facilities, will help keep Texans safe as we open the state.

The State’s testing policy is aligned with CDC guidance and directed by DSHS. Testing is currently focused specifically on hospitalized patients, those in long-term care facilities, healthcare workers and first-responders, and Texans over the age of 65.

As resources allow, individuals with mild symptoms could also be tested.

At this time, it is imperative to focus testing on those who need it most — both symptomatic people and Texans at high risk, like nursing home residents and healthcare workers. The State is not recommending that individuals without symptoms just get a test to check the result. CDC and DSHS testing strategy is being followed.

As testing in Texas is rapidly expanded, Texans can go online to check their symptoms to learn if they should be tested for COVID-19, and where to go to get tested at www.texas.gov. The ability to quickly search an interactive map to find the nearest testing location, including hours and directions, will ensure that those Texans most in need of testing can access it easily, while protecting the health of those around them.

COVID-19 is a formidable enemy, but Texans don’t shrink from a fight. By continuing to focus on and expand our testing capabilities, Texas is surely and steadily winning that fight.
TEXAS ACTIONS TO INCREASE AVAILABILITY OF COVID-19 TESTING

OVERVIEW

The Texas Department of State Health Services (DSHS), the Texas Division of Emergency Management (TDEM), the Governor’s Supply Chain Strike Force, and Texas Military Department are working on several fronts to continuously expand access to COVID-19 testing throughout the state. These efforts are in the following categories:

- Identifying and maximizing current laboratory capacity.
- Producing, procuring and distributing testing supplies needed to collect and transport specimens to a testing laboratory: collection swabs and transport media. Texas Tech University Health Sciences Center has begun making vial transport media.
- Expanding laboratory capacity, including at the DSHS laboratory and through new testing platforms, such as Abbott Labs ID Now. Texas Veterinary Medical Diagnostic Lab gained CLIA certification to begin running COVID-19 testing.
- Using the Texas Military Department teams to establish mobile collection sites.
- Creating an interactive map of test collection locations across the state.
- Developing a testing strategy for the state.

This partnership among state agencies and the Supply Chain Strike Force is continuing to identify and determine how to operationalize these strategies.

EXPANDED PUBLIC HEALTH TESTING

DSHS Austin Laboratory Capacity

- DSHS Public Health Laboratory has implemented a new type of COVID-19 test from PerkinElmer. This occurred the week of April 13, 2020.
- This allows the laboratory to increase specimen processing to as much as 800 per day. The previous maximum number of daily tests was 150.
- This adjustment also means that the DSHS laboratory is pulling laboratory supplies from a different resource pool than the other public health laboratories.
- DSHS will use this laboratory capacity to:
  - Back up public health laboratories if they run out of supplies or reagents or are running a backlog
  - Test for outbreaks in long-term care facilities and congregate settings

Public Health Testing Criteria

- The Texas public health testing criteria matches federal testing criteria. The updated criteria includes:
  - Asymptomatic first responders and asymptomatic healthcare workers
- DSHS is also finalizing testing guidance specific to long-term care outbreaks.
  - DSHS will use its capacity to support this effort.
LABORATORY SUPPLY ACQUISITION

Supply Chain Strike Force

- The Governor’s Supply Chain Strike Force continues working with TDEM and DSHS to acquire and distribute testing supplies, including:
  - Collection swabs to take specimens from a person being tested
  - Transport media to preserve the specimens while en route to a lab
  - Testing reagents for laboratories to process the specimens

ABBOTT LABORATORIES ID NOW

Private Distribution

- Abbott Laboratories has indicated it is distributing its test cartridge production directly to hospitals and facilities in Texas.

Public Health Distribution

- Separately, DSHS received 30 Abbott Labs ID Now point-of-care testing meters and a supply of test kits, which each test 24 people.
- Abbott Labs ID Now machines were distributed to public health labs across the state.
- After a second shipment of test kits on April 14, DSHS distributed the remaining test kits and machines.
- DSHS transferred the remaining ID Now meters to allow local partnerships with entities already receiving test kits as part of Abbott Laboratories’ private distributions:
- Abbott Laboratories has stated it will continue delivering test kits. Both DSHS and other Texas public health labs are requesting additional kits regularly.

TEXAS MILITARY DEPARTMENT ROVING TEST COLLECTION SITES

- TMD has activated 1,165 personnel to enhance the state’s testing capacity. This includes 25 teams to conduct community-based fixed and mobile testing collection sites. Seventeen teams are currently conducting tests as of April 26; eight teams are scheduled to complete their training by April 30.
  - Their efforts will focus in part on rural areas of the state and on areas of the state with less access to testing.
- TDEM and DSHS are working with the Texas Military Department to support this effort with:
  - Personal Protective Equipment
  - Training
  - Collection swabs
  - Policy and operational guidance
The Texas Department of Public Safety, Texas Parks and Wildlife Department, Texas A&M Engineering Extension Service, and Texas A&M AgriLife Extension are transporting swabs from testing collection sites to laboratories for testing.

UT-Medical Branch and UT-Southwestern are supporting this effort through laboratory testing.

As of April 26, TMD has conducted initial deployments in 48 counties, and is working to offer state-supported testing in every Texas county.

FEDERAL-SUPPORTED DRIVE THRU TEST COLLECTION SITES

Since early in the response, FEMA has supported drive-thru testing locations throughout the state.

FEMA support enabled local jurisdictions to set up drive-thru testing sites in Bexar County, Dallas County, El Paso County, Harris County, and Travis County.

DSHS is also offering testing capacity through its lab to allow the El Paso drive thru site to increase testing levels.

STATEWIDE COVID-19 TEST COLLECTION MAP

TDEM and DSHS recently established a COVID-19 Test Collection Site Finder on www.texas.gov.

The functionality will allow Texans to enter their address and find testing locations near them.

There are currently over 300 locations available on the site.

STATE TESTING STRATEGY GOING FORWARD

State government will focus on three primary areas:
- Increase access and awareness to testing
- Increase lab capacity through the use of public labs
- Drive focused strategies for the high-risk and vulnerable population

State government will work with the private sector in the following ways:
- Work with the private labs allocate capacity to support testing
- Assess new test innovations for use in Texas
- Enable virtual care through use of technology

Antibody testing is being investigated in Texas and across the nation. The State will be working with the CDC and other federal health authorities on this important issue as the science develops.
DSHS STATEWIDE CONTACT TRACING PROGRAM FOR TEXAS

Statewide Contact Tracing Program for Texas
As Texas opens and individuals return to work, it is imperative that public health authorities identify not only those who are ill with COVID-19 but also those individuals who have come in contact with a person who is ill. This contact tracing allows public health authorities to identify individuals who are also ill and who may not realize their symptoms are COVID-19 related, and others who are not symptomatic but need to be educated on how to monitor for symptoms and isolate if symptoms occur. Testing identifies individuals who need to isolate. Contact tracing is a core function of public health. Coordination between state and local public health officials is fundamental to contact tracing success. This ongoing pattern will box in the disease and will slow and can even stop further spread.

Critical Elements
Successful implementation of statewide contact tracing efforts is dependent on several critical elements: workforce recruitment and training; IT infrastructure; coordination with local health entities; and communication.

Implementation
DSHS is implementing statewide COVID-19 contact tracing in phases. This phased approach will build upon existing contact tracing efforts and allows DSHS to begin implementation more quickly as the first phase can be up and running while DSHS is bringing up additional phases.

PHASE I – Completed by April 27, 2020
- Assemble a team, including all necessary disciplines
- Create work plans and identify project leads
- Create training for workforce
- Recruit, train, and mobilize 1,157 state and local contact tracers
- Procure contact tracing IT application:
  - Self-checker
  - Ability for public to self-report
  - Testing location information
  - Data collection and management
  - Reporting and visualization
- Stand-up COVID-19 contact tracing call center
- Initiate communication with local health entities

PHASE II – Initiate by April 27, 2020
- Add an additional 1,000 contact tracers:
  - Schools of Public Health
  - Community Health Workers
  - Medical and Nursing Students
  - Public School Nurses
- Deploy contact tracing application statewide
- Deploy self-reporting solution
- Launch COVID-19 contact tracing call center
- Initiate communication plan for the public to obtain information and self-report symptoms
- Identify and train additional workforce
**PHASE III** – Initiate by May 11, 2020

- Fully mobilize contact tracing workforce of up to 4,000
- Expand contact tracing application to local health entities
- Continued support of contact tracing call center

**Key Considerations**

- Expanded testing
- Isolation – wrap-around support
- Protect vulnerable populations
- Engage communities
- Strengthen partnership with local health entities

**BOXING IT IN**

HOW CONTACT TRACING WORKS

Information sources that lead Health Department to identify a case

- Laboratory test report
- Outbreak investigations
- Case self-reporting (e.g., via phone app)

Case then identifies, for the Health Department, the individuals with whom they have had prolonged interaction (i.e., contacts)

Contact tracer interviews the contacts

- Contact has symptoms
  - Contact self-isolates and is tested by a healthcare provider
    - Contact tests positive for COVID-19
      - Contact self-isolates during infection
        - Contact returns to normal routine after criteria are met
    - Contact develops symptoms
  - Contact returns to normal routine

- Contact does not have symptoms
  - Contact develops symptoms
    - Contact self-quarantines for 14 days from last interaction with case
      - Contact does not develop symptoms
        - Contact returns to normal routine
STEPS TO OPEN TEXAS BUSINESSES

The virus that causes COVID-19 can be spread to others by infected persons who appear to have few or no symptoms.

Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk.

Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols on the following pages, all of which will support a safe and measured reopening of Texas.

The virus that causes COVID-19 is still circulating in our communities.

