EXTRAORDINARY 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 No. 258/2000 Coll.”), orders, proceeding pursuant to Section 69(1)(i) and (2) of Act No. 258/2000 Coll., on protecting the population and on preventing the occurrence and spread of the COVID-19 disease caused by the new SARS-CoV-2 coronavirus, this extraordinary measure:

I.

1. Effective from 1 March 2021 from 12:00 a.m. until this Extraordinary Measure is rescinded, all persons are prohibited from moving around and being present without the protection of their airways (nose, mouth), which is a respirator or similar device (always without an exhalation valve) meeting at least all the technical conditions and requirements (for a product), including filtration effectiveness of at least 94% in accordance with the relevant standards (e.g., FFP2/KN 95), a medical facemask or similar device meeting, at least, all the technical conditions and requirements (for a product) of the CSN EN 14683+AC standard, which prevents the spread of droplets, specifically:
   a) in all indoor premises of buildings, except for the home or place of accommodation (e.g., a hotel room),
   b) in all other publicly accessible places in the built-up areas of municipalities,
   c) in all other publicly-accessible spaces outside the built-up areas of municipalities, where there are at least 2 persons present in the same place at the same time at a distance of less than 2 meters, unless these are exclusively members of one household.

In exceptional cases, when it is necessary for the pupil or student to see the teacher’s mouth during teaching, it is possible for the teacher to use a protective shield as protective respiratory equipment, under the condition that they maintain a distance of at least 2 meters from the pupils or students.

2. Effective from 1 February 2021 from 12:00 a.m. until this Extraordinary Measure is rescinded, all persons are prohibited from moving around and being present without the protection of their airways (nose, mouth), which is a respirator or similar device (always without an exhalation valve) meeting at least all the technical conditions and requirements (for a product), including filtration effectiveness of at least 94% in accordance with the relevant standards (e.g., FFP2/KN 95), which prevents the spread of droplets, specifically:
   a) in the internal spaces of buildings that serve as a:
      i) retail outlet;
      ii) service provision outlet;
      iii) healthcare facility, at workplaces in which out-patient care is provided;
      iv) social service buildings, such as weekly care centers, homes for persons with medical handicaps, homes for senior citizens and homes with a special regime, and facilities providing
facilitating social services in residential form;

v) international airports;

b) in means of public transport;

c) on the platforms, shelters and waiting rooms of public transport;

d) in motor vehicles, unless only the members of one household are travelling in the motor vehicle; with the exception of children aged 2 to 15, who can wear the protective devices specified in section 1 even in such places.

3. The prohibition pursuant to paragraph 1 or 2 does not apply to:

a) children under two years of age;

b) children in kindergarten and children in a children’s group;

c) pupils, students and teaching staff in accordance with the Education Act and students and academic staff in accordance with Act No. 111/1998 Coll., on Higher Education Institutions and on Amendment and Supplementation of Certain other Acts (the Higher Education Act), as amended, within the framework of educational activities, the nature of which makes wearing of protective equipment impossible (in particular physical education, singing and playing wind instruments);

d) accommodated children, pupils or students while staying in the room (i.e., outside of the common areas) at the boarding school or children’s home;

e) children in educational facilities for the performance of institutional education or protective education and schools established as a part of them and centers of educational care when providing services in the form of boarding;

f) schools established by the Ministry of Justice;

g) pupils and students at a school or class established under Section 16(9) of the Schools Act, pupils at the preparatory level of a special primary school and pupils in the educational field of Practical One-Year School and Practical Two-Year School, and pupils and students who are participating in extra-curricular education at school clubs or in groups designated exclusively for these pupils or students;

h) children at facilities for children requiring immediate assistance;

i) persons with intellectual disorders, disorders on the autistic spectrum and cognitive disorders or severe alterations of their mental state, whose mental capacity or current mental state does not allow them to observe this prohibition;

