



# City of Norman, OK

Municipal Building  
Council Chambers  
201 West Gray  
Norman, OK 73069

## Master

**File Number: O-2021-21**

**File ID:** O-2021-21

**Type:** Ordinance

**Status:** Non-Consent Items

**Version:** 1

**Reference:** Item 31

**In Control:** City Council

**Department:** Legal Department

**Cost:**

**File Created:** 11/05/2020

**File Name:** COVID 19 Sunset Amendment

**Final Action:**

**Title:** CONSIDERATION OF ORDINANCE O-2021-21: UPON FIRST, SECOND AND FINAL READING: AN ORDINANCE OF THE CITY OF NORMAN, OKLAHOMA AMENDING CHAPTER 10, ARTICLE XI, SECTION 1105 OF THE CODE OF THE CITY OF NORMAN, OKLAHOMA TO EXTEND THE PREVIOUSLY ADOPTED SUNSET DATE RELATED TO COVID-19 REGULATIONS FROM NOVEMBER 30, 2020 TO MARCH 1, 2021; DECLARING AN EMERGENCY; AND PROVIDING FOR THE SEVERABILITY THEREOF.

**Notes:** ACTION NEEDED: Motion to adopt or reject Ordinance O-2120-21 upon First Reading by title only.

ACTION TAKEN: \_\_\_\_\_

ACTION NEEDED: Motion to adopt or reject Ordinance O-2021-21 upon Second Reading section by section.

ACTION TAKEN: \_\_\_\_\_

ACTION NEEDED: Motion to approve Emergency Section 2.

ACTION TAKEN: \_\_\_\_\_

ACTION NEEDED: Motion to adopt or reject Ordinance O-2021-21 upon Final Reading as a whole.

ACTION TAKEN: \_\_\_\_\_

**Agenda Date:** 11/10/2020

**Agenda Number:** 31

**Attachments:** O-2021-21 Clean, O-2021-21 Annotated

**Project Manager:** Kathryn Walker, City Attorney

**Entered by:** kathryn.walker@normanok.gov

**Effective Date:**

## History of Legislative File

Ver- sion:	Acting Body:	Date:	Action:	Sent To:	Due Date:	Return Date:	Result:
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### Text of Legislative File O-2021-21

Body

**BACKGROUND:** A respiratory disease caused by the SARS-CoV-2 virus called COVID-19 began spreading throughout China and much of the rest of the world during the winter of 2019/2020. According to the U.S. Centers for Disease Control and Prevention (“CDC”), COVID-19 is spread primarily from person to person, mainly through respiratory droplets produced when an infected person talks, coughs, or sneezes.

The first cases in Norman were diagnosed in March 2020. Considerable spread was identified in nursing homes. A number of proclamations were issued by the Mayor throughout the Spring as part of a nationwide effort to “flatten the curve” of the spread of the virus. The curve was effectively flattened and Norman saw very few new cases in late April, throughout May, and in early June. This led to a phased return to normal activities on June 12.

In an effort to control the spread of the virus, and avoid implementing business closures, Council imposed a face covering requirement in early July with the adoption of Ordinance O-2021-3. This ordinance was amended on September 8, 2020 to impose a cap on authorized occupant loads in restaurants and bars on days on which there is a University of Oklahoma home football game. After assessing the first game and the return of college students, there was concern about having a tool to address large gatherings where social distancing cannot be maintained. The ordinance was amended again to include certain gatherings in the definition of public setting, resulting in a face covering requirement for such gatherings when social distancing cannot be maintained, and adding a penalty for failure to wear a face covering when required. The ordinance has a sunset date of November 30, 2020.

According to the Oklahoma State Department of Health, as of November 5, 2020, there have been almost 130,000 cases of positive COVID-19 tests in Oklahoma, more than 8,700 hospitalizations due to COVID-19 and 1,413 deaths. Of all positive tests, 34.31% have occurred in the 18-35 years old age group. Statewide, there is only 8% capacity of Intensive Care Unit beds. To provide some perspective, during the 2019-2020 influenza season, 3,580 Oklahomans were hospitalized and 85 died statewide because of the flu. (Source: <https://www.ok.gov/health2/documents/Flu%20Hosp%20and%20Deaths,%202009-2020.pdf> <<https://www.ok.gov/health2/documents/Flu%20Hosp%20and%20Deaths,%20%2009-2020.pdf>>). In its Weekly Epidemiology and Surveillance Report dated October 30, 2020, the Oklahoma Department of Health noted that in cities with a mask requirement, positive cases increased by 21% between August 1 and October 21, compared to an 88% increase in positive cases over the same time period in cities without a mask requirement. The increase of COVID-19 hospitalizations in urbanized areas appear to be based, in part, on the lack of mask mandates in rural areas where hospitals do not have the capacity or equipment to treat serious COVID-19 cases.

In Norman, as of November 5, 2020, there have been 4,693 cumulative cases of positive COVID-19 tests, and 60 deaths. The Oklahoma State Department of Health has categorized Cleveland County as an Orange/Moderate Risk Level.