We should continue to observe practices that protect everyone, including those who are most vulnerable.

Individuals, employers, employees, and customers are encouraged to review, print out, and follow the MINIMUM health protocols recommended by DSHS in the checklists on the following pages, in addition to federal and state employment laws and workplace safety standards. The DSHS minimum recommended health protocols are subject to change based on new and evolving information.

Additional information resources for businesses:

- ADA: https://www.ada.gov/emerg_prep.html
- OSHA: https://www.osha.gov/SLTC/covid-19/
In accordance with Governor Abbott’s executive order GA-18, the following are the minimum recommended health protocols for all individuals in Texas. These minimum health protocols are not a limit on the health protocols that individuals may adopt. Individuals are encouraged to adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all Texans.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Individuals should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization.

Health protocols for individuals:

- Maintain at least 6 feet separation from other individuals not within the same household. If such distancing is not feasible, other measures such as face covering, hand hygiene, cough etiquette, cleanliness, and sanitation should be rigorously practiced.

- Self-screen before going into a business for any of the following new or worsening signs or symptoms of possible COVID-19:
  - Cough
  - Shortness of breath or difficulty breathing
  - Chills
  - Repeated shaking with chills
  - Muscle pain
  - Headache
  - Sore throat
  - Loss of taste or smell
  - Diarrhea
  - Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
  - Known close contact with a person who is lab confirmed to have COVID-19

- Wash or disinfect hands upon entering a business and after any interaction with employees, other customers, or items in the business.

- Consistent with the actions taken by many individuals across the state, consider wearing cloth face coverings (over the nose and mouth) when entering a business, or when within 6 feet of another person who is not a member of the individual’s household. If available, individuals should consider wearing non-medical grade face masks.
In accordance with Governor Abbott’s executive order GA-18, the following are the minimum recommended health protocols for all businesses choosing to operate in Texas. Employers may adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all employees and customers.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Employers should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization. Employers should also be mindful of federal and state employment laws and workplace safety standards.

Health protocols for your employees:

☐ Train all employees on appropriate cleaning and disinfection, hand hygiene, and respiratory etiquette.

☐ Screen employees before coming into the business:

☐ Send home any employee who has any of the following new or worsening signs or symptoms of possible COVID-19:
  - Cough
  - Shortness of breath or difficulty breathing
  - Chills
  - Repeated shaking with chills
  - Muscle pain
  - Headache
  - Sore throat
  - Loss of taste or smell
  - Diarrhea
  - Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
  - Known close contact with a person who is lab confirmed to have COVID-19

☐ Do not allow employees with the new or worsening signs or symptoms listed above to return to work until:
  - In the case of an employee who was diagnosed with COVID-19, the individual may return to work when all three of the following criteria are met: at least 3 days (72 hours) have passed
ALL EMPLOYERS: Page 2 of 2

since recovery (resolution of fever without the use of fever-reducing medications); and the individual has improvement in respiratory symptoms (e.g., cough, shortness of breath); and at least 7 days have passed since symptoms first appeared; or

- In the case of an employee who has symptoms that could be COVID-19 and does not get evaluated by a medical professional or tested for COVID-19, the individual is assumed to have COVID-19, and the individual may not return to work until the individual has completed the same three-step criteria listed above; or

- If the employee has symptoms that could be COVID-19 and wants to return to work before completing the above self-isolation period, the individual must obtain a medical professional’s note clearing the individual for return based on an alternative diagnosis.

☐ Do not allow an employee with known close contact to a person who is lab-confirmed to have COVID-19 to return to work until the end of the 14 day self-quarantine period from the last date of exposure (with an exception granted for healthcare workers and critical infrastructure workers).

☐ Have employees wash or sanitize their hands upon entering the business.

☐ Have employees maintain at least 6 feet separation from other individuals. If such distancing is not feasible, other measures such as face covering, hand hygiene, cough etiquette, cleanliness, and sanitation should be rigorously practiced.

☐ If an employer provides a meal for employees, employers are recommended to have the meal individually packed for each employee.

☐ Consistent with the actions taken by many employers across the state, consider having all employees wear cloth face coverings (over the nose and mouth). If available, employees should consider wearing non-medical grade face masks.

Health protocols for your facilities:

☐ Regularly and frequently clean and disinfect any regularly touched surfaces, such as doorknobs, tables, chairs, and restrooms.

☐ Disinfect any items that come into contact with customers.

☐ Make hand sanitizer, disinfecting wipes, soap and water, or similar disinfectant readily available to employees and customers.

☐ Place readily visible signage at the business to remind everyone of best hygiene practices.
As outlined in Governor Abbott’s executive order GA-18, non-essential retailers may operate up to 25% of the total listed occupancy. In addition, non-essential retailers may operate through pickup, delivery by mail, or delivery to the customer’s doorstep. Shopping malls may operate at up to 25% of the total listed occupancy of the shopping mall, but shopping mall food court dining areas, play areas, and interactive displays and settings must remain closed.

In accordance with Governor Abbott’s executive order GA-18, the following are the minimum recommended health protocols for all retailers choosing to operate in Texas. Retailers may adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all employees and customers.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Retailers should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization. Retailers should also be mindful of federal and state employment laws and workplace safety standards.

Health protocols for serving your customers:

- Retailers are encouraged to consider dedicating a certain period of time each day for only at-risk customers\(^1\) or deliver purchased goods to vehicles to reduce the need for at-risk customers to enter the store.
- If practical, monitor what items customers touch to clean or disinfect when the customer leaves the retail establishment.
- Contactless payment is encouraged. Where not available, contact should be minimized.

\(^1\) At-risk customers are those who are 65 or older, especially those with chronic lung disease; moderate to severe asthma; chronic heart disease; severe obesity; diabetes; chronic kidney disease undergoing dialysis; liver disease; or weakened immune system.
MINIMUM STANDARD HEALTH PROTOCOLS

RETAILERS: Page 2 of 3

Health protocols for your retail employees:

☐ Train all employees on appropriate cleaning and disinfection, hand hygiene, and respiratory etiquette.

☐ Screen employees before coming into the retailer:
  ☐ Send home any employee who has any of the following new or worsening signs or symptoms of possible COVID-19:
    - Cough
    - Shortness of breath or difficulty breathing
    - Chills
    - Repeated shaking with chills
    - Muscle pain
    - Headache
    - Sore throat
    - Loss of taste or smell
    - Diarrhea
    - Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
    - Known close contact with a person who is lab confirmed to have COVID-19

☐ Do not allow employees with the new or worsening signs or symptoms listed above to return to work until:
  - In the case of an employee who was diagnosed with COVID-19, the individual may return to work when all three of the following criteria are met: at least 3 days (72 hours) have passed since recovery (resolution of fever without the use of fever-reducing medications); and the individual has improvement in respiratory symptoms (e.g., cough, shortness of breath); and at least 7 days have passed since symptoms first appeared; or
  - In the case of an employee who has symptoms that could be COVID-19 and does not get evaluated by a medical professional or tested for COVID-19, the individual is assumed to have COVID-19, and the individual may not return to work until the individual has completed the same three-step criteria listed above; or
  - If the employee has symptoms that could be COVID-19 and wants to return to work before completing the above self-isolation period, the individual must obtain a medical professional’s note clearing the individual for return based on an alternative diagnosis.

☐ Do not allow an employee with known close contact to a person who is lab-confirmed to have COVID-19 to return to work until the end of the 14 day self-quarantine period from the last date of exposure (with an exception granted for healthcare workers and critical infrastructure workers).

☐ Have employees wash or sanitize their hands upon entering the retailer.
MINIMUM STANDARD HEALTH PROTOCOLS

RETAILERS: Page 3 of 3

☐ Have employees maintain at least 6 feet separation from other individuals. If such distancing is not feasible, other measures such as face covering, hand hygiene, cough etiquette, cleanliness, and sanitation should be rigorously practiced.

☐ If an employer provides a meal for employees, employers are recommended to have the meal individually packed for each employee.

☐ Consistent with the actions taken by many retailers across the state, consider having all employees wear cloth face coverings (over the nose and mouth). If available, employees should consider wearing non-medical grade face masks.

Health protocols for your retail facilities:

☐ Regularly and frequently clean and disinfect any regularly touched surfaces, such as doorknobs, tables, chairs, and restrooms.

☐ Disinfect any items that come into contact with customers.

☐ Make hand sanitizer, disinfecting wipes, soap and water, or similar disinfectant readily available to employees and customers.

☐ Place readily visible signage at the retailer to remind everyone of best hygiene practices.
MINIMUM STANDARD HEALTH PROTOCOLS

☑ CHECKLIST FOR RETAIL CUSTOMERS

In accordance with Governor Abbott’s executive order GA-18, the following are the minimum recommended health protocols for all retail customers. These protocols are not a limit on the health protocols that individuals may adopt. Individuals are encouraged to adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all Texans.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Individuals should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization.

Health protocols for retail customers:

☐ Self-screen before going into a retailer for any of the following, and do not go into a retailer with any of the following symptoms:
  ☐ Cough
  ☐ Shortness of breath or difficulty breathing
  ☐ Chills
  ☐ Repeated shaking with chills
  ☐ Muscle pain
  ☐ Headache
  ☐ Sore throat
  ☐ Loss of taste or smell
  ☐ Diarrhea
  ☐ Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
  ☐ Known close contact with a person who is lab confirmed to have COVID-19

☐ Wash or disinfect hands upon entering a retailer and after any interaction with employees, other customers, or items in the retailer.

☐ Maintain at least 6 feet separation from other individuals not within the same household. If such distancing is not feasible, other measures such as face covering, hand hygiene, cough etiquette, cleanliness, and sanitation should be rigorously practiced.