j) patients, if they are hospitalized in inpatient healthcare facilities or if this is necessary for the provision of healthcare services;

k) healthcare workers for the necessary period of time, if required for the provision of healthcare services;

l) social service users in social service buildings, such as weekly care centers, homes for persons with a medical handicap, homes for senior citizens and homes with a special regime, and in facilities providing facilitating social services in residential form;

m) other cases worthy of consideration that are stipulated by a healthcare or social service provider or attending doctor for movement and staying in healthcare facilities and social service facilities;

n) persons while performing work on the workplace or while performing similar activities, for the period when they perform this activity in one place without the presence of other persons,

o) persons driving public transport vehicles, who are not in direct contact with passengers during their clearance;

p) judges, lay assessors, public prosecutors, accused persons and their defense counsel, parties to civil, administrative and constitutional court proceedings and their representatives, witnesses, experts, interpreters and other persons on which a court decides, in the place and at the time of the court proceedings;

q) persons performing copyrighted works (e.g., theatre, dance or musical performances), lecturers and persons participating in the creation and production of audio-visual works or programmes;
r) hosts, reporters and other persons appearing on radio, television and other programmes;

s) persons performing work classified by a decision of the competent public health protection authority in category three or four due to the risk factor affecting working conditions of heat stress, and also persons performing work which has not yet been categorized and for which it can be anticipated that, after the categorization has been performed, it will be classified in category three or four due to the presence of a risk factor affecting working conditions of heat stress;

t) customers of catering establishments while consuming food and meals, including drinks, subject to the condition that the customer is sitting at a table;

u) persons travelling on public transport for the necessary period for the consumption of food and meals, including drinks;

v) a couple being married over the course of the wedding ceremony and other persons attending the ceremony, and persons declaring that they are entering into registered partnership together and other persons attending this declaration;

w) persons for the essential time needed to take their portrait photograph, or photographs of newlyweds, including a group photograph with household members and other close persons;

x) athletes or persons exercising:
   - during training, exercise, matches, competitions, etc. on outdoor premises;
   - on indoor and outdoor premises, in the case of persons during sports activities and preparation for them conducted within competitions organized by sports associations, if they perform these sports activities as part of their employment, performance of business or other similar activity; this applies, as appropriate, to coaches and referees taking part in such activities;
   - in indoor spaces, if it concerns persons during sports activities and preparations for them as a part of competitions organized by sports associations that are not the performance of employment or business activities for them, if the athlete or athletes in the case of individual sports, or all members of a team as a part of collective sports, undergo, with a negative result, an RT-PCR test for the presence of SARS-CoV-2 or an antigen test for the presence of the SARS-CoV-2 antigen that is not more than 48 hours old; this does not apply in the event it concerns regular and long-term sports activity or preparation for it at least twice a week, when it is necessary to undergo regular examinations for the presence of SARS-CoV-2 or its antigen at an interval of at least once every 5 days; this applies, as appropriate, to coaches and referees participating in such activities;

y) persons on the premises of internal artificial bathing places, such as swimming baths and pools, pools for toddlers and infants and paddling pools, spa and therapeutic pools and saunas.

4. **With effect from 12:00 a.m. of 1 March 2021 until this extraordinary measure is repealed**, all employers are ordered to equip employees with the protective respiratory equipment set forth in points 1 and 2, in a sufficient number for each work shift; this does not apply if the employee does not come into contact with other persons during the period of work performance and in connection with work performance (e.g., remote work performance outside of the employer’s premises).

II.

Effective from 12:00 a.m. of 1 March 2021, the extraordinary measure of the Ministry of Health of 22 February 2021, Ref. No. MZDR 15757/2020-44/MIN/KAN, is cancelled.

III.

