Rationale for Government Resolution No. 217 of 26 February 2021

in accordance with Section 5(b) and (e) and Section 6(1)(b) of the Crisis Act, the government has decided to adopt crisis measures to resolve the existing crisis situation.

The crisis measures are issued in connection with the adverse development of the epidemiological situation in terms of the occurrence of the COVID-19 disease caused by the SARS-CoV-2 coronavirus.

The purpose of the crisis measures is to ensure the necessary conditions to restrict the further spread of the given disease in the Czech Republic and thus fundamentally reduce the extreme strain on healthcare service providers caused by the high share of patients hospitalized with COVID-19, the high share of patients requiring intensive care, and the negative trends of mortality from COVID-19.

The epidemiological situation in the Czech Republic is characterized by the protracted community spread of SARS-CoV-2, which creates conditions for the uncontrolled transmission of the disease to persons with compromised immunity due to age and comorbidities, but there is also a rising trend of illness among persons in younger age groups and persons without risk factors.

The adverse epidemiological situation is currently strongly exacerbated by the spread of mutated strains of SARS-CoV-2, in particular the British variant of the virus, characterized by a heightened capacity for transmission between persons.

However, it must be emphasized that the spread of biological agents has very different characteristics compared to other agents, e.g., the spread of chemical substances.

Exposure in this case does not mean only contact with a certain concentration of the substance for a defined time, but is a much more complex process with a number of better or lesser known parameters.

Contagion depends on:
1. Presence of the source of contagion,
2. Actual transmission of contagion,

The incidence and course of disease are also affected by the size of the infectious dose, the transmission mechanism, the entry gateway and the vulnerability of the host.

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 containing the infectious agent that are released in the patient’s space when speaking, breathing, coughing and sneezing. In relation to the ongoing pandemic of the COVID-19 disease and the adopted measures to avert its direct impact on the health of the Czech population, it has been shown that one of 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, for instance through quarantine measures or vaccination, whereas the latter is not currently available in sufficient quantities in relation to the COVID-19 pandemic.

During the epidemic spread of an infectious disease, there is a risk that without the adoption of measures, the infection will spread uncontrolledly through the population, possibly exhausting the healthcare system’s capacity for isolation and treatment, with a fundamental impact on the population’s health. The most dangerous is parallel spreading, where one infected person simultaneously infects more than one person, thus leading to a massive spread of the infection through the population. The key measures include the possibility of effective disruption of
contagion between individuals and across the population (limit congregation, limited provision of selected services, use of protective and disinfectant products).

The only real solution to ensure a change in the very adverse epidemiological situation regarding the incidence of COVID-19 in the Czech Republic is to impose very strict anti-epidemic measures targeted on the key links in the chain of transmission of SARS-CoV-2 under precisely defined time and systematic conditions.

Given the current intensity of the spread of the SARS-CoV-2 virus, there is a very serious risk that without adopting strict crisis measures, the rising uncontrolled spread of the contagion will lead to the exhaustion of capacities of the healthcare system, with fundamental and often irreversible impacts on public health. A failure to adopt stringent anti-epidemic measures, which will reduce the number of persons infected and those requiring hospitalization, would lead to the exhaustion of bed and staff capacities at hospitals and a further worsening of the condition of patients e.g., with cardiovascular and oncological diseases, who will not receive adequate planned care, which is essential for chronic diseases.

The justification of the crisis measures follows from the results of an analysis of the key epidemiological characteristics and evaluation of the risk of the further spread of the disease.

1. There is intensive community transmission of the disease, exacerbated by the incidence of the British variant of SARS-CoV-2
   - The share of those infected where the source of contagion was not identified is increasing
     - If the spread of new virus mutations remains uncontrolled, the value of the reproduction number R is expected to rise from the current 1.2 to 1.4

2. A rising share of positive tests in the total number of tests performed on the given day is being registered
   - A rise of 7.3% in the share of positive tests in the total number of tests within diagnostic indication was registered during the 8th calendar week of 2021

3. A rising share of infected patients in the group of highly vulnerable persons is being registered
   - This is more than 1400 persons on business days, while the weekly value is 9,367 persons
   - as at 25 February 2021, more than 10,505 cases of the disease were reported in the senior group (65+) in the past 7 days, which constitutes 492.8 cases per 100,000 inhabitants

