



Prague, 15 May 2020,
Ref. No. MZDR 20599/2020-
1/MIN/KAN

MZDRX01AAR9B

PROTECTIVE MEASURE

The Ministry of Health, as the competent administrative authority pursuant to Section 80(1)(g) of Act No. 258/2000 Coll., on Public Health Protection and amending certain related acts, as amended (hereinafter referred to as "Act No258/2000 Coll."), **orders**, proceeding pursuant to Section 68(1) of Act No. 258/2000 Coll., the following protective measures to protect against the contagion of the COVID-19 disease caused by the novel SARS-CoV-2 coronavirus:

I.

Effective from 12:00 a.m. on 18 May 2020, it

I. orders

1. the prohibition of entry into the Czech Republic for all foreigners, who did not have temporary residence for over 90 days or permanent residence in the Czech Republic as at 12 March 2020; this does not apply to:
 - a) family members pursuant to Section 15a(1) of Act No. 326/1999 Coll., on the Residency of Foreigners in the Czech Republic and on the amendment of certain laws, as amended, citizens of the Czech Republic or citizens of the European Union with a domicile in the Czech Republic,
 - b) citizens of the European Union and foreigners with residency permits in the European Union who are transiting across the Czech Republic in order to travel home, and have a note issued by the diplomatic mission for this purpose (transit and repatriation),
 - c) if the entry of these foreigners is in the interest of the Czech Republic,
 - d) cross-border workers, pupils and students who regularly and repeatedly cross the state border of the Czech Republic and a neighboring country for the purpose of work or education in the Czech Republic, and who submit medical confirmation on having passed a test under the conditions set forth in paragraph 9,
 - e) workers in international forwarding,
 - f) workers in critical infrastructure servicing,
 - g) diplomats and officials of international organizations registered with the Ministry of Foreign Affairs,

- h) in urgent extraordinary situations,
- i) citizens of the European Union who enter the Czech Republic provably for the purpose of performing economic activity, for a period of at most 72 hours, provided they submit medical confirmation of having passed a test pursuant to paragraph III/1,
- j) citizens of the European Union who enter the Czech Republic for the purpose of performing economic activity or university studies, provided they submit confirmation of having passed a test pursuant to paragraph III/1,
- k) seasonal workers, provided they submit confirmation of having passed a test pursuant to paragraph III/2,
- l) essential and scientific workers who were issued a visa which became valid from 11 May 2020, and their family members accompanying them, who were issued a visa from 11 May 2020, provided they submit confirmation of having passed a test pursuant to paragraph III/2,
- m) healthcare and social service workers who were issued a visa with validity starting from 11 May 2020, and their family members accompanying them who were issued a visa from 11 May 2020, provided they submit confirmation of having passed a test pursuant to paragraph III/2,
- n) holders of a long-term visa for the purpose of collecting their residency permit, provided they submit confirmation of having passed a test pursuant to paragraph III/2,
- o) spouses and minor children of foreigners with permitted long-term or permanent residence in the Czech Republic, who were issued a long-term visa, provided they submit confirmation of having passed a test pursuant to paragraph III/2.

if the reason for entry is substantiated by the appropriate document;

2. all the persons who enter the Czech Republic pursuant to paragraphs 1(a) through (h) shall report this fact to the regional public health authority based on their place of residence or reported dwelling via telephone or other means of remote access immediately after entering the Czech Republic; this does not apply to the persons specified in paragraph 1
 - a) (a), if they submit confirmation of having passed a test pursuant to paragraph III/1; family members who were issued a short-term visa will submit a confirmation pursuant to paragraph III/2
 - b) (b) and (h), if the duration of their stay in the Czech Republic is no more than 24 hours or if they submit medical confirmation of having passed a test pursuant to paragraph III/1,
 - c) (c), (e), (f) and (g), if the duration of their stay in the Czech Republic is no more than 14 days or if they submit medical confirmation of having passed a test pursuant to paragraph III/1,
 - d) (d) if they submit medical confirmation of having passed a test which meets the requirements set forth in paragraph 9; this confirmation need not be submitted by healthcare and social service workers, workers in the basic components of the integrated rescue system, or workers in critical infrastructure entities, if the duration of their stay in the Czech Republic is no more than 14 days; furthermore, this confirmation of having passed a test need not be submitted by farmers working in the immediate border area, forest wardens, hunters and fisherman working in the immediate border area, whose stay in the Czech Republic is no more than 24 hours;

