DIRECTIVE OF THE HEALTH OFFICER No. 2020-03f

DIRECTIVE OF THE HEALTH OFFICER
OF THE CITY AND COUNTY OF SAN FRANCISCO DIRECTING ALL
INDIVIDUALS DIAGNOSED WITH OR LIKELY TO HAVE COVID-19
TO SELF-ISOLATE

(PUBLIC HEALTH EMERGENCY ISOLATION DIRECTIVE)

DATE OF DIRECTIVE: December 30, 2021

Summary: SARS-CoV-2, the virus that causes Coronavirus 2019 Disease (“COVID-19”), is easily transmitted, especially in group settings, and the disease can be extremely serious. It can require long hospital stays, and in some instances cause long-term health consequences or death. The spread of COVID-19 (which includes people without symptoms) remains a danger to the health of the public within the City and County of San Francisco (the “City”), and in particular to people who are not up to date on their vaccines. Omicron, the latest variant of COVID-19, is spreading rapidly across the country and now throughout the Bay Area. Omicron is significantly more contagious than the Delta variant. To help slow COVID-19’s spread and protect vulnerable individuals, it is necessary that anyone diagnosed with, or likely to have, COVID-19 self-isolate subject to the rules listed in this Directive. Isolation separates an individual who is known to be infected or likely to be infected from others until the individual is no longer contagious. This self-isolation requirement protects everyone in the City, including people who are not yet eligible for vaccines (children under five) or boosters at this time, and those who are at high risk for serious illness. The update to this Directive includes recently updated guidelines on shortened isolation duration. For additional information about quarantine requirements, see www.sfdph.org/dph/COVID-19/Isolation-and-Quarantine.asp.

UNDER THE AUTHORITY OF CALIFORNIA HEALTH AND SAFETY CODE SECTIONS 101040, 101085, 120175, 120215, 120220, AND 120225 THE HEALTH OFFICER OF THE CITY AND COUNTY OF SAN FRANCISCO (“HEALTH OFFICER”) DIRECTS AS FOLLOWS:

1. Definitions.
   a. CDPH. “CDPH” means the California Department of Public Health.
   b. Person With COVID-19. “Person With COVID-19” means a person who tests positive for the virus that causes COVID-19 (SARS-CoV-2) or has been clinically diagnosed with COVID-19 by a healthcare provider. A person is no longer considered a Person With COVID-19 once all of the following occur: (a) at least one (1) day (24 hours) has passed since their last fever (without use of fever-reducing medications), and (b) there has been improvement of other symptoms, and (c) at least five (5) days have passed since symptoms first appeared. A person who tested positive for COVID-19 but never had symptoms is no longer considered a Person With COVID-19 five (5) days after the date of their first positive test.
   c. Up-to-Date on Vaccination. “Up-to-Date on Vaccination” means (i) two weeks after completing the full initial course of vaccination with a vaccine authorized to prevent COVID-19 by the FDA, including by way of an emergency use authorization, or by the World Health Organization (WHO) (also defined as being Fully Vaccinated) and (ii) one week after receiving a Booster once a person is eligible for a Booster. Until a person is
eligible for a Booster, they are considered Up-to-Date on Vaccination two weeks after completing their full initial series of vaccination.

Other terms used in this Directive have the same meaning given to them in Health Officer Order No. C19-07y.


   In the event of a critical staffing shortages, employers of health care personnel may follow CDC guidance on Strategies to Mitigate Healthcare Personnel Staffing Shortages which can be found at https://www.cdc.gov/coronavirus/2019-ncov/hcp/mitigating-staff-shortages.html.
   c) Person With COVID-19 Symptoms. Any person (regardless of whether they are Up-to-Date on Vaccination) who has a COVID-19 symptom (see www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html for the list of symptoms) that is new or not explained by another condition must follow the “Duration of Isolation” guidelines set forth in the CDPH “Guidance on Isolation and Quarantine for COVID-19 Contact Tracing” unless and until:
      • The person receives a negative COVID-19 test, collected after start of symptoms; or
      • A healthcare provider has provided documentation that the symptoms are typical of their underlying chronic condition (e.g., allergies or asthma); or
      • A healthcare provider has confirmed an alternative named diagnosis (e.g., Streptococcal pharyngitis, Coxsackie virus).

3. This Directive’s intent is to ensure that any person who has been diagnosed with or is likely to have COVID-19 (including those without COVID-19 symptoms or with mild symptoms) avoids contact with others to slow the spread of COVID-19 and mitigate the impact of the virus on members of the public, especially essential workers and people who are not up to date on COVID-19 vaccines. All provisions of this Directive must be interpreted to effectuate this intent.

4. If an individual who is subject to this Directive fails to comply with it in willful disregard of public safety, the Health Officer may take additional action(s), which may include
issuing an individualized isolation order and seeking civil detention at a health facility or other location, as necessary to protect the public’s health.

5. This Directive becomes effective immediately on issuance and will be in effect until it is extended, rescinded, superseded, or amended in writing by the Health Officer. Also, effective immediately on issuance, this Directive revises and replaces Directive Number 2020-03e, updated September 21, 2021.

6. For purposes of this Directive, any future changes provided online to the CDPH isolation and quarantine guidance documents or any other guidance listed in this Directive are automatically incorporated by this reference. Any health and safety plan approved by the Health Officer addressing isolation may continue to be followed.

Susan Philip, MD, MPH, December 30, 2021
Health Officer of the
City and County of San Francisco