4. The rising exhaustion of the capacity of healthcare services provider is being registered
   - As at 25 February 2021, the total number of hospitalizations was 6,967. The strain on intensive care across the Czech Republic is rising consistently, patients requiring intensive care account for about 21% of the total number of those hospitalized. In total, there are now 1,433 persons hospitalized in intensive care, of which 717 require artificial lung ventilation (UVP), and 27 require extra-corporal membrane oxygenation (ECMO). The available bed and staff capacities in the healthcare system are gradually being exhausted.
   - Should the burden on hospitals start rising in connection to the spread of the epidemic at a reproduction number of 1.2, then it is necessary to anticipate the risk of a daily increase of +30 patients in beds
   - During a very short period, around 8 regions will have exhausted all the functional intensive care capacities
   - The longer-lasting fundamental restriction or complete suspension of planned care provided to citizens undoubtedly constitutes worsened access to healthcare and the worsened health of the population, because it is necessary to also treat other diseases, especially in the area of cardiovascular and oncological medicine, which is the most common cause of the death in the Czech Republic. Cardiovascular diseases are the most common cause of death both among women (50% of all
deaths) and men (42%). Cancer is the second most common cause of death and causes 23% of all deaths among women and 28% of all deaths among men (e.g., State of Health in EU, CZ, 2017).

- Although the vaccination of healthcare professionals is ongoing (41.2% have been vaccinated as at 25 February 2021), the number of healthcare professionals with COVID-19 is still very high (as at 24 February 2021, a total of 2840 healthcare professionals are positive (294 physicians, 1322 nurses and 1224 other HP). The lack of qualified healthcare professionals is therefore a fundamental issue.

5. The negative trend in the development of the epidemiological situation continues to worsen on a local level.
   - In the worst affected regions, the strain is 2.5 to 3 times higher than in the other regions.
   - The rapid spread of the contagion is evident primarily in the northern and western parts of Bohemia, where increased incidence is noted in a rising number of districts.
   - The unfavorable situation persists in the Trutnov, Náchod, Cheb, Sokolov and Tachov districts, where the effect of the closing off of the districts has not yet been felt due to time limits.
   - Increased numbers of patients with newly diagnosed COVID-19 disease are also being noted in other areas, especially in the Plzeň and Pardubice regions.
   - Given persistent community contagion, the risk of the uncontrolled spread of the disease to other regions is very high.

6. Contagion trends in collective groups
   - The most common social environments and most probable locations of COVID-19 contagion are consistently the workplace, family + household + leisure environment. The share of cases thus characterised in the total number of registered cases (not including healthcare professionals) in the month of January 2021 was 53.0%, whereas the value of this share is the highest yet in the total reviewed period from March 2020, and reflects the changes in population mobility in connection to the intensive use of home office.
   - From May 2020 until the present, the most common sites of outbreaks of COVID-19 were school facilities, including kindergartens (1254), followed by social service facilities (715) and healthcare facilities (314), and workplaces (281), with a prevalence of manufacturing plants (141)
   - After closing schools (except for kindergartens) from 14 October, there has been a decline and elimination of contagions at primary and secondary schools, but after some children and students returned to schools from 18 November and 30 November, an increase was observed at primary and secondary schools. Following a decline during the Christmas holidays, a rise was observed again at kindergartens and primary schools since the start of 2021.
   - After the closing of schools (except kindergartens) from 14 October, the number of newly diagnosed positive teachers and professionals in the school system ceased and gradually declined, but after some children and students returned to schools from 18 November and from 30 November, the figures rose again, culminating in the first week of 2021, followed by a decline and increase again in February 2021.

7. Mobility and its trends
   - The restriction of personal mobility and the related limitation of risk contacts and the reduced probability of contagion is the basis of all the adopted measures, both in the Czech Republic and other countries. Population mobility as an indirect factor affecting the number of contacts provably correlates to the speed of spreading the disease, but the relation must always be assessed with a 14-day delay. This means that the high-risk increase of mobility will become apparent in the spread of the epidemic after about 10-14 days. The opposite also applies, where the effect of reducing high-risk mobility can be observed only after the specified time delay.
   - The high values of COVID-19 incidence began towards the end of 2020, when the reproduction number reached values of about 1.5. The time correlation with
increased mobility in this period is statistically proven.

More detailed information about the degree of the spread of the epidemic and related information is published every day on the Ministry of Health’s website onemocneni-aktualne.mzcr.cz.

The restriction of personal mobility and the related limitation of risk contacts and reduced probability of contagion is the basis of all the adopted measures.