3. all citizens of the Czech Republic and foreigners with temporary residence for over 90 days or permanent residence in the Czech Republic, who do not submit medical confirmation of passing a test pursuant to paragraph III/1 when entering the Czech Republic, shall report this fact to the regional hygienic station based on their place of residence or reported dwelling via telephone or other means of remote access immediately after entering the Czech Republic; this does not apply to the persons who prove by means of the appropriate document that
 - a) they regularly cross the state border for the purpose of work or education, if they submit a medical confirmation of having passed a test which meets the conditions specified in paragraph 9; this confirmation need not be submitted by employees of healthcare and social services, basic integrated rescue system components, or workers of critical infrastructure entities who submit a letter from the diplomatic mission of the target country that these are healthcare, social services, basic integrated rescue system components or critical infrastructure entities, and if measures were adopted at the place of work to prevent the spread of the SARS CoV-2 coronavirus, in particular the obligation to wear protective respiratory equipment, if the period of travel abroad was no more than 14 days,
 - b) they travelled abroad in an urgent extraordinary situation, if the period of travel abroad was no more than 24 hours,
 - c) if they travelled abroad as employees in international transport, as employees of critical infrastructure maintenance, diplomats or officials of international organizations, provided the period of travel abroad was no more than 14 days; critical infrastructure maintenance abroad for these purposes must include a note from the diplomatic mission in the target country,
 - d) they work as farmers in the immediate border area, or as forest wardens, hunters and fisherman working in the immediate border area, provided the period of travel abroad was no more than 24 hours,
 - e) they travelled abroad for the purpose of performing economic activity, if the period of travel abroad was no more than 72 hours and they are not cross-border workers pursuant to letter (a);
4. regional public health authorities, to impose the necessary quarantine measures on persons who report their entry into the Czech Republic pursuant to paragraphs 2 and 3, and do not submit confirmation of having taken a test pursuant to paragraphs 2 and 3 to the locally competent regional public health authority even within 72 hours of entering the Czech Republic, and if the test proved the presence of SARS CoV-2, to decide about isolation pursuant to Section 64(1) in conjunction with Section 2(6) and (7) of Act No. 258/2000 Coll., on the Protection of Public Health and on the amendment of certain related laws, as amended;
5. all persons who report entry to the Czech Republic pursuant to paragraphs 2 and 3 to undergo a RT-PCR test for the presence of SARS CoV-2 immediately and to submit confirmation of having taken this test to the locally competent regional public health authority pursuant to paragraph III/1 at latest within 72 hours from entering the Czech Republic, unless the public health protection authorities decided on other quarantine measures in the individual cases of persons in the category of interest of the Czech republic, critical infrastructure maintenance, diplomats and officials of international organizations, or urgent extraordinary situations,

in accordance with Act No. 258/2000 Coll., and on the duration of these measures; if the person does not present confirmation of having taken a test pursuant to paragraph III/1, the regional public health authority will proceed pursuant to paragraph 4;
6. all persons who entered the Czech Republic from 12:00 a.m. on 18 May 2020,