☐ Wash or sanitize hands after the payment process.

☐ Consistent with the actions taken by many individuals across the state, consider wearing cloth face coverings (over the nose and mouth) when entering a retailer, or when within 6 feet of another person who is not a member of the individual's household. If available, individuals should consider wearing non-medical grade face masks.
As outlined in Governor Abbott’s executive order GA-18, restaurants may operate for dine-in service up to 25% of the total listed occupancy of the restaurant, and may not offer valet services except for vehicles with placards or plates for disabled parking. As used in executive order GA-18, this applies only to restaurants that are not required to post the 51% sign required by the Texas Alcoholic Beverage Commission. Restaurants may continue to provide to-go or delivery services.

In accordance with Governor Abbott’s executive order GA-18, the following are the minimum recommended health protocols for all restaurants choosing to operate in Texas. Restaurants may adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all employees and customers.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Restaurants should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization. Restaurants should also be mindful of federal and state employment laws and workplace safety standards.

Health protocols for serving your customers:

- Parties maintain at least 6 feet distance apart from other parties at all times, including while waiting to be seated in the restaurant.
- Make a hand sanitizing station available upon entry to the restaurant.
- No tables of more than 6 people.
- Dining:
  - Do not leave condiments, silverware, flatware, glassware, or other traditional table top items on an unoccupied table
  - Provide condiments only upon request, and in single use (non-reusable) portions.
  - Use disposable menus (new for each patron)
  - If a buffet is offered, restaurant employees serve the food to customers.
- Contactless payment is encouraged. Where not available, contact should be minimized.
Health protocols for your employees:

- Train all employees on appropriate cleaning and disinfection, hand hygiene, and respiratory etiquette.
- Screen employees before coming into the restaurant:
  - Send home any employee who has any of the following new or worsening signs or symptoms of possible COVID-19:
    - Cough
    - Shortness of breath or difficulty breathing
    - Chills
    - Repeated shaking with chills
    - Muscle pain
    - Headache
    - Sore throat
    - Loss of taste or smell
    - Diarrhea
    - Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
    - Known close contact with a person who is lab confirmed to have COVID-19
  - Do not allow employees with the new or worsening signs or symptoms listed above to return to work until:
    - In the case of an employee who was diagnosed with COVID-19, the individual may return to work when all three of the following criteria are met: at least 3 days (72 hours) have passed since recovery (resolution of fever without the use of fever-reducing medications); and the individual has improvement in respiratory symptoms (e.g., cough, shortness of breath); and at least 7 days have passed since symptoms first appeared; or
    - In the case of an employee who has symptoms that could be COVID-19 and does not get evaluated by a medical professional or tested for COVID-19, the individual is assumed to have COVID-19, and the individual may not return to work until the individual has completed the same three-step criteria listed above; or
    - If the employee has symptoms that could be COVID-19 and wants to return to work before completing the above self-isolation period, the individual must obtain a medical professional’s note clearing the individual for return based on an alternative diagnosis.
  - Do not allow an employee with known close contact to a person who is lab-confirmed to have COVID-19 to return to work until the end of the 14 day self-quarantine period from the last date of exposure (with an exception granted for healthcare workers and critical infrastructure workers).
- Have employees wash or sanitize their hands upon entering the restaurant, and between interactions with customers.
MINIMUM STANDARD HEALTH PROTOCOLS

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☐ Have employees maintain at least 6 feet separation from other individuals. If such distancing is not feasible, measures such as face covering, hand hygiene, cough etiquette, cleanliness, and sanitation should be rigorously practiced

☐ Consistent with the actions taken by many restaurants across the state, consider having all employees wear cloth face coverings (over the nose and mouth). If available, employees should consider wearing non-medical grade face masks.

Health protocols for your facilities:

☐ Consider having an employee manage and control access to the restaurant, including opening doors to prevent patrons from touching door handles.

☐ Regularly and frequently clean and disinfect any regularly touched surfaces, such as doorknobs, tables, and chairs.

☐ Regularly and frequently clean restrooms, and document the cleanings.

☐ Disinfect any items that come into contact with customers.

☐ Make hand sanitizer, disinfecting wipes, soap and water, or similar disinfectant readily available to employees and customers.

☐ Place readily visible signage at the restaurant to remind everyone of best hygiene practices.

☐ Clean and disinfect the area used for dining (table, etc.) after each group of customers depart, including the disinfecting of tables, chairs, stalls, and countertops.

☐ Clean and sanitize restaurants daily.
In accordance with Governor Abbott’s executive order GA-18, the following are the minimum recommended health protocols for all restaurant customers in Texas. These minimum health protocols are not a limit on the health protocols that individuals may adopt. Individuals are encouraged to adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all Texans.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Individuals should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization.

Health protocols for restaurant customers:

☐ Maintain at least 6 feet separation from other individuals not within the same party. If such distancing is not feasible, other measures such as face covering when not sitting at the table, hand hygiene, cough etiquette, cleanliness, and sanitation should be rigorously practiced.

☐ Self-screen before going into a restaurant for any of the following new or worsening signs or symptoms of possible COVID-19:
  ☐ Cough
  ☐ Shortness of breath or difficulty breathing
  ☐ Chills
  ☐ Repeated shaking with chills
  ☐ Muscle pain
  ☐ Headache
  ☐ Sore throat
  ☐ Loss of taste or smell
  ☐ Diarrhea
  ☐ Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
  ☐ Known close contact with a person who is lab confirmed to have COVID-19

☐ Wash or disinfect hands upon entering a restaurant and after any interaction with employees, other customers, or items in the restaurant.

☐ No tables of more than 6 people.

☐ Customers should wash or sanitize their hands after the payment process.

☐ Consistent with the actions taken by many individuals across the state, consider wearing cloth face coverings (over the nose and mouth) when not at the table, or when within 6 feet of another person who is not a member of the individual’s household. If available, individuals should consider wearing non-medical grade face masks.
As outlined in Governor Abbott’s executive order GA-18, movie theaters may operate up to 25% of the total listed occupancy of any individual theater for any screening.

In accordance with Governor Abbott’s executive order GA-18, the following are the minimum recommended health protocols for all movie theaters choosing to operate in Texas. Movie theaters may adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all employees and customers.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Movie theaters should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization. Movie theaters should also be mindful of federal and state employment laws and workplace safety standards.

Health protocols for serving your customers:

☐ Movie theaters are encouraged to utilize remote ticketing options to help manage capacity limitations.

☐ Ensure proper spacing between patrons in the movie theater:

☐ Keep at least two empty seats (or six feet separation) between parties in any row, except as follows:
  - Two or more members of the same household can sit adjacent to one another, with two seats (or six feet separation) empty on either side.
  - Two individuals who are not members of the same household but who are attending together can sit adjacent to one another, with two seats (or six feet separation) empty on either side.

☐ Alternate rows between customers (every other row left empty).

☐ Disinfect seats and frequently touched areas between screenings.

☐ For movie theaters providing food service to patrons:

☐ Do not leave condiments, silverware, flatware, glassware, or other traditional table top items on an unoccupied table.
MINIMUM STANDARD HEALTH PROTOCOLS

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☐ Provide condiments only upon request, and in single use (non-reusable) portions.
☐ Clean and disinfect the area used for dining (table, etc.) after each group of customers depart the theater.
☐ Use disposable menus (new for each patron).
☐ If the theater allows customers to write down their food orders inside the theater, provide take-home pencils and notepads that cannot be used by other customers.
☐ Have wait staff sanitize or wash hands between interactions with customers.

☐ Movie theaters with counter food service for patrons:
☐ Provide condiments or flatware only in single use, individually-wrapped items, and provide condiments only upon request.
☐ Have employees follow proper food-handling protocols.
☐ Disinfect any items that come into contact with customers.

☐ Contactless payment is encouraged. Where not available, contact should be minimized.

Health protocols for your theater employees:

☐ Train all employees on appropriate cleaning and disinfection, hand hygiene, and respiratory etiquette.
☐ Screen employees before coming into the movie theater:
☐ Send home any employee who has any of the following new or worsening signs or symptoms of possible COVID-19:
  - Cough
  - Shortness of breath or difficulty breathing
  - Chills
  - Repeated shaking with chills
  - Muscle pain
  - Headache
  - Sore throat
  - Loss of taste or smell
  - Diarrhea
  - Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
  - Known close contact with a person who is lab confirmed to have COVID-19

☐ Do not allow employees with the new or worsening signs or symptoms listed above to return to work until:
  - In the case of an employee who was diagnosed with COVID-19, the individual may return to work when all three of the following criteria are met: at least 3 days (72 hours) have passed
MINIMUM STANDARD HEALTH PROTOCOLS

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since recovery (resolution of fever without the use of fever-reducing medications); and the individual has improvement in respiratory symptoms (e.g., cough, shortness of breath); and at least 7 days have passed since symptoms first appeared; or

- In the case of an employee who has symptoms that could be COVID-19 and does not get evaluated by a medical professional or tested for COVID-19, the individual is assumed to have COVID-19, and the individual may not return to work until the individual has completed the same three-step criteria listed above; or

- If the employee has symptoms that could be COVID-19 and wants to return to work before completing the above self-isolation period, the individual must obtain a medical professional’s note clearing the individual for return based on an alternative diagnosis.

☐ Do not allow an employee with known close contact to a person who is lab-confirmed to have COVID-19 to return to work until the end of the 14 day self-quarantine period from the last date of exposure (with an exception granted for healthcare workers and critical infrastructure workers).

☐ Have employees wash or sanitize their hands upon entering the movie theater, and between interactions with customers.