Re: point I/1

The activity of shops and service establishments is restricted, because these are places where a number of people meet in an enclosed space, who would otherwise not come into contact, and such an environment promotes the further spread of the epidemic.

Given the need to sell certain goods or provide certain services at facilities, exemptions from this prohibition are stipulated:
- sale of foodstuffs - due to the need to allow inhabitants access to food, meaning nutrition,
- shops selling fuel and other supplies for the operation of road motor vehicles - due to the need to ensure transport, such as freight for the transport of goods, as well as personal transport for personal travel within the exceptions from the prohibition of free movement,
- fuel distributors - due to the need to ensure heating both in households and in commercial and manufacturing plants, or at offices,
- sale of hygienic goods, cosmetics and other drug store goods - due to the need to enable the observance of hygienic and other healthy habits,
- pharmacies, dispensers and sellers of medical equipment - due to the need to ensure the availability of medicinal products and medical equipment for inhabitants, because these are life and health saving or supporting products,
- stores selling feed and other supplies for animals - due to the need to ensure food and other life needs for animals,
- stores selling spectacles, contact lenses and related goods - due to the need to ensure these products, which serve to compensate for visual disorders; if these were unavailable, people’s lives would often be significantly limited,
- stores selling newspapers and magazines - due to the need for access to information; although it may seem that information can be obtained from many other sources such as television, radio or the internet, for a number of people this is still an important source of information about public events including important information concerning the fight against the COVID-19 epidemic,
- stores selling tobacco products - due to the need for access to tobacco products, on which a number of people are dependent; although this is a phenomenon harmful to health, the sudden unavailability of tobacco products would have a negative impact on those seriously addicted to them,
- establishments of business providing road motor vehicle towing and repair services - due to the need to ensure the operability of vehicles for the transport of goods and persons,
- establishments enabling the collection of goods and consignments purchased remotely - given that citizens cannot purchase most other goods (e.g., clothing and footwear, consumer goods, electronics, etc.) by standard means, i.e., in shops, it is necessary to leave the option of procuring these goods in some manner. Remote sale limits the meeting of people in closed spaces (shops) and limits their contact to the time needed to collect the goods purchased remotely. Queues and the number of people at the establishment can then be effectively regulated using systemic measures (limited number of persons in the establishment, distances between people waiting in a queue),
- shops selling gardening equipment including seeds and seedlings - due to the forthcoming end of winter, it is necessary to allow farmers but also other lay persons (gardeners) to purchase seeds and seedlings, as well as tools and other essential
supplies, because any delay in activity related to the sowing or planting of trees and bushes would have a negative impact on crop yields, which could have a major negative effect on the prices of foodstuffs not only in this calendar year.

- travel ticket sales - maintaining the operation of ticket sales is essential in the interest of allowing citizens to travel to work, or to the physician, etc., because not everybody owns an automobile, or is able to use one for various reasons (breakdown, car accident, age, etc.),

- flower shops - given the character of goods and in context with the epidemiological risk, not granting an exception would mean high demands on storage in cooling and freezing boxes, because these are goods which come from fresh cultivation,

- service shops for computer and telecommunications equipment, audio and video receivers, consumer electronics, devices and other household appliances - these repairs shops must be left in operation because it is necessary to ensure that households (also given the other restriction of goods and movement) can function as normally as possible and that citizens are able to have appliances repaired in the case of a breakdown of any essential household appliances or computer and telecommunications equipment (also needed for home office),

- business premises offering funeral services, carrying out embalming and preservation, the incineration of human remains, including the placing of human remains into urns - it is logical that the functioning of these services is essential at any time,

- unattended carwashes - washing an automobile in a carwash without an attendant does not pose any increased risk of COVID-19 contagion in epidemiological terms

- shops selling household goods and tools, whereas household goods do not refer to furniture, carpets and other floor coverings - in this case, the purpose is to ensure the problem-free operation of households, especially at a time when Czech citizens are obliged to spend most of their time at home due to the restriction of free movement,

- material collection and buyback facilities and compost yards - exception granted with respect to avoiding potential impacts on the environment, because the composting process, which generates plant waste, also has a specific regime in terms of the creation of humus nutrients, especially in the area of preparations for spring work in agriculture and gardening,

- taxi services or other individual contractual personal transport services - as in the case of ticket sales, it is necessary to ensure the possibility for Czech citizens to travel e.g., to work, to the physician or to ensure care for relatives in connection with the restriction of movement, and one of the variants is to use a taxi service,

- facilities at which psycho-diagnostic examinations are carried out, which are an integral part of selection procedures and subsequent essential conditions stipulated by legal regulations for performing certain activities, under the condition that the service is provided so that one provider meets with one customer at one time - in the case of these psycho-diagnostic examinations, their passing is a directly-stipulated condition, without the fulfillment of which certain activities could not be performed at all, respectively persons seeking employment or persons intending to perform such activity would be unable to do so.