This Extraordinary Measure takes effect on the date of its issue.
**Rationale:**

The obligation to wear protective respiratory equipment is set out in the indoor premises of buildings. This duty is set out in all other publicly-accessible spaces in the built-up areas of municipalities and in those spaces outside of the built-up areas of municipalities, where there are at least 2 persons present in the same place at the same time at a distance of less than 2 meters, unless these are exclusively members of one household. There is also a duty to wear protection of the airways meeting the set technical conditions in indoor spaces of buildings that serve as retail outlets, service provision outlets, outpatient care facilities, social service facilities, which are weekly care centers, homes for handicapped persons, homes for senior citizens and homes with a special regime, as well as facilities providing relief social services in residential form and in indoor spaces of buildings that serve as international airports. This duty is also set out in mass transport vehicles and in motor vehicles, unless a motor vehicle only contains persons from one household, on a platform, in a shelter and in a waiting room for public transport. Exceptions are stipulated from these duties.

Community transmission of the COVID-19 epidemic caused by the novel SARS-CoV-2 coronavirus is continuing in the Czech Republic. The current seven-day rolling average of daily increases is at a value of 9,451 newly-infected persons (as of 21 February 2021). The epidemiological situation continues to be grave and additional needed improvements, i.e., reductions in the number of newly-infected, can only be achieved by the continuation of the series of anti-epidemic measures. More detailed information about the degree of the spread of the epidemic and related information is published every day at the Ministry of Health’s website [onemocneni-aktualne.mzcr.cz](http://onemocneni-aktualne.mzcr.cz).

One of the important measures that can be used to limit the epidemic is the duty to wear protection of the airways, which prevents the spread of droplets.

Evidence of the effect of wearing masks to prevent the spread of SARS-CoV-2 is increasingly common and even important expert organizations, including the World Health Organization (WHO), European Centre for Disease Control and Prevention (ECDC) and the United States Centre for Disease Control (CDC), recommend that the public use them to protect the nose and mouth on this basis.

On average, the risk of transmission is reduced more than five times (in a recent systematic overview, 17.4% without a face mask to 3.1% with a face mask, e.g., N95, surgical or 12-16 layer cotton mask). The effectiveness of this measure on an individual level and on the population level has also been proven by several studies on the use of medical or non-medical masks. A correctly-worn mask (i.e., a mask covering the nose and mouth) is effective not only in reducing the spread of the virus via respiratory secretions (i.e., controls the source of contagion), but also protects individuals from the COVID-19 disease. Masks represent a simple barrier that prevents the spread of droplets of respiratory secretions through the air to other people, primarily while speaking, coughing or sneezing. See the studies: Gópfertová D., doc., MUDr., CSc.; Fabiánová K., MUDr., Ph.D.: Epidemiological Characteristics of COVID-19: Thoughts about Current Knowledge of the Disease. Novel SARS-CoV-2 Coronavirus and COVID-19 Disease, [Farmakoterapeutická revue](https://farmakoterapeutickarevue.cz/Resources/Upload/farmakoterapie/casopisy/supplement um01-2020/fr_2020_suppl1_covid-19.pdf).

Droplets larger than 10 pm (large drops) are often generated by coughing or sneezing, but also by shouting, laughing or regular speech, and they are sometimes released at high speed (50 m/s when sneezing, 10 m/s when coughing). Due to their dimensions and high speed, these drops reach a much further distance than small drops. Without a barrier, large droplets can travel a distance of more than 2 meters (coughing) or more than 6 meters (sneezing). Merely maintaining a two-meter distance may not prevent the spread of these large droplets, which may contain the virus. However, home-made masks and surgical masks can prevent the spread of these droplets.

Protection by using a mask may affect the likelihood of transmitting the virus in the community similarly to maintaining a two-meter distance from other persons and restricting the free movement of persons in
public. If these approaches are combined, the restricted gathering of persons and wearing of face masks may double the effect of measures and lead to the flattening of the curve of positive cases of COVID-19 in the population.

Reducing virus transmission in the population by wearing face masks is a non-costly form of intervention which can prevent increased mortality rates in the population and reduce the economic losses related to higher sickness rates.