☐ Have employees maintain at least 6 feet separation from other individuals. If such distancing is not feasible, other measures such as face covering, hand hygiene, cough etiquette, cleanliness, and sanitation should be rigorously practiced.

☐ If an employer provides a meal for employees, employers are recommended to have the meal individually packed for each employee.

☐ Consistent with the actions taken by many businesses across the state, consider having all employees wear cloth face coverings (over the nose and mouth). If available, employees should consider wearing non-medical grade face masks.

Health protocols for your theater facilities:

☐ Regularly and frequently clean and disinfect any regularly touched surfaces, such as doorknobs, tables, chairs, and restrooms.

☐ Disinfect any items that come into contact with customers.

☐ Make hand sanitizer, disinfecting wipes, soap and water, or similar disinfectant readily available to employees and customers.

☐ Place readily visible signage at the movie theater to remind everyone of best hygiene practices.

☐ Clean and disinfect the area used for dining (table, etc.) after each group of customers depart, including the disinfecting of tables, chairs, stalls, and countertops.
In accordance with Governor Abbott’s executive order GA-18, the following are the minimum recommended health protocols for all movie theater customers. These minimum health protocols are not a limit on the health protocols that individuals may adopt. Individuals are encouraged to adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all Texans.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Individuals should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization.

Health protocols for theater customers:

☐ Maintain at least 6 feet separation from other individuals who are not attending the movie together. If such distancing is not feasible, other measures such as face covering, hand hygiene, cough etiquette, cleanliness, and sanitation should be rigorously practiced.

☐ Self-screen before going into a movie theater for any of the following new or worsening signs or symptoms of possible COVID-19:

☐ Cough
☐ Shortness of breath or difficulty breathing
☐ Chills
☐ Repeated shaking with chills
☐ Muscle pain
☐ Headache

☐ Sore throat
☐ Loss of taste or smell
☐ Diarrhea
☐ Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
☐ Known close contact with a person who is lab confirmed to have COVID-19

☐ Wash or disinfect hands upon entering a movie theater and after any interaction with employees, other customers, or items in the movie theater.

☐ Consistent with the actions taken by many individuals across the state, consider wearing cloth face coverings (over the nose and mouth) when entering a movie theater, or when within 6 feet of another person who is not a member of the individual’s household. If available, individuals should consider wearing non-medical grade face masks.

☐ Wash or sanitize hands after the payment process.
As outlined in Governor Abbott’s executive order GA-18, museums and libraries may operate up to 25% of the total listed occupancy, and must close any components of the museum or library that have interactive functions or exhibits, including child play areas. Local public museums and libraries may operate only if permitted by the local government.

In accordance with Governor Abbott’s executive order GA-18, the following are the minimum recommended health protocols for all museums and libraries choosing to operate in Texas. Museums and libraries may adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all employees and customers.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Museums and libraries should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization. Museums and libraries should also be mindful of federal and state employment laws and workplace safety standards.

Health protocols for your employees:

- Train all employees on appropriate cleaning and disinfection, hand hygiene, and respiratory etiquette.
- Screen employees before coming into the museum or library:
  - Send home any employee who has any of the following new or worsening signs or symptoms of possible COVID-19:
    - Cough
    - Shortness of breath or difficulty breathing
    - Chills
    - Repeated shaking with chills
    - Muscle pain
    - Headache
    - Sore throat
    - Loss of taste or smell
    - Diarrhea
    - Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
    - Known close contact with a person who is lab confirmed to have COVID-19
- Do not allow employees with the new or worsening signs or symptoms listed above to return to work until:
  - In the case of an employee who was diagnosed with COVID-19, the individual may return to
work when all three of the following criteria are met: at least 3 days (72 hours) have passed since recovery (resolution of fever without the use of fever-reducing medications); and the individual has improvement in respiratory symptoms (e.g., cough, shortness of breath); and at least 7 days have passed since symptoms first appeared; or

- In the case of an employee who has symptoms that could be COVID-19 and does not get evaluated by a medical professional or tested for COVID-19, the individual is assumed to have COVID-19, and the individual may not return to work until the individual has completed the same three-step criteria listed above; or

- If the employee has symptoms that could be COVID-19 and wants to return to work before completing the above self-isolation period, the individual must obtain a medical professional’s note clearing the individual for return based on an alternative diagnosis.

☐ Do not allow an employee with known close contact to a person who is lab-confirmed to have COVID-19 to return to work until the end of the 14 day self-quarantine period from the last date of exposure (with an exception granted for healthcare workers and critical infrastructure workers).

☐ Have employees wash or sanitize their hands upon entering the museum or library, and between interactions with visitors.

☐ Have employees maintain at least 6 feet separation from other individuals. If such distancing is not feasible, measures such as face covering, hand hygiene, cough etiquette, cleanliness, and sanitation should be rigorously practiced.

☐ If an employer provides a meal for employees, employers are recommended to have the meal individually packed for each employee.

☐ Consistent with the actions taken by many businesses across the state, consider having all employees wear cloth face coverings (over the nose and mouth). If available, employees should consider wearing non-medical grade face masks.

Health protocols for your facilities:

☐ Regularly and frequently clean and disinfect any regularly touched surfaces, such as doorknobs, tables, chairs, and restrooms.

☐ Disinfect any items that come into contact with visitors.

☐ Make hand sanitizer, disinfecting wipes, soap and water, or similar disinfectant readily available to employees and visitors.

☐ Place readily visible signage at the facility to remind everyone of best hygiene practices.
MINIMUM STANDARD HEALTH PROTOCOLS

☑  CHECKLIST FOR ALL MUSEUM AND LIBRARY VISITORS  

In accordance with Governor Abbott’s executive order GA-18, the following are the minimum recommended health protocols for all museum and library visitors in Texas. These minimum health protocols are not a limit on the health protocols that individuals may adopt. Individuals are encouraged to adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all Texans.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Individuals should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization.

Health protocols for museum and library visitors:

☐ Maintain at least 6 feet separation from other individuals not attending the museum or library together. If such distancing is not feasible, other measures such as face covering, hand hygiene, cough etiquette, cleanliness, and sanitation should be rigorously practiced.

☐ Self-screen before going into a museum or library for any of the following, new or worsening signs or symptoms of possible COVID-19:
  ☐ Cough
  ☐ Shortness of breath or difficulty breathing
  ☐ Chills
  ☐ Repeated shaking with chills
  ☐ Muscle pain
  ☐ Headache
  ☐ Sore throat
  ☐ Loss of taste or smell
  ☐ Diarrhea
  ☐ Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit.
  ☐ Known close contact with a person who is lab confirmed to have COVID-19

☐ Wash or disinfect hands upon entering a museum or library and after any interaction with employees, other visitors, or items in the museum or library.

☐ Consistent with the actions taken by many individuals across the state, consider wearing cloth face coverings (over the nose and mouth) when entering a museum or library, or when within 6 feet of another person who is not a member of the individual’s household. If available, individuals should consider wearing non-medical grade face masks.
MINIMUM STANDARD HEALTH PROTOCOLS

☑ CHECKLIST FOR OUTDOOR SPORTS PARTICIPANTS

As outlined in Governor Abbott’s executive order GA-18, individuals may engage in outdoor sports, provided that the sports do not include contact with other participants, and no more than four participants play the sport at any time. Please note, under executive order GA-18, individuals shall avoid public swimming pools.

In accordance with Governor Abbott’s executive order GA-18, the following are the minimum recommended health protocols for all individuals engaging in outdoor sports in Texas. These minimum health protocols are not a limit on the health protocols that individuals may adopt. Individuals are encouraged to adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all Texans.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Individuals should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization.

Health protocols for outdoor sports participants:

☐ Self-screen before playing in an outdoor sport for any of the following, new or worsening signs or symptoms of possible COVID-19:

☐ Cough
☐ Shortness of breath or difficulty breathing
☐ Chills
☐ Repeated shaking with chills
☐ Muscle pain
☐ Headache
☐ Sore throat
☐ Loss of taste or smell
☐ Diarrhea
☐ Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
☐ Known close contact with a person who is lab confirmed to have COVID-19

☐ Special consideration for golf courses:

☐ Clean and sanitize golf carts and push carts between uses.
☐ Except for members of the same household, no more than one individual per golf cart.
☐ Clean and disinfect driving range golf balls between use.
☐ Ensure separation of at least 6 feet between golfers on the driving range.
The Office of the Attorney General and the Office of the Governor have been providing joint guidance regarding the effect of executive orders on religious services conducted in churches, congregations, and places of worship. Below is an excerpt from the joint guidance for executive order GA-18, issued on April 27, 2020. The same minimum standard health protocols would apply to funeral services, burials, and memorials.

In accordance with Governor Abbott’s executive order GA-18, the following are the minimum recommended health protocols for all churches, congregations, and places of worship in Texas. Churches, congregations, and places of worship may adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all Texans. The same minimum standard health protocols would apply to funeral services, burials, and memorials.

We know now that the virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Churches, congregations, and places of worship should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization. Churches, congregations, and places of worship should also be mindful of federal and state employment laws and workplace safety standards.

Health protocols for serving your attendees:

- Strongly encourage the at-risk population\(^2\) to watch or participate in the service remotely.
- Designate an area inside the facility reserved for the at-risk population, or offer a service for at-risk population attendees only.
- Ensure proper spacing between attendees:
  - Keep at least two empty seats (or six feet separation) between parties in any row, except as follows:
    - Two or more members of the same household can sit adjacent to one another, with two seats (or six feet separation) empty on either side.

\(^2\) At-risk population are those who are 65 or older, especially those with chronic lung disease; moderate to severe asthma; chronic heart disease; severe obesity; diabetes; chronic kidney disease undergoing dialysis; liver disease; or weakened immune system
CHURCHES/PLACES OF WORSHIP: Page 2 of 3

- Two individuals who are not members of the same household but who are attending together can sit adjacent to one another, with two seats (or six feet separation) empty on either side.