- a) to report the incidence of any symptoms of an early infectious disease (in particular elevated temperature, cough, shortness of breath, digestive problems, loss of smell, overall weakness or other symptoms) immediately, via telephone or any other means of remote access, to the healthcare provider with whom they are registered in the discipline of general medicine or general pediatric medicine or, if they are not registered with any provider, to any provider in the discipline of general medicine or general pediatric medicine,
 - b) to undergo examinations for symptoms of an infectious disease when crossing the state border, and if the symptoms of an infectious disease are detected, to provide the necessary cooperation to healthcare workers in conducting the taking of a biological sample in order to determine the presence of the COVID-19 disease;
7. all entities who hire foreigners for the purpose of economic activity pursuant to the exception under paragraph I/1(j) through (n) will ensure for these foreigners
- a) accommodation for the entire duration of their stay in the Czech Republic,
 - b) medical care or a registered healthcare service provider for the entire duration of their stay in the Czech Republic, including payment for medical care, if not arranged otherwise,
 - c) their transport from the state border to the place of accommodation and for a period of 14 days from entry into the Czech Republic, transport between the place of accommodation and workplace, whereas the foreigner cannot use public transit to travel to and from work,
 - d) return to their country of origin if they lose their employment in the Czech Republic;
8. all the persons pursuant to paragraph I/1(j) through (n), whose entry is considered essential, may exceptionally be allowed to enter the Czech Republic even without submitting confirmation of having taken the test ; this necessity is confirmed by the minister responsible for the given sector; these persons are obliged to take the RT-PCR test for the presence of SARS CoV-2 within 72 hours of entering the Czech Republic and must submit confirmation of having taken the test pursuant to paragraph III/1 to the locally competent regional public health authority;
9. cross border workers, pupils and students who submit confirmation of having taken a test during a border inspection, to submit confirmation of having taken a test pursuant to paragraph III/3 when crossing the state border to the Czech Republic for the first time, if these are persons pursuant to paragraph I/3(a), or during such crossing of the state border into the Czech Republic which occurs within 72 hours of the first crossing, if these are persons pursuant to paragraph I/1(d), and subsequently during every next crossing of the state border to the Czech Republic which occurs after 30 days after submitting medical confirmation of having taken a test pursuant to paragraph III/1, to submit medical confirmation of having taken a test pursuant to paragraph III/1 which is no more than 4 days old;
10. suspension of the acceptance of applications for visas and temporary and permanent residence at the diplomatic missions of the Czech Republic, with the exception of applications for:
- a) short-term visas, if the purpose of the stay is specified in paragraph I(a), (c), (e), (f), (g), (h), (k) and (m),
 - b) long-term visas for the purpose of seasonal employment,
 - c) extraordinary work visas,
 - d) temporary residence if filed by foreigners included in the government Program for key

and scientific workers,

- e) temporary residence filed by foreigners included in the government Program of qualified employees, if they perform healthcare professions or work in social services,
- f) temporary residence filed by citizens included in the government Program for highly qualified workers,
- g) long-term residence permits for the purpose of scientific research and applications for residence permits for over 90 days for the spouses and minor children of scientific workers,
- h) temporary residence filed by foreigners included in the STUDENT scheme: concept of easing visa procedures for selected students and the Accelerated procedure for granting residence permits to foreigners - foreign students from third countries,
- i) long-term or permanent residence permits for the purpose of joint family cohabitation in the country and applications for long-term visas for family purposes, in the case of spouses or minor children of a foreigner with a long-term or permanent residence permit in the Czech Republic,
- j) issuing of long-term visas for the purpose of taking over a residence permit in the Czech Republic;

these exceptions apply only for visa and temporary residence applications at the diplomatic missions of the Czech Republic in countries whose measures implemented in reaction to the COVID-19 pandemic allow the acceptance of such applications; the Ministry of Foreign Affairs will publish a list of these countries via means enabling remote access;

11. interrupt all procedures regarding residence permit applications for over 90 days filed at the diplomatic missions of the Czech Republic, except for procedures about applications submitted at the diplomatic missions of the Czech Republic in countries whose measures implemented in reaction to the COVID-19 pandemic allow the performance of steps within the procedure; the Ministry of Foreign Affairs will publish a list of these countries via means enabling remote access;

II. prohibits

all persons who enter the Czech Republic and who were not ordered into quarantine pursuant to paragraph I/4, and the persons listed in paragraph I/1(i) through (o) to move freely around the entire Czech Republic for the duration of their stay in the Czech Republic, for minimally for a period of 14 days from entering the Czech Republic, except for:

- a) travel to work and movement as a part of performing work, and travel to perform business or similar activities and movement as a part of performing this activity,
- b) travel required to arrange essential life needs, to ensure child care, to ensure pet care, to use the necessary financial and postal services, and the refuel,
- c) travel to healthcare facilities and social service facilities,
- d) travel to take care of urgent official matters,
- e) travel back to one's home;
- f) funerals;