The protective effect provided by masks was also proven in published case studies within air transport and at establishments providing services at close distances where, despite close contact and longer periods of exposure, neither the 25 passengers nor the 140 exposed customers were infected, because all of the contacts and the infected persons themselves were wearing a face mask.

The transmission of the novel coronavirus has been described in closed air-conditioned public premises, where neither the distance nor direction of spreading the virus corresponded to the direct transmission of droplets, and transmission by air through the A/C system was assumed. Indoor air-conditioned spaces, including public transport, may be considered riskier than insufficiently ventilated non-air-conditioned premises. It has been shown that the direction of the air current, the maintenance or condition of the A/C equipment and the presence or absence of HEPA filters can affect the spread of the novel coronavirus.

V Within the epidemic incidence in certain indoor premises with air conditioning, the reproduction number of SARS-CoV-2 contagion reached up to a value of 11. Yet systematic reviews indicated a reduction of the reproduction number through the use of face masks in an interval of 6 to 80%, including beta-coronaviruses such as the originators of the SARS, MERS and COVID-19 diseases.

The infectious dosage for an originator of COVID-19 is estimated to be more than 100 to 1,000 particles of SARS-CoV-2, i.e., slightly higher than for SARS-CoV-1 (100 particles). 50 to 5,000 droplets are released in one exhalation, they have a low speed, rapidly fall to the floor and contain only a minimum of virus particles. Talking increases the release of droplets and virus particles, which can be around 200 a minute, so a ten-minute face-to-face conversation would be enough for infection. When coughing, around 3,000 droplets are released, when sneezing it is up to 30,000 droplets, which are smaller, travel longer distances and can contain up to 200 million virus particles. The COVID-19 infection spreads primarily through larger droplets with a size greater than 5 to 10 pm. See the studies: Stejskal F., MUDr., RNDr. Ph.D. COVID-19 Nine Months of Experience. Are the approaches to controlling this infection rational? Novel SARS-CoV-2 Coronavirus and COVID-19 Disease, Farmakoterapeutická revue, suppl. 1/2020, Volume 5: https://farmakoterapeutickarevue.cz/Resources/Upload/farmakoterapie/casopisy/supplement um01-2020/fr_2020_suppl1_covid-19.pdf.

The basic physical mechanisms applicable during the transmission of the infection by air were described. See the studies: Balachandar, S., et al. (2020). Host-to-host airborne transmission as a multiphase flow problem for science-based social distance guidelines, Elsevier: https://www.sciencedirect.com/science/article/pii/S0301932220305498). Other studies describe various factors that apply during the transmission of the infection: J.W. Tang, Y. Li, I. Eames, P.K.S. Chán, and G.L. Ridgway. Factors involved in the aerosol transmission of infection and control of ventilation in healthcare premises, J Hosp Infect. 2006 Oct; 64 (2): 100-114: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7114857/

Superspreaders can have an effect on the transmission of COVID-19. They are infected individuals that massively give off the virus and therefore have a large potential to spread the infection, which is due to their higher infectiveness and also their social behavior, because of which they are able to infect an unusually large number of contacts. Superspreaders can also be asymptomatic and there is therefore a risk of infection in a situation where there is no compliance with the non-pharmaceutical measures against the spread of COVID-19 (masks, compliance with distancing, disinfection of the hands, ...).

Masks are a simple barrier that prevents infectious droplets and aerosols from the airways reaching others. Studies show that masks reduce the spraying and dispersion of infectious droplets if they are worn
over the nose and mouth. It is important to wear a mask even if one does not have COVID-19 symptoms. Several studies have ascertained that persons with COVID-19 that are asymptomatic and that are not yet displaying symptoms (pre-symptomatic period) can spread the virus to other persons (most frequently through droplets that arise when talking, sneezing and coughing).