In the case of other stores and service establishments, the government believes that their operation is not essential for a limited time, given the need to restrict contacts and prevent the spread of the epidemic. The government will regularly review the need to close stores and service establishments and the scope thereof.

Re: point I/2

The reasons for limiting the operation of catering establishments are the same as in the case of shops and service establishments, because these are places where a number of people meet in an enclosed space, who would otherwise not normally come into contact, and such an environment promotes the further spread of the epidemic. In the case of catering establishments, an added factor is alcohol consumption, after which people lose their inhibitions, respectively act differently than they would if they had not consumed alcoholic
Because it is essential for certain catering establishments to operate despite the foregoing, the following exemptions from this prohibition are stipulated for:

- establishments which do not serve the public - the aim of the foregoing prohibition is to limit the arbitrary congregation of persons who are not otherwise in regular contact; however, this does not apply e.g., to stabilized collectives of employees, physicians, nurses, other medical and non-medical staff at hospitals, patients at hospitals or inmates and employees at prisons. Given that these cases do not involve arbitrary meetings, because the given persons meet regularly at work or at other places, the risk of the contagion or spread of COVID-19 is not increased by allowing the operation of these establishments.

- school catering facilities for employees present on the workplace and children, pupils and students participating in in-person learning - the same applies as stated above,

- establishments at accommodation facilities, provided they provide catering only to accommodated persons and only between 5:00 a.m. and 8:59 p.m. - despite obvious efforts to restrict population mobility to the maximum possible degree, e.g., by prohibiting the provision of most accommodation services (especially short-term and recreational), it is obvious that some accommodation facilities will remain in operation, e.g., due to business travel. It is then essential to ensure catering for the accommodated persons, especially in a situation where the presence of the public at other catering establishments is prohibited based on this measure. Likewise, it must be noted that not all accommodation facilities are equipped (e.g., the absence of cutlery) to allow the consumption of take-away meals (e.g., from a dispensing window) in the room.

Re: point I/3

The listed operations, events and activities, at which there is usually a higher concentration of visitors or participants, are prohibited. In the case of the artistic performances under point I/3(a) without the attendance of spectators, conditions are stipulated for conducting them in the safest possible manner in epidemiological terms. There are nominal exemptions from the prohibition of in-person rehearsals in point I/3(c), which were evaluated as essential, with a restricted number of participants.

Re: point I/4

Likewise, the reasons for prohibiting the provision of accommodation services are the same as per points I/1 and I/2, because during the provision of accommodation services, especially those of a short-term or recreational character in closed spaces (restaurants, common rooms, bars, lounges, receptions, etc.), a number of people meet, often from various places in the Czech Republic, that would not otherwise normally come into contact, and such an environment promotes the further spread of the epidemic.

However, even in this case it is necessary to stipulate certain exemptions from this prohibition, in that accommodation services can be provided:

- to persons for whom this accommodation is essential in order to perform their work, occupation, business or similar activities - as stated above, the performance of certain occupations requires business travel, or other shorter or longer stays at places so far from the place of residence that it is not possible to return to the place of residence every day. In these cases, upon fulfillment of the stipulated conditions (written confirmation from the employer or client + record of this confirmation by the accommodation service operator), the provision of accommodation services is permitted,