III. stipulates

1. that the medical confirmation of having passed a test refers to a confirmation issued by a physician or public health protection authority that a RT-PCR test for the presence of SARS-CoV-2 was conducted with a negative result, which is no more than 4 days old; the person procures the test at his/her own expense;
2. that the confirmation of having taken a test refers to the medical confirmation of having taken a test pursuant to paragraph 1, together with confirmation issued by the respective laboratory stating that a RT-PCR test for the presence of SARS CoV-2 was performed with a negative result, which is no more than 4 days old; the confirmation must contain data based on which the type of test, its age, the laboratory which performed the test and the fact that it actually issued the confirmation can be determined;
3. that an urgent extraordinary situation pursuant to paragraph I/1(h) refers to
 - a) the cross-border passage of members of the integrated rescue system, including mountain rescue and other components of the integrated rescue system,
 - b) transport of blood, bone marrow and other biological material by collection teams, transport and passage by ambulance or funeral service vehicle,
 - c) need to provide healthcare services,
 - d) fulfillment of obligations imposed by the court, travel based on a subpoena from a state authority, execution of a court decision, or other official acts or use of necessary financial and postal services,
 - e) picking up or dropping off of family members from or to abroad, including cars at airports,
 - f) essential care for close family members who are unable to take care of themselves, exercising of rights, care for minors or contact with them and ensuring the necessary care for animals,
 - g) participation at funerals or weddings,
 - h) other humanitarian situations.

II.

This extraordinary measure takes effect on the date of its issue.

Rationale:

An epidemic refers to the increased incidence of a disease which is limited geographically and in time. During epidemics of an infectious disease, there is typically a steep rise in the number of cases in time, where the contagion rate achieves higher values than regular sporadic contagions. The contagion rates at which epidemic spreading is achieved (the epidemic threshold) are various and differ according to the disease. For some diseases, the epidemic threshold value is not precisely known. The main criterion to determine whether or not there is an epidemic is the mutual epidemic connection between individual cases of the disease. The speed of the disease's spread in the population depends on the originator of

contagion, the incubation period of the disease and the transmission paths. The most serious epidemics in terms of impact and burden on the population are those caused by person-to-person contagion. The highest contagion rate in the population is reached through airborne spreading, via droplets which contain the infectious agent that are released in the patient's space when speaking, breathing, coughing and sneezing. Every infectious disease epidemic is an epidemic process composed of three basic elements: source of contagion, transmission path and a vulnerable individual.

In connection to the ongoing pandemic of COVID-19 disease and the adopted measures to avert its direct impact on the health of the Czech population, it has been shown that the most important tools to influence the ongoing epidemic and stop its uncontrolled spread is to target these individual elements of the epidemic process. The source of infection can be isolated and treated, disrupting the transmission path and protecting the vulnerable individual, or instance through quarantine measures or vaccination, whereas the latter is not yet available in connection to the COVID-19 pandemic.

During the epidemic spread of an infectious disease, there is a risk that without the adoption of extraordinary measures, the infection will spread uncontrolledly throughout the population, possibly exhausting the healthcare system's capacity for isolation and treatment, with a fundamental impact on the population's health as a consequence. The most dangerous is parallel spreading, where one infected person simultaneously infects more than one person, thus leading to the massive spread of the infection through the population.

The key measures include the possibility of the effective disruption of contagion between individuals and across the population (limit congregations, limited provision of selected services, use of protective and disinfectant products).

The main objective of the measures is to disrupt the uninterrupted epidemic process and stop the epidemic as quickly as possible with the lowest possible loss of life, while simultaneously minimizing the negative impacts on the economy (but with respect to the primary objective - stopping the epidemic). This can be achieved by restricting personal movement, limiting the holding of large events, limiting the operation of epidemiologically-risky activities, using adequate personal protective equipment and increased disinfection.

The measure, along with the other valid measures is focused on ensuring a wide range of specific measures which take into account preliminary caution in connection to the further spread of the COVID-19 disease.

The aim of the measures is to restrict certain activities or services, whereas this restriction is important particularly in the case of person-to-person contagion of infectious diseases, as is the case of COVID-19. In the case of a serious infection, which is spread through contaminated droplets (aerosol), it is essential to avoid concentrations of people especially in closed spaces, while stipulating other conditions regarding their staying in such places. For this reason, it is necessary to use instruments to regulate operations in such locations.

