

ORDINANCE 1255

AN EMERGENCY ORDINANCE REQUIRING THE WEARING OF FACE COVERINGS IN LIMITED PLACES IN THE TOWN OF JACKSON, WITH EXCEPTIONS; DECLARING AN EMERGENCY, PROVIDING FOR AN EFFECTIVE DATE AND A TIME FOR TERMINATION.

BE IT ORDAINED BY THE TOWN COUNCIL OF THE TOWN OF JACKSON, WYOMING, IN REGULAR SESSION DULY ASSEMBLED, THAT:

WHEREAS, Wyo. Stat. Ann. §15-1-103(a)(xviii) empowers “[t]he governing bodies of all cities and towns [to]: . . . [r]egulate . . . conduct which disturbs or jeopardizes the public health, safety, peace or morality, in any public or private place” and the Town finds that the conduct regulated by this Ordinance severely jeopardizes the health, safety, welfare and lives of the residents of the Town of Jackson; and

WHEREAS, Wyo. Stat. Ann. §15-1-103(a)(xli) empowers “[t]he governing bodies of all cities and towns [to]: . . . [a]dopt ordinances, resolutions and regulations, including regulations not in conflict with this act and necessary for the health, safety and welfare of the city or town, necessary to give effect to the powers conferred by this act” and the Town finds that this Ordinance is not in conflict with state statute and that this Ordinance is necessary for and to preserve the health, safety, welfare and lives of the residents of the Town of Jackson; and

WHEREAS, Wyo. Stat. Ann. §15-1-103(xix) empowers “[t]he governing bodies of all cities and towns [to]: . . . declare and abate nuisances and impose fines upon parties who create, continue or permit nuisances to exist” and the Town finds that COVID-19 is an life-threatening public nuisance and that this Ordinance is necessary to abate the nuisance of COVID-19 to protect and preserve the health, safety, welfare and lives of the residents of the Town of Jackson; and

WHEREAS, COVID-19 was first detected in Wuhan, China in 2019, and since then has spread to over 216 countries including the United States. There are 1,267 confirmed cases of COVID-19 in Wyoming as of July 3, 2020, and 103 confirmed cases of COVID-19 in Teton County as of July 3, 2020, and 106 individuals quarantined for COVID-19 in Teton County as of July 3, 2020, as well as the presence of community spread in Wyoming and Teton County. It is expected that more cases will be diagnosed; and

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

WHEREAS, on March 13, 2020, the President of the United States declared a national emergency concerning the coronavirus, specifically stating that, “the spread of COVID-19 within our Nation’s communities threatens to strain our Nation’s healthcare

systems [...] Additional measures [...] are needed to successfully contain and combat the virus in the United States”; and

WHEREAS, on March 13, 2020, Wyoming Governor Mark Gordon declared a State of Emergency and Public Health Emergency in the State of Wyoming; and

WHEREAS, although most individuals who contract COVID-19 do not become seriously ill, people with mild symptoms, and even asymptomatic persons with COVID-19, place other vulnerable members of the public at significant risk; and

WHEREAS, a large number of persons with serious infections can compromise the ability of the healthcare system in Teton County to deliver the necessary healthcare to the public; and

WHEREAS, Teton County, Wyoming is a tourist destination and other mountain resort communities in the Rocky Mountain region have been nuclei of infection in their respective states, including Vail, CO; Park City, UT and Sun Valley/Ketchum, ID; and

WHEREAS, Teton County is experiencing increasing numbers of visitors from outside Teton County who can potentially transmit COVID-19 and at the same time will be more likely to interact with each other and with local residents as businesses, tourist destinations such as National Parks, and other services reopen; and

WHEREAS, Teton County Hospital District routinely serves patients not only from within Teton County but also many tourists and residents from Lincoln County, WY, Sublette County, WY, Fremont County, WY, and parts of Eastern Idaho who will further stress its capacity, making it critical that Teton County take steps to slow the spread of COVID-19 infection so as not to overwhelm the local healthcare system; and