The main function of a mask is to protect those around the mask-wearer if the person with the mask is infectious, but does not have symptoms of the disease. It is especially important to wear a mask if it is not possible or we are not able to comply with a distance of 2 meters from others, because the disease spreads primarily among people who are in close contact with each other.

In the case of patients with COVID-19, according to published works, the course of the disease is asymptomatic in 80%, only 15% have symptoms of the disease and in 5% of cases the disease can be serious. There is clear evidence of the transmission of SARS-CoV-2 from asymptomatic carriers throughout the world.

If a healthy individual comes into contact with a person with COVID-19 who is not wearing a mask, the probability of transmission of the disease is very high.

In the event a mask is used, the probability of transmitting the infection is reduced. With regard to the fact that it is not always possible to maintain a distance of 2 meters even in external environments (mostly in residential areas), a mask reduces the risk of infection, whether from persons with symptoms of the disease or from asymptomatic persons. See the studies:


It is possible to protect oneself from infection by minimizing contacts, complying with distancing, limiting time spent close to other persons, in particular in insufficiently ventilated spaces, but if we have to be close to other people in public, wearing masks can reduce the spread of COVID-19 from asymptomatic and symptomatic people.

Masks serve as personal protection in the event that all members of a community use them. Wearing masks can reduce the number of new cases of the disease and thereby lead to the alleviation of intervention and restrictive measures, such as stay-at-home orders or the closing of companies and shops, the limitation of school attendance, etc. See the studies: John T. Brooks, MD; Jay C. Butler, MD; Robert R. Redfield, MD. Universal Masking to Prevent SARS-CoV-2 Transmission—The Time Is Now. JAMA. 2020;324(7):635-637: https://jamanetwork.com/journals/jama/fullarticle/10.1001/jama.2020.1310

In accordance with the CDC Recommendations, update 12 November 2020: https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-guidance.html. It applies that:
- People aged 2 and older should wear masks in public settings and when around people who don't live in their household.
- Masks offer some protection and are also intended to protect your environment, if you are infected with the virus and don’t know it.
- A mask is not a substitute for social distancing.
- Masks should always be used if it is not possible to comply with distancing (6 feet, 2 m here).
- After touching or removing your mask, wash your hands with soap and water for at least 20 seconds or use a hand disinfectant with at least 60% alcohol.
- Masks are not necessary if you are outside alone or a long way from others or with other people who live in your household.

With regard to this information, it can be assumed that the spread of infectious agents can even occur in outdoor spaces while talking, while children are playing and talking at a playground, while people are waiting in a queue in front of shops (measures regulating the number of persons in shops), if infectious persons do not comply with a distance of 2 meters and do not have a mask. With regard to the methods of transmission of COVID-19, it is clear that the transmission of SARS-CoV-2 is not limited only to indoor spaces and there is a possibility of infection outside. For this reason, it is important to minimize the risk of infection by using masks outside as well.

The spread of the new British mutation of SARS-CoV-2 (B.1.1.7), which spreads 40-70% more easily and faster in the population, is one of the causes of the turnaround in the COVID-19 epidemic towards an increase in the number of new cases of the disease. The use of personal protective equipment, in particular protection of the nose and mouth, that provides the most effective barrier effect is a necessary part of anti-epidemic measures. These also include FFP2 respirators. The main aim of using FFP2 respirators is to slow down and minimize the transmission of the more virulent SARS-CoV-2 mutations in places with a higher risk of contact between a larger number of people, such as public spaces, public transport and workplaces.