Likewise, it is necessary to restrict or regulate the operation of public activities and services which involve the higher production of droplets and aerosol, such as pools, swimming areas, shared showers, saunas, wellness centers. During airborne contagions, it is essential to control areas with large gatherings of people, during which transmission of the contagion is much easier. This is even more applicable in the case of epidemiologically-risky activities, such as hairdressing studios, pedicure, manicure and tanning salons and cosmetic or massage services.

Given the aforementioned principles leading to the limitation or elimination of the COVID-19 disease, it is also worthwhile to prohibit or restrict the organisation of public or private events. For during an epidemic, disrupting the path of the contagion in the population is a fundamental anti-epidemic measure. This measure is of the greatest importance in the case of contagions which are airborne or transmitted through direct contact. The restriction of movement and gatherings have been proven to be effective instruments for controlling the COVID-19 epidemic, if they are adopted as soon as possible after the outbreak.

The aim of this measure is to conduct the steps needed to further slow the spread of COVID-19, continue flattening the curve of persons infected with the SARS-CoV-2 coronavirus, which causes the COVID-19 respiratory disease in the Czech Republic, and thus prevent the overloading or collapse of the healthcare system, as happened or is happening in countries which did not adopt adequate measures in time (i.e. Wuhan in China, Italy, Spain, France, Great Britain, and certain parts of the USA, especially New York), while continuing to define the easing measures. In the given situation, flattening the curve of the number of persons infected with the SARS-CoV-2 coronavirus is geared towards achieving three fundamental positive outcomes:

- Preventing the overfilling of hospital capacities. This should allow the maintenance of essential medical care for patients who are not threatened by the SARS-CoV-2 coronavirus, and of those patients with the COVID-19 disease who require hospitalisation. The aim is to keep the mortality rate in the range of 2-3%, as has been successfully done in the Czech Republic to date, without it rising to the global average of almost 7%, or even 10 or more percent, as is the current rate particularly in France (where the mortality rate is almost 18%), the Netherlands, Belgium, Spain, Italy or Great Britain. Yet according to the State Health Institute, referring to data and analyses of the European Centre for Disease Prevention and Control, a serious condition requiring hospitalization can appear among more than 30% of those infected, of which on a broader average almost 2.5% of those infected (but probably substantially more) are patients in critical condition. The uncontrolled spread of the epidemic could affect far higher percentages of the population within a short period of several months.
- Prevent the explosive spread of the COVID-19 disease, during which there would be an increased rate of (a) spread of more aggressive strains of the SARS-CoV-2 coronavirus and (b) higher concentrations of the SARS-CoV-2 coronavirus in the body. A higher concentration of the SARS-CoV-2 coronavirus in the body and the presence of its more aggressive strains leads to a wider range of health complications in those infected and higher mortality, according to current scientific findings.
- Reduce the mortality rate and frequency of serious cases of infection, because over time knowledge about the behaviour of the SARS-CoV-2 coronavirus and methods for treating the infection and easing its consequences will be greater. Finally, a cure or vaccine should be developed. It is generally known that even now, experimental treatments using various types of antiviral substances (e.g. remdesivir or hydroxychloroquine) are underway, and in some cases this treatment has shown certain results.

If none of the extraordinary measures had been implemented, it cannot be precluded given the foregoing information that the total number of infected persons in the Czech Republic could have reached one million, of which the disease could have required hundreds of thousands to be hospitalised (whereas a non-negligible number of those hospitalised could require demanding intensive care based on current findings). Tens of thousands of people could have fallen victim to the disease. The Czech healthcare system (or the healthcare system of any other country for that matter) could not have handled this, not least due to the number of intensive care beds for adult patients (meaning ARD and ICU combined) and the number of ventilators for adults, whereas a part of these capacities is occupied by patients with other illnesses, meaning that only a part of them can still be reserved for patients with coronavirus. If the number of available intensive care beds and lung ventilators had been exceeded, the number of victims would start rising dramatically; had the spreading of the contagion been explosive, even very conservative estimates give a figure of hundreds of thousands of victims in the Czech Republic, and they would not be only seniors.