WHEREAS, COVID-19 is a respiratory illness, transmitted through person-to-person contact or by contact with surfaces contaminated with the virus. Persons infected with COVID-19 may become symptomatic two to fourteen days after exposure; and

WHEREAS, asymptomatic (including pre-symptomatic) infected individuals are infectious and without mitigation, the current estimate is that 40%-80% of infections occur from individuals without symptoms. In a study carried out in an isolated village of approximately 3000 people in northern Italy, it was shown that 50–75% of people with positive pharyngeal molecular tests were totally asymptomatic. This finding was confirmed by a more recent evaluation carried out in China, where to avoid a new outbreak of new coronavirus disease 2019 (COVID-19), all the people arriving from overseas were rigorously tested. It was found that among patients with newly identified infections, 78% were asymptomatic. Universal screening of asymptomatic SARS-COV2 in women admitted for

delivery in New York City shows that 13.7% were infected, and that asymptomatic women accounted for 88% of infected individuals in the study. Of individuals who do become symptomatic, viral loads are the highest in the pre-symptomatic and early symptomatic phase, decreasing thereafter; and

WHEREAS, respiratory droplets from infected individuals are a major mode of SARS-CoV-2 transmission. This understanding is the basis of the recommendations for physical distancing, and of the PPE guidance for healthcare workers. Droplets do not only come from coughing or sneezing: in a-/pre-symptomatic individuals, droplets are generated via talking and breathing; and

WHEREAS, SARS-CoV-2, the virus that causes COVID-19, may be broadcast in respiratory droplets "from normal breathing," according to a letter by a committee of the National Academies of Sciences, Engineering, and Medicine. The letter, sent to the White House Office of Science and Technology Policy on April 1, cites numerous studies indicating the presence of coronavirus in aerosols. In one, air samples collected more than 6 feet from two patients in COVID-19 isolation rooms tested positive for SARS-CoV-2 RNA. Until some weeks ago, it was thought that the virus could be transmitted mainly by droplets that are coughed or sneezed out or by previously contaminated objects, with differences according to the initial load and surface characteristics. However, the results of some submitted but not yet peer-reviewed studies seem to indicate the opposite, i.e., the virus can be present in exhaled air produced by talking and breathing; and

WHEREAS, face coverings reduce droplet dispersal. Cloth-based coverings reduce emission of particles by variable amounts, for example one study showed that they are almost completely eliminated. Patients with seasonal coronaviruses (other than SARS-CoV-2) were randomized to exhale breath with or without surgical face masks on. Viral RNA was detected in 40% of aerosols and 30% of respiratory droplets collected from participants without a face mask — but in none collected from those wearing a mask (30). A second study showed that cloth coverings filtered viral particles during coughing at about 50 to 100% of the filtration efficiency of surgical masks, depending on fabric, with absolute filtration efficiencies of 50-70%. A third study showed 50% filtering efficiency for airborne particles; and

WHEREAS, evidence indicates that face covering wearing reduces the transmissibility per contact by reducing transmission of infected droplets in both laboratory and clinical contexts. Public face covering wearing is most effective at stopping spread of the virus when compliance is high. This evidence supports the conclusion that more widespread face covering adoption can help to control the Covid-19 epidemic by reducing the shedding of droplets into the environment from asymptomatic individuals.

This is also consistent with the experiences of other countries that have adopted this strategy. One ecological analysis found that, "in countries with cultural norms or government policies supporting public mask-wearing, per-capita coronavirus mortality increased on average by just 5.4% each week, as compared with 48% each week countries that did not wear masks."; and

WHEREAS, in the most comprehensive, systematic review and meta-analysis of face coverings published to date found that face masks could reduce risk of transmission of COVID-19 by an expected 85 percent; and

WHEREAS, guidelines published by the U.S. Centers for Disease Control (CDC) on April 3, 2020, recommend that all people wear cloth face coverings in public settings where other physical distancing measures may be difficult to maintain. CDC also advises the use of simple cloth face coverings to slow the spread of the virus and help people who may have the virus and do not know it from transmitting it to others; and

WHEREAS, decreased transmissibility due to face covering use could substantially reduce the death toll and economic impact while the cost of the intervention is low.