- persons on whom work duty was imposed pursuant to the Crisis Act - this case obviously concerns an essential activity to manage the fight against the COVID-19 epidemic, which was directly imposed on the affected persons by law; this often involves the performance of an activity far from the place of residence, which is why the accommodation of these persons must be ensured,
- foreigners, if they have no other place of residence in the Czech Republic and have the right to enter and stay in the Czech Republic in accordance with other regulations - this case refers to foreigners legally staying in the Czech Republic, who do not have any other accommodation options (e.g., rented house or apartment) than accommodation at accommodation facilities,
- persons who were ordered into isolation or quarantine - there may be cases when the persons on who one of the aforementioned measures was imposed have no place to return to, e.g., because they live in a household with a person for whom the risk of COVID-19 contagion would be excessively high given their age or comorbidities, whereas these persons have no other place where they could stay during the period of isolation or quarantine (other apartment, cottage, recreational vehicle, etc.). For these persons, it is necessary to ensure the possibility of using accommodation services for the required time,
- persons for the purpose of concluding accommodation commenced before the effective date of this government resolution, if they have no other place to stay in the Czech Republic - as at the effective date of this crisis measures, persons may stay in the Czech Republic who commenced there stay at a time when this was still possible, but had no other accommodation option when the prohibition of providing accommodation services came into validity in CZ; these persons must be allowed to complete their stay, ideally at the place where they have already been accommodation for some time,
- persons who are accommodated for the purpose of being provided with healthcare services, and their required accompaniment - it is possible to move freely about the Czech Republic for the purpose of receiving medical care, whereas it must be admitted that some medical procedures require the patient to be assisted by a third party after the procedure (and sometimes also before it), e.g., when returning to the place of residence, when moving about the hospital, or if the patient is a child.

Re: point I/5

The reasons for prohibiting the drinking of alcoholic beverages in publicly accessible places are likewise motivated by restricting the possibility of meeting between people who do not normally come into contact. This does not refer only to the areas near the dispensing windows of catering establishments, but also other places to which people can bring alcoholic beverages purchased e.g., at stores and there collectively consume them for a longer time. These are typically places near grocery stores, parks, river embankments, etc. For logical reasons, this does not include the consumption of alcohol on the indoor premises of catering establishments, because their operation is sufficiently restricted under point I/2 of this measure and these are often not publicly accessible places (e.g., employee canteens, canteens at hospitals, schools, prisons, etc.).

Re: point I/6

Due to the existence of a number of essential exemptions and in the interest of maximally restricting contact between people, with respect to the prohibition of retail sales and the sale and provision of services under point I/1, it is also necessary to regulate the opening hours of these stores and service establishments, so as to allow enough time to procure the necessary purchases and other matters, meaning a total of 16 hours. For the remaining 8 hours (evening and night), the stores and establishments are closed, which can also have an impact - in addition to restricting contact between persons - on sufficient rest for the employees of these stores and establishments. Several clearly defined exemptions from this prohibition are stipulated, without which there could be e.g., a collapse in transport due to running out of fuel (filling stations), the impossibility of obtaining and administering essential medicines (pharmacies), impossibility of refreshment for medical and non-medical staff at healthcare facilities (shops or catering services), refreshment at airports or train stations during long trips, e.g., with a transfer, etc.

Re: point I/7
The reasons for prohibiting sale at markets, marketplaces and mobile shops are precisely the same as for prohibiting the activity of stores and service establishments, because despite the fact that these are often open-air spaces, they are places where a number of people who would not otherwise come into contact meet on a small and often restricted space, and such environment promotes the spreading of the epidemic. However, an exemption must be granted for mobile stores which supply basic goods (foodstuffs and drug store goods) to citizens living in municipalities where it is not possible to procure basic life and hygienic needs, and this is ensure by mobile stores with grocery and drug store goods. In the case of ambulant and door-to-door sales, there is often contact between the salesperson - customer in a closed space, i.e., the customer's apartment, which can threaten their health

Re: point II/1

Rules are stipulated for the operation of catering establishments, where the public presence at the establishment is not prohibited, meaning establishments which do not serve the public (e.g., employee canteens, catering for healthcare services and social services providers, at prison facilities), school catering establishments for employees present on the workplace and children, pupils and students participating in in-person education, and establishments at accommodation facilities under the condition that they provide meals only to accommodated persons. It is necessary to allow catering to these persons, but under the condition of minimizing high-risk contacts. Customers must be seated so that there is a distance of at least 1.5 meters between them, except for customers sitting at one table; a maximum of 4 customers may be seated at one table, except for members of the same household; if the table is long, more customers may be seated at it, so that there is a distance of at least 2 meters between groups of at most 4 customers, except members of the same household. Furthermore, the operator must not allow a greater number of customers into the indoor premises of the establishment than the number of seats available to customers in the indoor premises of the establishment; the operator is obliged to keep a written record of the current number of seats for customers; In order for the customer not to remain at the establishment after consuming the meal, the production of live music and dancing is prohibited and a wireless internet connection must not be provided to the public.

Re: point II/2

Contacts between customers consuming food and meals are restricted in the case of sales from catering establishments outside their indoor premises (i.e., a dispensing window), in that these persons are obliged to maintain a distance of at least 2 meters from other persons in the vicinity of the establishment, unless they are members of the same household.