Similar measures as those adopted in the Czech Republic were and are being gradually adopted by the governments of other countries. It must be emphasized that some countries opted for less stringent steps and measures at the beginning. Over time, however, it was found that such moderate measures do not work practically anywhere. These governments gradually intensified their measures. Yet it has come to light that the impact on the population in these cases is worse than the immediate implementation of relatively strict restrictions,

which took place in the Czech Republic. Not only does an initial lax approach lead to the explosive spread of the COVID-19 disease (see the cases of Sweden, the Netherlands, Spain, Italy, Great Britain and the USA) and the loss of lives currently in the order of thousands to tens of thousands in the individual countries, but in the end it results in equally strict or even stricter measures than those applied in the Czech Republic.

The different approach of individual governments is due mainly to the fact that there was very little information about the SARS-CoV-2 coronavirus, its precise characteristics and details about its spread and transmission as at the date of declaring the individual measures, or even now. The various measures of individual countries' governments are undertaken in good faith and considering all the available information. Nevertheless, in the course of the pandemic almost all western countries affected by the COVID-19 contagion gradually took the same steps as the Czech Republic (i.e. declaration of a state of emergency, restriction of movement and entry of foreigners, limitation of retail sales, etc.), even if the procedures of the individual countries may differ in details. The degree of uncertainty and higher risk related to the COVID-19 epidemic is due to the fact that the virus is gradually developing and mutating, which alters its characteristics. Compared to other viruses, the genetic information of coronaviruses is fairly variable, which is one of the reasons for the selection of various strains of the virus. Furthermore, findings about the SARS-CoV-2 coronavirus and its characteristics are also changing dynamically.

Nevertheless, available empirical data indicates that a non-restrictive approach leads to far more adverse consequences than the adopted measures. Beyond the framework of the aforementioned countries, a typical example is as yet benevolent Sweden that, according to available data, has three times the number of infected patients than the Czech Republic, with more than twelve times the number of fatalities (while the population of Sweden and the Czech Republic is almost identical).

The available, especially international comparisons indicate that the strategy adopted in the Czech Republic was and is correct and adequate. Essentially, only an active strategy of social distancing enforced by public authority leads to a reduction of the COVID-19 disease reproduction number and makes it possible to gain control over its spread, respectively the avoidance of explosive spreading. Unlike the Czech Republic, a number of countries have experienced such an explosive spread, led by those countries which delayed restricting free movement and public encounters.

The possible sudden easing of adopted measures could have far-reaching consequences, and in the extreme case lead to the complete thwarting of the positive results achieved to date in fighting the COVID-19 disease in the Czech Republic.

From the mass spread of the SARS-CoV-2 virus and the outbreak of the global COVID-19 pandemic, there was an unprecedented halt in the global mobility of persons within just a few days. Most countries around the world implemented more or less stringent restrictions on entry to their territory. The majority of countries limited entry to essential travel (returning home for citizens and foreigners with residency permits, international transport, family reunification and cross-border workers). The entire European Union reacted to this procedure on 16 March 2020 with the coordinated implementation of a universal ban on entry to the European Union from third countries, with stipulated exemptions.¹ This ban was then extended until 15 June 2020, which still applies.

Even the European Union member states gradually implemented mutual medical and subsequently also border controls for entry to their territory, which restrict entry only to selected categories. At present, the reintroduction of internal border controls has been officially announced by 18 Schengen Area members (of a total of 26), given that a number of other European Union and Schengen members implemented additional measures to restrict entry. Within the debate in the European Union, it was recommended to allow free access for persons in similar categories as when entering from countries outside the European Union, and to ensure the free movement of workers in the specified sectors.²

From the outset, the Czech Republic did not diverge from the global or European average in

its adopted measures to restrict entry. Both national and European regulations allow the definition of rules for entry in connection to measures against the introduction of infectious diseases from abroad (Section 68 of Act No. 258/2000 Coll., on Public Health Protection). In reaction

¹ <https://eur-lex.europa.eu/legal-content/CS/TXT/HTML/?uri=CELEX:52020DC0115&from=EN>

² [https://eur-lex.europa.eu/legal-content/CS/TXT/HTML/?uri=CELEX:52020XC0330\(03\)&from=EN](https://eur-lex.europa.eu/legal-content/CS/TXT/HTML/?uri=CELEX:52020XC0330(03)&from=EN)

to the favorable development of the epidemic, the Czech Republic was among the first in the European Union to start adopting gradual easing measures.