☐ Alternate rows between attendees (every other row left empty).

Health protocols for your employees and volunteers:

☐ Train all employees and volunteers on appropriate cleaning and disinfection, hand hygiene, and respiratory etiquette.

☐ Screen employees and volunteers before coming into the church, congregation, or place of worship:

☐ Send home any employee or volunteer who has any of the following new or worsening signs or symptoms of possible COVID-19:
  - Cough
  - Shortness of breath or difficulty breathing
  - Chills
  - Repeated shaking with chills
  - Muscle pain
  - Headache
  - Sore throat
  - Loss of taste or smell
  - Diarrhea
  - Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
  - Known close contact with a person who is lab confirmed to have COVID-19

☐ Do not allow employees or volunteers with the new or worsening signs or symptoms listed above to return to work until:

  - In the case of an employee or volunteer who was diagnosed with COVID-19, the individual may return to work when all three of the following criteria are met: at least 3 days (72 hours) have passed since recovery (resolution of fever without the use of fever-reducing medications); and the individual has improvement in respiratory symptoms (e.g., cough, shortness of breath); and at least 7 days have passed since symptoms first appeared; or

  - In the case of an employee or volunteer who has symptoms that could be COVID-19 and does not get evaluated by a medical professional or tested for COVID-19, the individual is assumed to have COVID-19, and the individual may not return to work until the individual has completed the same three-step criteria listed above; or

  - If the employee or volunteer has symptoms that could be COVID-19 and wants to return to work before completing the above self-isolation period, the individual must obtain a medical professional’s note clearing the individual for return based on an alternative diagnosis.
Do not allow an employee or volunteer with known close contact to a person who is lab-confirmed to have COVID-19 to return to work until the end of the 14 day self-quarantine period from the last date of exposure (with an exception granted for healthcare workers and critical infrastructure workers).

Have employees or volunteers wash or sanitize their hands upon entering.

Have employees or volunteers maintain at least 6 feet separation from other individuals. If such distancing is not feasible, then other measures including face covering, hand hygiene, cough etiquette, cleanliness, and sanitation should be rigorously practiced.

Consistent with the actions taken by many churches, congregations, and places of worship across the state, consider having employees, volunteers, and attendees wear cloth face coverings (over the nose and mouth). If available, they should consider wearing non-medical grade face masks.

Health protocols for your facilities:

- Regularly and frequently clean and disinfect any regularly touched surfaces, such as doorknobs, tables, chairs, and restrooms.
- Disinfect seats between services.
- Disinfect any items that come into contact with attendees.
- Make hand sanitizer, disinfecting wipes, soap and water, or similar disinfectant readily available.
- Place readily visible signage to remind everyone of best hygiene practices.
- If a church or place of worship provides meals for employees, volunteers, or attendees, they are recommended to have the meals individually packed for each employee, volunteer, or attendee.
- Maintain rigorous sanitation practices like disinfection, handwashing, and cleanliness when preparing or serving anything edible.
As outlined in Governor Abbott’s executive order GA-18, services provided by an individual working alone in an office may operate.

In accordance with Governor Abbott’s executive order GA-18, the following are the minimum recommended health protocols for all single-person offices. Employers may adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all employees and customers.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Businesses should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization. Businesses should also be mindful of federal and state employment laws and workplace safety standards.

Health protocols for single-person offices:

- Be trained on all appropriate cleaning and disinfection, hand hygiene, and respiratory etiquette.
- Self-screen before coming into the office:
  - Do not go into the office with new or worsening signs or symptoms of possible COVID-19:
    - Cough
    - Shortness of breath or difficulty breathing
    - Chills
    - Repeated shaking with chills
    - Muscle pain
    - Headache
    - Sore throat
    - Loss of taste or smell
    - Diarrhea
    - Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
    - Known close contact with a person who is lab confirmed to have COVID-19
- Do not allow employees with the new or worsening signs or symptoms listed above to return to work until:

  In the case of an employee who was diagnosed with COVID-19, the individual may return to work when all three of the following criteria are met: at least 3 days (72 hours) have passed since recovery (resolution of fever without the use of fever-reducing medications); and the individual has improvement in respiratory symptoms (e.g., cough, shortness of breath); and at least 7 days have passed since symptoms first appeared; or
SINGLE-PERSON OFFICES: Page 2 of 2

- In the case of an employee who has symptoms that could be COVID-19 and does not get evaluated by a medical professional or tested for COVID-19, the individual is assumed to have COVID-19, and the individual may not return to work until the individual has completed the same three-step criteria listed above; or
- If the employee has symptoms that could be COVID-19 and wants to return to work before completing the above self-isolation period, the individual must obtain a medical professional’s note clearing the individual for return based on an alternative diagnosis.

☐ Do not allow an employee with known close contact to a person who is lab-confirmed to have COVID-19 to return to work until the end of the 14 day self-quarantine period from the last date of exposure (with an exception granted for healthcare workers and critical infrastructure workers).

☐ Wash or sanitize their hands upon entering the business.

☐ Maintain at least 6 feet separation from other individuals. If such distancing is not feasible, other measures such as face covering, hand hygiene, cough etiquette, cleanliness, and sanitation should be rigorously practiced.

☐ Consistent with the actions taken by many businesses across the state, consider wearing a cloth face covering (over the nose and mouth) upon entering the premises and when using common areas, including elevators, restrooms, break rooms, or stairs. If available, you should consider wearing non-medical grade face masks.

Health protocols for your facilities:

☐ Regularly and frequently clean and disinfect any regularly touched surfaces, such as doorknobs, tables, chairs, and restrooms.

☐ Disinfect any items that come into contact with customers.

☐ Make hand sanitizer, disinfecting wipes, soap and water, or similar disinfectant readily available to employees and customers.

☐ Place readily visible signage at the business to remind everyone of best hygiene practices.
ATTESTATION FOR COUNTIES
WITH FIVE OR FEWER LABORATORY-CONFIRMED CASES

Rural counties may, on an individualized basis, increase capacity for restaurants, retail, shopping malls, museums, libraries, and/or movie theaters if the county judge certifies and affirms to DSHS that the following standards have been investigated and confirmed to be met:

1. The county had five or fewer COVID-19 laboratory confirmed cases on April 30, 2020 or, at a later date, five or fewer active COVID-19 cases as verified by DSHS.
2. The county has created a list of testing opportunities in the county or the area.
3. The county has been in contact with its designated regional advisory council to ensure the community is prepared for any needed health care transfers.
4. The county has provided public notice to the residents of the county, including:
   - Signs and symptoms of COVID-19.
   - Recommended health and safety protocols in line with CDC guidance.
   - Information regarding how residents can get tested in the area.
   - A link to the DSHS website where residents can go to learn about community spread in nearby communities, in order to help county residents understand their risk to exposure if they travel regularly outside of the county.
5. The county has contacted each of the following types of facilities located in the county to ensure they are complying with HHSC and CDC guidelines regarding COVID-19:
   - Nursing homes
   - Assisted living facilities
   - Industrial, agricultural, or business facilities with a significant number of employees
   - City or county jails
6. The county is equipped and prepared to protect vulnerable populations, including nursing homes and assisted living facilities.
7. The county has documented procedures to be activated if a resident becomes COVID-19 positive, including procedures to take appropriate measures as necessary in line with the plan to open Texas.
8. The county has contacted DSHS in order to create a plan to ensure contact tracing will occur within 48 hours of a positive test reported to DSHS.

If the county meets the above standards and chooses to do so, the county may do the following:
- Increase dine-in restaurant capacity from 25% to up to 50% of the restaurant’s total listed occupancy. All other provisions regarding restaurants still apply.
MINIMUM STANDARD HEALTH PROTOCOLS

RURAL COUNTIES: Page 2 of 2

- Increase retail in-store capacity from 25% to up to 50% of the retailer’s total listed occupancy. All other provisions regarding retail still apply.

- Increase movie theater capacity from 25% to up to 50% of the movie theater’s total listed occupancy. All other provisions regarding movie theaters still apply.

- Increase museum and library capacity from 25% to up to 50% of the museum’s or library’s total listed occupancy. All other provisions regarding museums and libraries still apply.

All counties must adhere to all other provisions set forth on the previous pages, including the minimum standard health protocols.

Counties that file the attestation and qualify for 50% occupancy will revert to the 25% occupancy limits if any of the following occurs:

1. Five consecutive testing / tracking intervals with positivity rates greater than 12% in that interval.
2. The county has more than 3 positive cases per 1,000 residents.
3. Less than 15% of the surge capacity in hospitals for the catchment area is available.

The attestation form, including the supplemental county information, to be completed by the county judge, can be found on the Department of State Health Services Coronavirus Disease 2019 (COVID-19) website at https://dshs.texas.gov/coronavirus/.

Under GA-18, the Governor may, by proclamation, return any county to the essential services-only level.
ABOUT THE STRIKE FORCE: MEET THE LEADERSHIP

James Huffines, Chair

Former President and Chief Operating Officer of PlainsCapital Corporation, retired Chief Operating Officer of Hilltop Holdings, Inc., former Chairman of The University of Texas System Board of Regents, and current Chair of Southwestern Medical Foundation. Huffines has served three governors of Texas: Governor Greg Abbott, Governor Rick Perry, and Governor Bill Clements. He is a former Chair of the Governor’s University Research Initiative, and a former member of the Dallas Foundation Board of Governors, the Texas State History Museum Foundation Board of Trustees, and the Dallas Citizens Council Board of Directors. Huffines earned a BBA in finance from UT Austin and attended Southwestern Graduate School of Banking at Southern Methodist University.