Re: point II/3

The operation of musical, dance, acting and similar social clubs and discotheques is restricted, in that the public presence at these venues is prohibited, to thus limit contacts during these leisure activities.

Re: point II/4

Hygienic rules are stipulated for the activity of shopping centers with an area exceeding 5000 m², so as to prevent the congregation of persons and high-risk contact between them. The use of rest areas (chairs, lounges, benches, etc.) will be restricted so that people do not gather in these places, and the option of wireless connection to the internet for the public must not be provided. In order for these rules to be observed, the operator must ensure at least one person to supervise their fulfillment. Instructions for customers are communicated to customers and other persons primarily through information signs, posters, on displays, intercoms, etc. The operator is obliged to ensure the visible posting of instructions to maintain a distance of 2 meters between persons in the publicly accessible areas of the shopping Centre (e.g., by means of infographics, adverts on the center's radio, infographics at the entrance to stores and other
facilities, infographics on the floors of public areas, etc.). The gathering of persons will be restricted, particularly in areas where this can be expected, e.g., in the underground garages, areas in front of elevators, escalators, travellators, bathrooms, etc. In order to prevent the undesirable congregation of persons, the operation of children's play corners is prohibited. To prevent the spread of the epidemic, the operator is obliged to ensure the maximum possible air circulation with the intake of outdoor air (ventilation or air-conditioning) without air recirculation in the building. To prevent the congregation of persons, promotional activities where there is a person present to ensure their progress are prohibited in shops. Sales from catering establishments located in shopping centers are only possible through a dispensing window or as take-away meals, whereas the reason is again to prevent customers from remaining at the catering establishments and thus coming into high-risk contact with others.

Re: point II/5

Contacts are restricted during the provision of public library services, in that the dispensing and reception of books is carried out by contactless means or via a dispensing window, so that this service is enabled, because e.g., students need access to information for their studies, for writing qualification theses, etc., but contact should be limited to the absolute minimum.

Re: point II/6

Hygienic rules are stipulated for the operation of establishments pursuant to point I/1, the operation of which is prohibited so as to prevent the congregation of persons and high-risk contact between them. The operator will not allow more than 1 customer per 15 m² of sales area in an establishment; in the case of establishments with a sales area of less than 15 m², this restriction does not apply to a child under 15 years of age accompanying a customer or a person accompanying a customer who holds a medical disability pass; in the case of other establishments, this restriction does not apply to a child under 6 years of age accompanying a customer. The sales area refers to the part of the business premises designated for the sale and display of goods, i.e., the total area accessible to customers, including dressing rooms, the area taken up by tills and displays and the area behind the tills used by the sales staff; the sales area does not include offices, warehouses and preparation areas, workshops, stairs, changing rooms and other social facilities. The operator is also obliged to actively prevent customers from coming closer than 2 meters to each other, unless these are persons from the same household. They must ensure the management of queues of waiting customers, both inside and outside the store, particularly by marking the waiting area and placing symbols indicating the minimum distance between customers (minimum distance of 2 m), whereas a customer who holds a medical disability pass has a priority right to shop. A very important resource against the spread of the epidemic is disinfectant, and the operator is obliged to place disinfectants near frequently touched objects (especially handles, railings, shopping carts), so that they are available to employees and customers of the establishment and can be used for regular disinfection. As stated above, the operator is obliged to ensure information for customers about the aforementioned rules, in particular by means of informative posters at the entrance to the establishment or by stating the rules through loudspeaker announcements in the establishment, and to ensure the maximum possible circulation of air by taking in outdoor air (ventilation or air conditioning) without recirculating air in the building. At these establishments, promotional activities where there is a person present to ensure their progress are prohibited. It is expressly stipulated that in the case of a person pushing a pram with a child, the operator must not oblige them to use a shopping trolley to shop, and the child in the pram is not included in the total number of persons permitted to be in the sales area.

Re: point II/7

The provision of rehabilitation spa care is restricted in that henceforth it can only be provided to patients for whom it will be at least partly paid from public health insurance, in order to limit the number of contacts at spa facilities, where clusters of infected persons occur repeatedly in very high numbers. Moreover, cases have been noted when this type of medical care is
seemingly provided, but it is actually a wellness stay or wellness service. The condition of payment from public health insurance appears to be a suitable control element for the genuine need of providing spa care.