Easing with respect to travel is very cautious and focuses on truly essential reasons for travelling to the territory, with regard to which it is possible to accept the risks related to possible contagion and the causing of another wave of disease.

To date, such essential travel has included the following areas or professions:

- Repatriation (conducted in the Czech Republic through extensive repatriation schemes from 14 March 2020 to 14 April 2020),
- International transportation,
- Diplomats and officials dispatched to fulfill official tasks,
- Key infrastructure maintenance,
- Family reunification,
- Cross-border workers,
- Seasonal workers in agriculture,
- Healthcare staff and social services staff.

In principle, the next stage of easing is defined based on limiting the degree of risk on one hand (mandatory negative PCR test for SARS-CoV-2) and based on the need for travel on the other hand.

At the European Council of 23 April 2020, the European Union agreed on maximum coordination of the cancellation measures to fight the spread of COVID-19 based on a Joint European Roadmap.³ The main premise for the cross-border system is firstly the gradual easing of measures on internal borders, and only later on the external borders. In this regard, the European Commission on 13 April 2020 presented more specific guidelines for the procedure on internal borders, which call for easing based on phases, i.e. the easing of measures between regions or member states where the epidemiological situation is similar and the necessary health and hygienic measures are implemented. Any easing should be coordinated and governed by three key criteria (epidemiological development; protective measures including social distancing; and economic and social impacts). Priority during easing should be given to travel for the purpose of performing a profession and for family reasons. The European Union also recommends the option of replacing universal border controls with targeted or random checks.⁴ With respect to external borders (travel from countries outside the European Union), it is recommended to continue limiting this travel to essential travel with regard to the risk of a second wave of contagion.

Hence, the renewed possibility of entry within the European Union is presently defined, in accordance with the recommendations of the European Union, only for

- Family reunification,
- economic activity,
 - o business trips of up to 72 hours with the condition of a negative test,
 - o new workers from European countries under the condition of a test abroad, or in exceptional cases a test within the country,

https://ec.europa.eu/info/sites/info/files/joint_eu_roadmap_lifting_covid19_containment_measures_cs.pdf

⁴ https://ec.europa.eu/info/sites/info/files/communication_freemovement.pdf

- cross-border workers from neighboring countries under the condition of regular testing once every 30 days,
- studies
 - of cross-border pupils and students from neighboring countries under the condition of regular testing once every 30 days,
 - new students from European Union member states under the condition of a test abroad, or in exceptional cases a test within the country.

Reintroduction of the possibility of entry from third countries is currently proposed so as to comply fully with the recommendations of the European Commission, which concluded the conclusion of the European Council, thus newly introducing the possibility of entry for additional categories:

- scientific workers,
- reunification of close family also among foreigners from third countries.

Nevertheless, the measures for the purpose of travel from third countries are linked to the condition of a negative test for SARS-CoV-2 before travelling. In exceptional cases, the test may also be taken within the Czech Republic.

Furthermore, the restriction of movement for 14 days after returning from abroad continues to apply both to employees and returning Czech citizens. Every person who enters the territory of the Czech Republic by crossing a border (regardless of whether or not they have a test) and who is not ordered into quarantine must observe the rules of restricted free movement of persons (meaning they may move about only for the predefined reasons). Even in this case, the main reason is the inaccuracy of testing and the related need to limit the risk of contagion during the incubation period.

In order for the Czech Republic to be prepared for further gradual easing, the submitted material recommends continuing in the administrative proceedings in which further easing may be expected, and where it is possible with regard to the situation in the individual countries.

Easing in the area of short-term stays (tourism) is now the subject of coordination within the European Union and bilateral negotiations, particularly due to pressure from the member states for which tourism is a key economic sector. In its guidelines of 13 May 2020, the European Commission recommends the possible renewal of tourism activities only after considering and implementing a series of measures, e.g. a low number of infected persons, adequate healthcare capacities, strong monitoring, testing capacity or coordination and communication.⁵

Mgr. et Mgr. Adam Vojtěch, MHA
Minister of Health

Signed electronically

⁵ https://ec.europa.eu/info/sites/info/files/communication_tourismservices_healthprotocols.pdf

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Electronic signature - 15 May
2020 Signature author's
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