Improvised or home-made masks, scarves, etc. have the lowest level of effectiveness and, at a time when the more-virulent British variant is predominant in community transmission, they are insufficient as barrier protection. Cloth single-layer masks are able to capture only 51% of the particles from a simulated cough - see Brooks JT et al. Maximizing Fit for Cloth and Medical Procedure Masks to Improve Performance and Reduce SARS-CoV-2 Transmission and Exposure, 2021. MMWR 2021 ;70(7):254-257. Maximizing Fit for Cloth and Medical Procedure Masks to Improve Performance and Reduce SARS-CoV-2 Transmission and Exposure, 2021 | MMWR (fcdc.gov). In comparison with an FFP2 respirator, they do not provide a sufficient seal. With regard to the insufficient sealing line for these devices, air gets in around the nose and face. In the same ways, contaminated air enters in the case of a person sick with COVID-19. An FFP2 respirator sticks to the face and seals better than masks.

In a significant way, an FFP2 respirator reduces a user’s exposure to large respiration droplets and aerosols. In the case of well-fitting and correctly-worn FFP2 respirators, there is minimum leakage around the edges of the respirator. The total effectiveness of an FFP2 respirator is > 94%, see the Occupational Safety Research Institute Information about Airways Protection.https://urgmed.cz/wp-content/uploads/2020/04/Ochrana-y%CC%81chadel_v6.pdf.

The use of FFP2 will slow down the transmission of aerosols, droplets and the virus. Single-layer cloth masks do not provide sufficient protection; protection increases with the number of layers. There was also laboratory confirmation of more than 95% effectiveness against the exposure of a potential infectious aerosol in the case of the use of two masks, one on top of each other, see Brooks JT et al. Maximizing Fit for Cloth and Medical Procedure Masks to Improve Performance and Reduce SARS-CoV-2 Transmission and Exposure, 2021. MMWR 2021;70(7);254-257. Maximizing Fit for Cloth and Medical Procedure Masks to Improve Performance and Reduce SARS-CoV-2 Transmission and Exposure, 2021 | MMWR (cdc.gov).

A condition for such high effectiveness is that such protection is used by both people that are in contact.

Several studies have confirmed that wearing masks does not prevent oxygen getting through in the case of adults and senior citizens over 65 years of age, see Shaw K et al. Wearing of Cloth or Disposable Surgical Face Masks has no Effect on Vigorous Exercise Performance in Healthy Individuals. Int. J.
Despite all the aforementioned reasons for the duty to wear airway protection in the specified cases, there are reasons worthy of consideration for which an exception from the relevant rule can be set.

The exception under letter a) applies to “children under two years of age” with regard to the fact that such small children are not able to comply with instructions and it is not possible to ensure that they will wear a protective device at a time they should do so, i.e., imposing such a duty on them makes no sense.

The exception under letter b) applies to “children in kindergarten and children in a children’s group”, as they are integrated and unchanging collectives of the same people, in which case the non-use of a protective device within such a collective does not represent a serious risk. At a time more virulent SARS-CoV-2 mutations are spreading, the exception does not apply to teaching staff at the kindergarten and persons caring for children in the children’s group, for the purpose of preventing their spread in such facilities.

The exception under letter c) applies to “pupils, students and teaching staff in accordance with the Education Act and students and academic staff in accordance with Act No. 111/1998 Coll., on Higher Education Institutions and on the amendment and supplementation of certain other acts (the Higher Education Act), as amended, within the framework of educational activities, the nature of which makes wearing protective equipment impossible (in particular physical education, singing and playing wind instruments)”, since such activities could not be performed without an exception from the duty to use a protective device and it is also a necessary part of the studies.

The exception under letter d) applies to “accommodated children, pupils or students while staying in a room (i.e., outside of the common areas) at a boarding school or children's home” as persons accommodated in a room are constant roommates in the case of which the non-use of a protective device in such a very small group, often containing only two people, does not represent a serious risk.

The exception under letter e) applies to “children in educational facilities for the performance of institutional education or protective education and schools established as a part of them and centers of educational care when providing services in the form of boarding”, as they are integrated and unchanging collectives of the same people, in which case the non-use of a protective device within such a collective does not represent a serious risk. At a time more virulent SARS-CoV-2 mutations are spreading, the exception does not apply to employees of the specified facilities for the purpose of preventing their spread in such facilities.