SECTION I.

1. Definitions.

- a. "Face Covering," as used in this Ordinance, means a covering made of cloth, fabric, or other soft or permeable material, without holes, that covers the nose and mouth and surrounding areas of the lower face. A Face Covering may be factory-made or may be handmade and improvised from ordinary household materials. Face Coverings need to cover the nose and mouth in compliance with the Center for Disease Control and Prevention's guidance on wearing Face Coverings.
- b. "Place(s) of Business," as used in this Ordinance, means any facility, building, or structure operated by or for a business engaged in the sale or other transaction of any kind for anything of value in exchange for goods, commodities, services, or temporary lodging and that is open to the general public or by appointment, and includes, but is not limited to, grocery stores, retail stores, office buildings, restaurants and bars (including outdoor seating for such facilities), hotels and motels (excluding the rented room or suite), gyms and similar facilities; but not including religious or government facilities.
- c. "School or School Districts" means any public, private, or charter school or institution that provides education ranging from daycare through college.

2. All persons within the Town of Jackson must wear a Face Covering in the following situations:

- a. When they are inside or in line to enter any Place of Business; or

- b. When they are obtaining services at healthcare operations, including, but not limited to, hospitals, clinics, and walk-in health facilities, dentists, pharmacies, other healthcare facilities, behavioral health providers, dental offices, and facilities providing veterinary and similar healthcare services for animals, unless directed otherwise by an owner or agent of the healthcare operation; or
 - c. When riding on public transportation or paratransit, or while they are the driver of or a passenger in a taxi, private car service, shuttle, tour or ride-sharing vehicle.
3. A Face Covering is not required under the following circumstances:
- a. Any individual who cannot wear a face covering because of a medical condition, mental health condition or developmental disability, and any individual who should not wear face coverings under the CDC guidance. A person is not required to provide documentation demonstrating that the person cannot medically tolerate wearing a Face Covering. Persons with disabilities who are unable to wear a mask must be provided reasonable accommodations per the Americans with Disabilities Act.
 - b. Individuals under 6 years of age.
 - c. When a person is seated at a table or the bar of a restaurant or other food service venue.
 - d. When actively exercising in a gym in accordance with State Health Orders, as amended.
 - e. School individuals (including students, administrators, and teachers) on or in School or School District facilities.
 - f. When an individual is in his or her work office.
 - g. Individuals while acting in their official capacity as a public safety employee or emergency responder. These include peace officers, firefighters, and other public safety or emergency medical personnel that support public safety operations.
 - h. Individuals complying with the directions of public safety employees or emergency responders as described in Section 3(g).

SECTION II.

The provisions of this Ordinance are effective through 11:59 p.m. on July 20, 2020 unless sooner repealed, after which time they shall become null and void.

SECTION III.

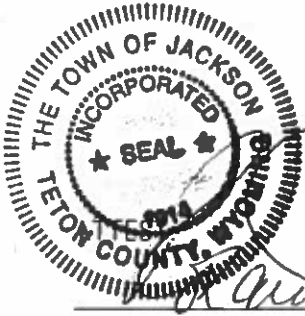
If any section, sentence, clause, phrase or portion of this Ordinance is for any reason held invalid or unconstitutional by any court of competent jurisdiction, such portion shall be deemed a separate distinct and independent provision and such holding shall not affect the validity of the remaining portions of the ordinance.

SECTION IV.

Adoption of this Ordinance shall be by emergency ordinance provisions under suspension of rules and approved by not less than three quarters (3/4) of the qualified members of the

governing body as required and set forth in Section § 15-1-115 of the Wyoming Statutes. This Ordinance shall take effect immediately upon proclamation by the Mayor.

PASSED the 3rd day of July 2020.





Roxanne DeVries Robinson, Deputy Town Clerk

TOWN OF JACKSON

BY: 

Pete Muldoon, Mayor