Mike Toomey, Chief Operating Officer

Mike Toomey, the only person in Texas history to serve as Chief of Staff for two Texas governors, Governor Rick Perry and Governor Bill Clements, is a former three-term Texas House member representing House District 135 in Houston, and former Chairman of the House Judiciary Committee. He previously served as Chairman of the Board – West Houston Chamber of Commerce. Toomey earned a BA in philosophy from Baylor University and a Juris Doctor from South Texas College of Law.
MEET THE CHIEF MEDICAL ADVISORS

*These nationally recognized health experts are developing a medical architecture to comprehensively test and trace COVID-19 to enable Texans to gradually and safely begin the process of returning to work and other activities.*

- **John Hellerstedt, M.D., Chief Medical Officer**
  Commissioner of the Texas Department of State Health Services; previously Chief Medical Officer at Seton Family of Hospitals, and Vice President of Medical Affairs and Associate Chief Medical Officer at Dell Children’s Medical Center of Central Texas.

- **Parker Hudson, M.D., MPH**
  Assistant Professor of Internal Medicine and Infectious Diseases at Dell Medical School and program director for the Internal Medicine Residency; completed an adult infectious diseases fellowship and a Master of Public Health in Epidemiology.

- **Mark McClellan, M.D., PhD**
  The Robert J. Margolis Professor of Business, Medicine, and Policy, and founding Director of the Duke-Margolis Center for Health Policy at Duke University; former administrator of the Centers for Medicare & Medicaid Services and former commissioner of the U.S. Food and Drug Administration.

- **John Zerwas, M.D.**
  Executive Vice Chancellor for Health Affairs, University of Texas System; previously represented Texas House District 28 for seven legislative terms; a past president of the American Society of Anesthesiologists.
MEET THE SPECIAL ADVISORY COUNCIL

Business leaders representing the state’s regions and industries are collaborating with working groups to devise strategies, statewide standards, and appropriate timeframes to safely open the Lone Star State.

Arcilia Acosta: President and CEO, CARCON Industries & Construction
Paul Andrews, Jr.: Founder and CEO, TTI Inc.
Mark Bivins: Rancher, partner in Corsino Cattle Company
Kathy Britton: CEO and Owner, Perry Homes
Brad Brookshire: Chairman and CEO, Brookshire Grocery Co.
J. Bruce Bugg, Jr.: Chairman, Texas Transportation Commission
Alonzo Cantu: President & CEO of Cantu Construction
Bobby Cox: Owner and operator, Bobby Cox Companies, Inc.
Adriana Cruz: Executive Director, Economic Development & Tourism Division, Office of the Governor
Michael Dell: Chairman and CEO, Dell Technologies
Scott Dueser: Chairman, President & CEO, First Financial Bank
Don Evans: Chairman of the President George W. Bush Foundation, Chairman of Permian Strategic Partnership
Tilman Fertitta: Chairman, CEO, and sole owner, Landry's, Inc.
Richard Fisher: Senior Advisor, Barclays and Former President & CEO, the Federal Reserve Bank of Dallas
Rick Francis: Chairman of the Board, WestStar Bank Holding Company, Inc.
Printice Gary: Founding Partner/Principal and CEO, Carleton Companies
Brad Heffington: Owner of Heffington Farms, Inc. and Triple T Irrigation, Inc.
Jeffery D. Hildebrand: Executive Chairman and Founder, Hilcorp Energy Company
Nancy Kinder: President & CEO, Kinder Foundation
Tom Luce: Founder and Chairman, Texas 2036
Marc McDougal: CEO, McDougal Companies
Jim "Mattress Mack" McIngvale: Owner, Gallery Furniture
Drayton McLane: Chairman, McLane Group
Elaine Mendoza: Founder, President & CEO of Conceptual MindWorks, Inc
Balous Miller: Owner, Bill Miller Bar-B-Q Restaurants
Carla Moran: Ramar Communications
Dennis Nixon: CEO and Chairman of International Bank of Commerce
David Oliveira: Partner at Roerig, Oliveira & Fisher, L.L.P.
Ross Perot, Jr.: Chairman, The Perot Group
Kevin D. Roberts, PhD: Executive Director, Texas Public Policy Foundation
Robert B. Rowling: Owner and Chairman, TRT Holdings, Inc.
Kendra Scott: Founder and CEO, Kendra Scott
Robert F. Smith: Founder, Chairman & CEO, Vista Equity Partners
Sam L. Susser: Chairman of BancAffiliated, Inc.
Massey Villarreal: CEO and President, Precision Task Group, Inc.
Kirk Watson: Founding Dean of the University of Houston Hobby School of Public Affairs
Marc Watts: President, The Friedkin Group
Graham Weston: Former Chairman of Rackspace Hosting Inc.
Sanjiv Yajnik: President of the Financial Services Division, Capital One
STRIKE FORCE WORKING GROUPS

The working groups are providing recommendations on potential openings of activities and services in Texas with the guidance of the Chief Medical Advisors and consistent with the guidelines provided by the CDC.

Economic Revitalization
- Workforce, Economic Development and International Trade
- Infrastructure
- Energy
- Arts, Culture, and Entertainment

Healthcare
- Chief Medical Advisors
- Healthcare Systems
- Emergency Management and Supply Chain

Education
- PreK-12 Schools
- Higher Education

Fiscal Accountability and Federal Liaison
WORKING GROUP LEADERS: ECONOMIC REVITALIZATION

Working together to reboot our resilient Texas economy and lift communities and families across the state.

Workforce, Economic Development and International Trade

- **Robert Allen**
  President & CEO of the Texas Economic Development Corporation; previously served as Deputy Chief of Staff to Governor Greg Abbott and Deputy Chief of Staff at the Office of the Attorney General.

- **Adriana Cruz**
  Executive Director, Economic Development & Tourism Division, Office of the Governor; previously President of the Greater San Marcos Partnership, and Vice President of Global Corporate Recruitment for the Austin Chamber of Commerce.

- **Ruth Hughes**
  Texas Secretary of State; previously Chair and Commissioner Representing Employers at the Texas Workforce Commission, and Director of Defense Litigation in the Office of the Texas Attorney General.

Infrastructure

- **J. Bruce Bugg, Jr.**
  Chairman of the Texas Transportation Commission; Chairman, President & CEO of Southwest Bancshares, Inc.; previously Chairman and President of the Texas Economic Development Corporation, and senior advisor to Governor Rick Perry.

- **Kirk Watson**
  Named founding Dean of the University of Houston Hobby School of Public Affairs; State Senator representing Austin, elected President Pro Tempore in 2019; previously Mayor of Austin, and served under Governor Ann Richards.
**Energy**

- **Julia Rathgeber**  
  President & CEO of the Association of Electric Companies of Texas, Inc.; previously served as Deputy Chief of Staff for Governor Greg Abbott; appointed as Commissioner of Insurance for Texas by Governor Rick Perry.

- **Todd Staples**  
  President of the Texas Oil and Gas Association; previously served as the Texas Commissioner of Agriculture, and as a member of both the Texas Senate and the Texas House of Representatives.

**Arts, Culture, and Entertainment**

- **Brendon Anthony**  
  Director of the Texas Music Office in the Office of Governor; previously a touring and recording musician, producer, artist consultant, head of ecommerce and artists relations.
WORKING GROUP LEADERS: HEALTHCARE

Protecting Texans’ health and saving lives in communities across Texas.

**Healthcare**

- **John Hellerstedt, M.D.**
  Commissioner of the Texas Department of State Health Services; previously Chief Medical Officer at Seton Family of Hospitals, and Vice President of Medical Affairs and Associate Chief Medical Officer at Dell Children’s Medical Center of Central Texas.

- **Parker Hudson, M.D., MPH**
  Assistant Professor of Internal Medicine and Infectious Diseases at Dell Medical School and program director for the Internal Medicine Residency; completed an adult infectious diseases fellowship and a Master of Public Health in Epidemiology. Director of COVID-19 Testing and Tracing at the Dell Medical School.

- **Mark McClellan, M.D., PhD**
  The Robert J. Margolis Professor of Business, Medicine, and Policy, and founding Director of the Duke-Margolis Center for Health Policy at Duke University; former administrator of the Centers for Medicare & Medicaid Services and former commissioner of the U.S. Food and Drug Administration.

- **John Zerwas, M.D.**
  Executive Vice Chancellor for Health Affairs, University of Texas System; previously represented Texas House District 28 for seven legislative terms; a past president of the American Society of Anesthesiologists.

**Healthcare Systems**

- **John Zerwas, M.D.**
  Executive Vice Chancellor for Health Affairs, University of Texas System; previously represented Texas House District 28 for seven legislative terms; a past president of the American Society of Anesthesiologists.

**Emergency Management and Supply Chain**

- **Nim Kidd**
  Chief of the Texas Division of Emergency Management, and Vice Chancellor for Disaster and Emergency Services, Texas A&M University System; previously District Fire Chief, San Antonio Fire Department, and City of San Antonio Emergency Manager.
WORKING GROUP LEADERS: EDUCATION

Working together to ensure Texas students have access to the knowledge and skills need to compete and to build a brighter Texas of tomorrow.

**PreK-12 Education**

- **Mike Morath**  
  Commissioner of the Texas Education Agency, oversees PreK-12 education for more than 5 million students; previously a member of the Dallas Independent School District's Board of Trustees; began his career in the technology sector.