The exception under letter f) applies to “schools established by the Ministry of Justice” as they are integrated and unchanging collectives of the same people, in which case the non-use of a protective device within such a collective does not represent a serious risk.

The exception under letter g) applies to “pupils and students at a school or class established under Section 16(9) of the Schools Act, pupils at the preparatory level of a special primary school and pupils in the educational field of Practical One-Year School and Practical Two-Year School, and pupils and students who are participating in extra-curricular education at school clubs or in groups designated exclusively for these pupils or students”, as they are integrated and unchanging collectives of the same people, in which case the non-use of a protective device within such a collective does not represent a serious risk. At a time more virulent SARS-CoV-2 mutations are spreading, the exception does not apply to teaching staff at a school or class established under Section 16(9) of the Schools Act and to teaching staff who are participating in extra-curricular education at school clubs or in groups designated exclusively for these pupils or students, for the purpose of preventing their spread in such facilities.

The exception under letter h) applies to “children at facilities for children requiring immediate assistance”,

as they are integrated and unchanging collectives of the same people, in which case the non-use of a protective device within such a collective does not represent a serious risk. At a time more virulent SARS-CoV-2 mutations are spreading, the exception does not apply to employees who are participating in extra-curricular education at school clubs or in groups designated exclusively for these pupils or students, for the purpose of preventing their spread in such facilities.

The exception under letter i) applies to “persons with intellectual disorders, disorders on the autistic spectrum and cognitive disorders or severe alterations of their mental state, whose mental capacity or current mental state does not allow them to observe this prohibition”, with regard to the fact that such persons are usually not able to comply with instructions and it is not possible to ensure that they will wear a protective device at a time they should do so, i.e., imposing such duty on them makes no sense.

The exception under letter j) applies to “patients, if they are hospitalized in inpatient healthcare facilities or if this is necessary for the provision of healthcare services” with regard to the fact that they are usually patients lying on a bed and, in addition, a protective device could complicate their treatment or the provision of healthcare services.

The exception under letter k) applies to “healthcare workers for the necessary period of time, if required for the provision of healthcare services” with regard to the fact that some, albeit rare cases of the provision of healthcare services cannot be realized with a protective device, such as speech therapy.

The exception under letter l) applies to “social service users in social service buildings, such as weekly care centers, homes for persons with a medical handicap, homes for senior citizens and homes with a special regime, and in facilities providing facilitating social services in residential form” with regard to the fact that a protective device could represent an unreasonable burden for social service users and could endanger their health.

The exception under letter m) applies to “other cases worthy of consideration that are stipulated by a healthcare or social service provider or attending doctor for movement and staying in healthcare facilities and social service facilities” with regard to the fact that unforeseen situations could occur that could seriously complicate the provision of healthcare or social services.

The exception under letter n) applies to “persons during the performance of work on the workplace or during the performance of other similar activities, for the period when they perform this activity in one space without the presence of other persons”, given that if this condition is observed during stable work at the workplace, there is no serious risk of transmission of the disease.

The exception under letter o) applies to “persons driving public transport vehicles, who are not in direct contact with passengers during their passage” with regard to the fact that, if this condition is complied with, there is no serious risk of transmission of the disease and a protective device could hamper activities by a driver of a public transport vehicle.

The exception under letter p) applies to “judges, lay assessors, public prosecutors, accused persons and their defense counsel, parties to civil, administrative and constitutional court proceedings and their representatives, witnesses, experts, interpreters and other persons on which a court decides, in the place and at the time of the court proceedings” with regard to the fact that the use of protective devices could interfere with the proper course of a court process, because the chance to watch expressions on the faces of persons participating in court proceedings contributes to knowledge important for court proceedings.

The exception under letter q) applies to “persons performing copyrighted works (e.g., theatre, dance or musical performances), lecturers and persons participating in the creation and production of audio-visual works or programmes” with regard to the fact that the presence of a protective device on the face of a performer would fundamentally interfere with the performance.