According to the CDC, the best way to protect yourself is by covering your mouth and nose with a mask when around others, avoiding close contact with people who are sick, staying 6 feet away from others, avoiding crowds, and washing your hands often. (<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html>). Widespread vaccination will be an important component of preventing serious cases of COVID-19, but even with a vaccine, prevention tools like masks may still be needed. From the CDC:

“While experts learn more about the protection that COVID-19 vaccines provide under real life conditions, it will be important for everyone to continue using **all the tools** available to us to help stop this pandemic, like wearing masks, washing hands often, and social distancing. Together, COVID-19 vaccination and following CDC’s recommendations for [how to protect yourself and others](https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html) [will offer the best protection from getting and spreading COVID-19](https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html). Experts need to understand more about the protection that COVID-19 vaccines provide before deciding to change recommendations on mask use. Other factors, including how many people get vaccinated and how the virus is spreading in communities, will also affect this decision”. (<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/faq.html> [will offer the best protection from getting and spreading COVID-19](https://www.cdc.gov/coronavirus/2019-ncov/vaccines/faq.html)). (Emphasis in original).

Vaccine development is currently ongoing. Although vaccines typically require years of research and testing before reaching the general population, scientists across the world are working to produce a safe and effective vaccine against the coronavirus by next year. According to The New York Times Coronavirus Vaccine Tracker, 50 vaccines are currently in clinical trials on humans, and at least 87 preclinical vaccines are under active investigation in humans. Of these at least 137 vaccines under development, 11 are in Phase 3 Efficacy Trials, meaning the vaccine is being administered to thousands of volunteers and scientists are monitoring for side effects and to see how many of the recipients become infected, compared with volunteers who received a placebo. The Federal Drug Administration, responsible for approving vaccines for wide distribution, has advised the vaccine makers that they want the Phase 3 testing to result in protection of at least 50% of those who receive it.

The United States has contracted for doses of successful vaccines from several companies currently in Phase 3 development of vaccines. According to the New York Times Coronavirus Vaccine Tracker (<https://www.nytimes.com/interactive/2020/science/coronavirus-vaccine-tracker.html> [will offer the best protection from getting and spreading COVID-19](https://www.nytimes.com/interactive/2020/science/coronavirus-vaccine-tracker.html)), the status of these studies is as follows:

1. Moderna has been developing a vaccine in partnership with the National Institutes of

Health with nearly \$1 billion in support from the U.S. Phase 3 Testing began in July and it was announced in October that all 30,000 participants had been recruited. If the Phase 3 trial is successful, Moderna could apply for emergency use authorization from the FDA by the end of the year. A production timeline is unknown.

2. Pfizer/BioNTech have collaborated to combine trials of a vaccine. One of the two vaccines developed was moved forward to Phase 2/3 trials, which began in late July. In September, it was announced that the U.S. trial of this vaccine would be expanded to more participants, and in October, they gained participation to include children as young as 12 in the trials. Although sufficient data to determine its efficacy was expected by the end of October, Pfizer has announced that the data thus far was insufficient to seek FDA approval. The U.S. has contracted for 100 million doses to be delivered by December (if FDA approval is obtained) in addition to an option to acquire 500 million more doses. If authorized by the FDA, Pfizer expects to manufacture over 1.3 billion doses of their vaccine worldwide by the end of 2021.
3. Johnson and Johnson launched its Phase 3 trial with up to 60,000 participants in September and expects results from Phase 3 by the end of the year, despite putting the trial on pause for 11 days to investigate an adverse reaction in a volunteer. If successful, the U.S. has an agreement to purchase 100 million doses once it is manufactured.
4. AstraZeneca launched Phase 3 trials in the United States over the summer but they were halted to investigate an adverse event with one of the volunteers. The FDA authorized the restart of the trial on October 23. The U.S. has a contract in place for 300 million doses once it is authorized.
5. Novavax launched Phase 3 trials in the U.K. in September and expects to launch trials in the U.S. by the end of November. If the trials succeed. Novavax expects to deliver 100 million doses to the US by April 30, 2021.

Given the guidance from the CDC and local health officials, as well as the data related to disease transmission in Norman, and hospital capacity in Norman and across the State, Ordinance O-2021-21, amending the sunset date of the COVID-19 ordinance, has been prepared for Council's discussion and action.

**DISCUSSION:** In consideration of the ongoing public health emergency and evidence that mask wearing and social distancing are effective means to prevent the spread of COVID-19, it is proposed that the sunset date be extended to March 1, 2021. By March, more information will be known about the progress of vaccine development. Should things change in a positive direction prior to March 1, Council can repeal or amend the ordinance at any time. This ordinance is scheduled for Council consideration on November 10, 2020 for First, Second and Final Reading. A separate vote on the emergency clause will be required. This allows the ordinance to go into effect immediately.

**RECOMMENDATION**: Staff forwards Ordinance O-2021-21 to Council for consideration.