**Higher Education**

- **Harrison Keller, PhD**  
  Commissioner of the Texas Higher Education Coordinating Board; previously Deputy to the President for Strategy and Policy at The University of Texas at Austin, and Vice Provost for Higher Education Policy and Research.
WORKING GROUP LEADER: FISCAL ACCOUNTABILITY AND FEDERAL LIAISON

Working together to leverage federal resources and ensure fiscal accountability to protect lives and restore livelihoods in communities across Texas.

- Billy Hamilton
  Deputy Chancellor and Chief Financial Officer, The Texas A&M University System; previously a private state tax consultant, and served as Deputy Comptroller of Public Accounts for the State of Texas.
APPENDIX
Governor Abbott’s Proactive Response to the Coronavirus Threat

From before COVID-19 was first detected in Texas, Governor Abbott has leveraged state, federal and local resources as well as private-sector support to mitigate the spread of the coronavirus and to protect the health and safety of Texans across the state.

A high-level snapshot of actions taken by Governor Abbott; not inclusive of all briefings, hearings, proclamations, calls, actions or related events in Texas.

MOBILIZING STATE RESOURCES

- In January, Governor Abbott activates the State Medical Operations Center and all state emergency response agencies to implement existing statewide preparedness and response plans.
- At the Governor’s direction, the Texas Task Force on Infectious Disease Preparedness and Response and the Texas Emergency Management Council begin regular meetings.
- At the Governor’s direction, the Department of State Health Services (DSHS) begins daily calls with public health authorities and providers.
- Governor Abbott declares a State of Disaster for all Texas counties due to the imminent threat posed, thereby authorizing the use of all available and necessary state resources to assist Texas communities.
- Governor Abbott and Attorney General Ken Paxton issue a joint statement on price gouging and announce a consumer hotline.
- Governor Abbott directs all state agencies to enact telework policies to ensure continuing service.
- Governor Abbott activates the Texas National Guard and deploys three brigades to assist health professionals and emergency responders on the front line.
- Governor Abbott announces the Texas Military Department and U.S. Army Corps of Engineers are working to identify and equip medical facilities if additional hospital capacity is needed.
- Governor Abbott provides a region-by-region update on medical and PPE supplies acquired by the Supply Chain Strike Force and distributed across Texas.
- Governor Abbott announces that Texas National Guard members are helping to staff a 24-hour operation to produce 2 million face masks a week for distribution in Texas.
- Governor Abbott announces an Executive Order on April 17 establishing the Governor’s Strike Force to Open Texas, including a Medical Advisory Board to guide the State’s decisions on opening Texas.
- Governor Abbott announces the Texas National Guard will be mobilizing more than 1,200 personnel as part of mobile testing teams in various parts of the state.
LEVERAGING FEDERAL RESOURCES

- In January, Governor Abbott joins HHS Secretary Alex Azar, federal health officials, Cabinet members and governors by phone for the first federal update on the coronavirus.
- In addition to speaking with President Trump and Vice President Pence, and ongoing calls with White House officials and Cabinet members, Governor Abbott joins regular calls with the vice president, federal agencies and the nation’s governors.
- Governor Abbott requests the state’s allocation of medical and pharmaceutical assets from the Strategic National Stockpile for distribution.
- Governor Abbott requests a statewide emergency designation for small business disaster loans from the U.S. Small Business Administration.
- Governor Abbott requests a presidential declaration of a major disaster.
- At Governor Abbott’s direction, $19.5 million from the state’s initial $36.9 million allotment of emergency congressional funding is distributed to 43 local health departments, with the remaining funds reserved for statewide efforts and to serve areas not covered by a local health department.
- Governor Abbott requests permission from the USDA to expand the use of SNAP food assistance.
- Governor Abbott requests interest-free Title XII loan funds to pay unemployment claims and also requests accelerated release of funds from the federal Unemployment Trust Fund.
- Governor Abbott submits a waiver asking for flexibility in administering Medicaid to expand care.
- Governor Abbott requests a waiver from HUD to provide financial housing assistance to certain Texans enduring economic hardships related to COVID-19.
- Governor Abbott continues to regularly consult by phone with the President, VP and White House health officials and federal agency administrators.
- Governor Abbott announces that SNAP food benefits may be used for online food purchases.
- Governor Abbott announces nearly $54 million in federal funds to support older Texans and people with disabilities during the COVID-19 response.
- Governor Abbott announces up to $11.3 million in HOME Tenant Based Rental Assistance from HUD to Texans experiencing housing challenges due to COVID-19.

WORKING WITH LOCAL LEADERS

- In January at the Governor’s direction, DSHS begins daily calls with local public health authorities around the state and with San Antonio officials in relation to the repatriated Americans housed at JBSA-Lackland, as well as regular briefing calls with elected officials and local leaders around the state.
- DSHS, TDEM, the Texas Education Agency and all state agencies begin daily outreach to communities.
- Governor Abbott briefs legislators, mayors, county judges and other local elected officials by teleconference on the state’s strategies to mitigate the spread of COVID-19 and ensure communities are prepared to respond to any confirmed cases in their area.
- At the Governor’s direction, TEA issues guidance to K-12 public and open enrollment schools.
- Governor Abbott continues to regularly consult by phone and update state and local elected officials, ensuring local health needs are met and answering questions about the State’s strategies to open Texas.
• Governor Abbott continues to recognize local business leaders who are adapting and innovating to help meet community needs.
• Governor Abbott announces Texas A&M AgriLife Extension Service will provide a free online training series to help local officials understand, acquire and administer federal CARES Act assistance.

KEEPING TEXANS INFORMED

• In January at the Governor’s direction, DSHS launches a coronavirus information/resources page online and continues to broadly promote preventative hygiene measures; social posts are shared/amplified by other state agencies.
• Beginning in February, Governor Abbott hosts ongoing press briefings, joined by DSHS and the Texas Department of Emergency Management.
• Governor Abbott conducts almost daily media interviews with local and regional broadcast stations.
• Through ongoing social campaigns amplified by all state agencies, and televised public service announcements, Governor Abbott continually urges Texans to take preventative measures and to visit dshs.texas.gov for more information.
• Governor Abbott hosts a televised town hall to answer Texans’ questions.
• Governor Abbott invites Texans to volunteer supplies, equipment and medical services by going to the state’s portal: texas.gov.
• First Lady Cecilia Abbott reminds Texans by video to check on older, isolated family members and neighbors who may be in need of food and medicine.
• Governor Abbott releases a video message to all Texans as his Executive Order goes into effect requiring all Texans to stay home unless they are participating in an essential service or activity.
• Governor Abbott holds a press briefing detailing the progress that Texas has made in slowing the spread, including county-by-county reporting.
• Governor Abbott has conducted 15 press conferences and 100 broadcast media interviews related to the State’s response, commencing six days prior to the first confirmed case in Texas, as of April 10, 2020.
• Governor Abbott continues to conduct regular press briefings and local/regional broadcast media interviews to update on the State’s response.
• Governor Abbott holds a press conference on April 17 to announce the Governor’s Strike Force to Open Texas; the State’s opening strategies will be guided by a Medical Advisory Board and with the advice of a Special Advisory Counsel of business leaders representing the state’s regions and industries.
• Governor Abbott holds a press briefing to update on the State’s response; announces nearly 500,000 job openings listed on WorkInTexas.com.
• Governor Abbott announces an online COVID-19 test collection map to help Texans locate test collection sites within their community.

MITIGATING THE SPREAD IN TEXAS COMMUNITIES

• In January at the Governor’s direction, DSHS begins regular posting of preventative hygiene steps; these social posts are amplified by state agencies.
• At the Governor’s direction, capacity is added at the Texas Center for Infectious Disease to accept mildly symptomatic to asymptomatic patients from the JBSA-Lackland repatriate cohorts and relieve anticipated pressure on San Antonio hospitals.
• Governor Abbott sends a letter to the CDC demanding improved release protocols for individuals under federal quarantine at Lackland.
• Governor Abbott is briefed by the Texas Military Department on preventative health measures for Texas National Guard personnel.
• The Governor restricts non-critical visits to state-supported nursing homes, hospitals, prisons and other facilities.
• Governor Abbott allows virtual and telephonic open meetings to ensure government transparency.
• Governor Abbott postpones scheduled district and primary runoff elections.
• Governor Abbott issues Executive Orders prohibiting social gatherings of 10 or more, dine-in restaurants and bars, and non-critical visits to nursing homes, and temporarily closing schools.
• Governor Abbott mandates a 14-day self-quarantine for air travelers from NY, NJ, CT and New Orleans. That Executive Order is expanded to air travelers from additional hotspot locations, California, Louisiana, Washington, Atlanta, Chicago, Detroit and Miami, and to travel by car from Louisiana.
• Governor Abbott prohibits the release of individuals in county and municipal jail custody who are deemed a danger to society.
• Governor Abbott issues an Executive Order implementing Essential Services and Activities Protocols for the entire state of Texas to minimize non-essential gatherings and in-person contact.
• Governor Abbott provides a region-by-region update on medical and PPE supplies acquired by the Supply Chain Strike Force and distributed across Texas.
• Governor Abbott announces a 24-hour operation, staffed in part by Texas National Guard members, will produce 2 million masks per week for distribution in Texas.
• Governor Abbott regularly updates the public at press briefings on the distribution of PPE supplies to communities across Texas.
• Governor Abbott announces an Executive Order closing schools through the academic year to mitigate the spread, though teachers may return for in-classroom video instruction.
• Governor Abbott announces the Texas National Guard will be mobilizing more than 1,200 personnel as part of mobile testing teams in various parts of the state.
• Governor Abbott announces an online COVID-19 test collection map to help Texans locate test collection sites within their community.