The exception under letter r) applies to “hosts, reporters and other persons appearing on radio, television and other programmes” with regard to the fact that the presence of a protective device on the performer’s
face would fundamentally interfere with the performance.

The exception under letter s) applies to “persons performing work classified by a decision of the competent public health protection authority in category three or four due to the risk factor affecting working conditions of heat stress, and also persons performing work which has not yet been categorized and for which it can be anticipated that, after the categorization has been performed, it will be classified in category three or four due to the presence of a risk factor affecting working conditions of heat stress” with regard to the fact that the presence of a protective device on the face of such person could endanger his/her health.

The exception under letter t) applies to “customers of catering establishments while consuming food and meals, including drinks, subject to the condition that the customer is sitting at a table” with regard to the fact that it is not otherwise possible to consume food and meals and a customer is in a stable position that represents a lesser risk for his/her environment.

The exception under letter u) applies to “persons travelling on public transport for the necessary period for the consumption of food and meals, including drinks” with regard to the fact that it is not otherwise possible to consume food and meals and, in the case of travelling, it is necessary to enable the consumption of food and meals for the necessary time, as otherwise there could be a risk to the health of some persons.

The exception under letter v) applies to “the couple being married over the course of the wedding ceremony and other persons attending the ceremony, and persons declaring that they are entering into a registered partnership together and other persons attending this declaration” with regard to the fact that it is an exceptional and rare opportunity with a limited number of persons, where the presence of a protective device on the face would interfere with the celebratory character of the event.

The exception under letter w) applies to “persons for the essential time needed to take their portrait photograph, or photographs of newlyweds, including a group photograph with household members and other close persons” with regard to the fact that the presence of a protective device on the face would prevent the achievement of the aim of taking photographs.

The exception under letter x) applies to “athletes or persons exercising during training, exercise, matches, competitions, etc. on outdoor premises on indoor and outdoor premises, in the case of persons during sports activities and preparation for them conducted within competitions organized by sports associations, if they perform these sports activities as part of their employment, performance of business or other similar activity; this applies, as appropriate, to coaches and referees taking part in such activities, and in indoor spaces, if it concerns persons during sports activities and preparations for them as a part of competitions organized by sports associations that are not the performance of employment or business activities for them, if the athlete or athletes in the case of individual sports, or all members of a team as a part of collective sports, undergo, with a negative result, an RT-PCR test for the presence of SARS-CoV-2 or an antigen test for the presence of the SARS-CoV-2 antigen that is not more than 48 hours old; this does not apply in the event it concerns regular and long-term sports activity or preparation for it at least twice a week, when it is necessary to undergo regular examinations for the presence of SARS-CoV-2 or its antigen at an interval of at least once every 5 days; this applies, as appropriate, to coaches and referees participating in such activities” with regard to the fact that the presence of a protective device on the face fundamentally complicates such activities and in indoor premises, where the risk of transmission of infection is markedly greater, this exception only applies to professional athletes who undergo regular testing for the presence of SARS-CoV-2 and amateur athletes under the condition that they also undergo testing for the presence of SARS-CoV-2 or the presence of the SARS-CoV-2 antigen.

The exception under letter y) applies to “persons on the premises of internal artificial bathing places, such as swimming baths and pools, pools for toddlers and infants and paddling pools, spa and therapeutic pools and saunas” with regard to the fact that the presence of a protective device on the face would fundamentally complicate such activities and could entail a threat to the health of persons at a bathing place.
All employers are obliged to equip employees with protective respiratory equipment, namely such equipment which must be used pursuant to this extraordinary measure to protect the respiratory airways, in a sufficient quantity for every work shift. This does not apply if the employee does not come into contact with other persons during the work performance and in relation to the work performance, e.g., during remote work outside of the employer’s workplace.
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