EXPANDING ACCESS TO HEALTHCARE
• On March 5, Governor Abbott announces the launch of statewide testing capabilities.
• Governor Abbott asks health insurance providers to waive costs associated with the testing and telemedicine visits.
• Governor Abbott directs state agencies to take any action necessary to support telemedicine.
• Governor Abbott fast-tracks licensing for out-of-state medical professionals.
• Governor Abbott announces Texas will receive an initial 15,000 testing kits from FEMA, in addition to testing capabilities already announced.
- Governor Abbott holds a video call with hospitals to discuss capacity.
- Governor Abbott holds a press conference at the San Antonio Emergency Operations Center to update on the state’s actions and the San Antonio drive-thru coronavirus testing site. He announces other major cities are working to implement drive-thru testing sites to be run and managed at the local level.
- Governor Abbott activates the Texas National Guard to assist medical professionals and emergency responders on the front line.
- Governor Abbott waives certain regulations to expand patient access to telemedicine.
- At the Governor’s direction, DSHS declares a Public Health Disaster, triggering important tools for public health authorities.
- Testing by public health authorities and private providers continue to increase weekly, following prescribed protocols for eligibility.
- Governor Abbott waives regulations to allow phone consultations by pharmacists, and waives regulations to expand nursing workforce.
- Governor Abbott issues an Executive Order increasing hospital capacity, announces a Supply Chain Strike Force and increases hospital room occupancy.
- Governor Abbott directs hospitals to submit daily reports on bed capacity and all providers to update daily on COVID-19 tests.
- Governor Abbott announces an initial $83 million order of medical supplies ordered by the new Supply Chain Strike Force, along with donations of supplies from Texas medical professionals.
- Governor Abbott invites Texans to volunteer supplies, equipment and medical services by going to the state’s portal: texas.gov.
- Governor Abbott extends license renewal periods for nurses, extends license renewal periods for pharmacists and expedites reactivation for advanced practice registered nurses.
- Governor Abbott receives his requested federal approval to automatically renew Medicaid and SNAP food assistance until further notice, and to suspend the requirement that renewing recipients and new applicants be interviewed.
- Governor Abbott announces the Kay Bailey Hutchison Convention Center in Dallas is being equipped as a back-up hospital facility should it be needed.
- Governor Abbott waives certain regulations to expand EMS and emergency responder workforce.
- Because of proactive measures and waivers issued by Governor Abbott, hospital bed availability in Texas has increased by 140 percent since March 18.
- Governor Abbott provides a region-by-region update on medical and PPE supplies acquired by the Supply Chain Strike Force and distributed across Texas.
- Governor Abbott announces a 24-hour operation staffed in part by Texas National Guard members will produce 2 million masks per week for distribution in Texas.
- Governor Abbott continues to temporarily waive regulations: Expanding the healthcare workforce; allowing off-site outpatient end-stage renal disease facilities; expanding telehealth options; allowing more nurse aides to serve residents in long-term care facilities; increasing hospital and medical facility staffing; and increasing the Advanced Practice Registered Nurse workforce.
- Governor Abbott updates the public at a press briefing on the distribution of PPE supplies across Texas.
Governor Abbott announces an Executive Order loosening some restrictions on surgeries and medical procedures while ensuring hospital capacity and sufficient PPE supplies.

Governor Abbott announces an online COVID-19 test collection map to help Texans locate test collection sites within their community.

REMOVING REGULATORY ROADBLOCKS

After issuing a State of Disaster proclamation on March 13, with 39 COVID-19 cases in Texas confirmed and because of the imminent threat posed, Governor Abbott begins waiving state regulations to remove roadblocks and better meet Texans’ needs during the emergency period:

- Certain state trucking regulations to help speed deliveries
- Allowing trucks from alcohol industry to deliver grocery supplies
- Ensuring students receive work-study funding
- STAAR testing requirements
- Vehicle registration, titling and parking placard regulations
- Expanding hospital capacity
- Expanding patient access to telemedicine care
- Speeding payment of new unemployment benefits
- Extending driver license renewal deadlines
- Allowing delivery of alcoholic beverages with food
- Temporarily closing DPS driver license offices
- Waiving healthcare fees for incarcerated Texans
- Suspending residential eviction proceedings (Texas Supreme Court)
- Allowing event permit refunds for businesses
- Allowing phone consultations by pharmacists
- Expanding nursing workforce in Texas
- Creating a Supply Chain Strike Force
- Increasing occupancy of hospital rooms
- Allowing restaurants to sell bulk products to consumers
- Expanding healthcare facilities
- Extending licensing renewal period for nurses
- Preserving and extending child care capacity
- Extending licensing renewal period for pharmacists
- Expediting reactivation for advanced practice registered nurses
- Waiving COVID-19 cost-sharing for public safety employees
- Expanding EMS and emergency responder workforce
- Expanding healthcare workforce
- Allowing off-site outpatient end-stage renal disease facilities
- Waiving federal match for victims services grant recipients
- Allowing for video appearance before Notary Public
- Expanding telehealth options
- Allowing more nurse aides to serve residents in long-term care facilities
- Increasing hospital and medical facility staffing
- Waiving certain testing requirements for Advanced Practice Registered Nurses
HELPING FAMILIES, SMALL BUSINESSES AND COMMUNITIES TO COPE

- In January at Governor Abbott’s direction, DSHS begins posting coronavirus information and resources online and broadly promotes preventative hygiene measures.
- At Governor Abbott’s direction, TEA shares preventative guidance with school districts.
- Governor Abbott declares a State of Disaster for all Texas counties due to the imminent threat posed, thereby authorizing the use of all available and necessary state resources to assist Texas communities.
- Governor Abbott and Attorney General Paxton issue a joint statement on reports of price-gouging and announce a consumer hotline.
- Governor Abbott briefs legislators, mayors and county officials by phone conference on the state’s strategies to mitigate spread and ensure communities are prepared to respond.
- Governor Abbott waives certain state trucking regulations to expedite delivery of resources in Texas.
- Governor Abbott waives laws to allow trucks from alcohol industry to deliver grocery supplies.
- Governor Abbott waives regulations to ensure students in work-study programs receive critical funding during school closures.
- Governor Abbott waives STAAR testing requirements and requests waiver for federally required testing.
- Governor Abbott hosts a televised town hall to answer Texans’ questions about the state’s response.
- Governor Abbott waives the waiting period for new unemployment benefits to speed payments to impacted families across the state.
- Governor Abbott holds call with mayors, county judges to discuss state and local response strategies.
- Governor Abbott’s request for an emergency designation for small business statewide receives federal approval, making small business disaster loans from SBA available in Texas.
- Governor Abbott and TEA announce a Texas Students MealFinder Map to ensuring continuing access to the school lunch program.
- Governor Abbott offers supplemental grants through his Public Safety Office to fund critical needs for providers serving foster and homeless youth and kinship care families.
- Governor Abbott issues a waiver allowing restaurants to sell bulk retail products directly to consumers.
- Governor Abbott announces a $16.2 million grant to help communities provide meals for older adults.
- First Lady Cecilia Abbott posts a video on social channels reminding Texans to check in on older or isolated family and neighbors.
- Governor Abbott waives certain TWC regulations to extend child care capacity for front line workers.
- Governor Abbott’s request to automatically renew Medicaid and the Supplemental Nutrition Assistance Program (SNAP) and to suspend interview requirements receives federal approval.
- Governor Abbott announces the Comfort Food Care Package program to provide meals for at-risk youth and families, and to support local restaurants.
Governor Abbott announces a federal stimulus package to relieve the economic impact on unemployed workers and the state’s hardest-hit businesses; includes retroactive payments of unemployment benefits.

Governor Abbott announces grants totaling $14.1 million awarded to various military communities across the state to ensure installations continue to add military value and to protect jobs.

Governor Abbott and TEA announce the launch of a “Stay Well, Texas” campaign in English and Spanish to reach families across the state.

Governor Abbott issues an Executive Order implementing Essential Services and Activities Protocols to encourage Texans to stay at home except for essential activities; within the order is a process for businesses to determine if they meet DHS’ definition of essential and to petition TDEM to be designated as essential.

Governor Abbott announces Care.com is increasing in-home child care access for frontline workers responding to the COVID-19 emergency.

Governor Abbott announces more than $168 million in emergency SNAP food benefits.

Governor Abbott announces a new online Frontline Child Care website to help essential workers in Texas to locate child care.

Governor Abbott announces $50 million in small business loans in partnership with Goldman Sach and the LiftFund along with other community development financial institutions (CDFIs).

Governor Abbott announces more than 1,130,000 unemployment claims totaling well over $400 million have been paid out to Texans whose jobs were impacted by COVID-19 as of April 13, 2020.

First Lady Cecilia Abbott launches a Stars of Texas Storytime for children on Facebook.

The Governor’s Economic Development & Tourism division begins webinar series for small businesses in addition to recovery resources and information provided online and through email blasts.

Governor Abbott announces his Public Safety Office will provide $38 million in federal funds to local governments.

Governor Abbott announces Executive Orders: establishing the Governor’s Strike Force to Open Texas; directing select services to open under a Retail-To-Go strategy; closing schools for the remainder of the year other than to support video instruction by teachers; and loosening some restrictions on surgeries and medical procedures while ensuring hospital capacity and sufficient PPE supplies. Opening strategies will be guided by the Strike Force Medical Advisory Board and with the advice of the Strike Force Special Advisory Counsel of business leaders representing the state’s regions and industries.

Governor Abbott announces that SNAP food benefits may be used for online food purchases.

Governor Abbott announces nearly $54 million in federal funds to support older Texans and people with disabilities during the COVID-19 response.

Governor Abbott announces up to $11.3 million in HOME Tenant Based Rental Assistance from HUD to Texans experiencing housing challenges due to COVID-19.

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