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**Health Advisory**

# Masking Recommendations for Staff and Visitors in Licensed Health Care Facilities When Respiratory Viruses Circulate

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**Summary:**
To prevent the spread of respiratory viruses, such as COVID-19, Influenza (flu), and Respiratory Syncytial Virus (RSV), to vulnerable patients and residents, and to minimize the associated risk of severe illness and death among these persons, **the Health Officers of Alameda County and the City of Berkeley strongly recommend that staff and visitors in patient care areas of licensed health care facilities in Alameda County, including the City of Berkeley, wear high-quality, well-fitting masks, regardless of vaccination status, during winter respiratory virus season (November 1 to March 31) and other times of increased respiratory virus circulation** (relevant terms defined below). Licensed health care facilities are recommended to use the available data resources described below to determine when staff and visitors should mask outside of winter respiratory virus season.

This guidance replaces the expired joint Alameda County and City of Berkeley Health Officer Order requiring staff masking in licensed health care facilities during the 2024-25 winter respiratory virus season. Transitioning from an order to a recommendation is intended to allow health care facilities greater flexibility to tailor their mask policies to their specific settings, conditions and patient populations.

## Background:

Licensed health care facilities serve patients and residents at high risk for severe outcomes from respiratory virus infection, and respiratory infections and outbreaks are common in these facilities. Influenza and influenza-like illness outbreaks were common in skilled nursing facilities even before the COVID-19 pandemic. COVID-19 continues to cause facility outbreaks despite improvement in outcomes compared with the early pandemic years. COVID-19 circulates in both summer and winter and is known to spread from people who are asymptomatic or presymptomatic. Also, health care staff may work while experiencing symptoms of respiratory illness.

Wearing well-fitting, high-quality face masks can help reduce the spread of respiratory viruses and can provide an additional layer of safety for the large number of highly

vulnerable patients and residents of inpatient health care facilities when respiratory viruses are most likely to cause infections. As such, the California Department of Public Health (CDPH) released *Guidance for Face Coverings as Source Control in Healthcare Settings* in 2023, as well as AFL 25-01, which addresses masking when health care providers return to work at licensed facilities after respiratory illness. The goal of the recommendation in this document is to supplement these CDPH policies and provide greater protection to patients and residents through routine staff and visitor masking. Masking also provides an added layer of protection for the wearer.

**Recommendation:**

**Staff and visitors in health care facilities are strongly recommended to wear well-fitting, high-quality masks in patient care areas during the winter respiratory virus season (November 1 to March 31) and other periods of moderate or high respiratory virus activity, such as COVID-19 summer waves.** Facilities are recommended to use one or more of the data resources listed below to determine when respiratory virus activity is moderate or high outside the winter season. We recommend implementing mask policies within one week of reaching a moderate level.

Some facilities with monitoring and response capacity may opt to tailor mask policies to match virus activity throughout the year, even during winter respiratory virus season. This approach is consistent with this recommendation.

**Monitoring Respiratory Virus Activity:**

- The CDPH Respiratory Virus Dashboard shows when the burden of COVID-19, influenza or RSV reaches moderate levels. Select “COVID-19”, “Influenza” or “RSV” and the “Bay Area” region for local conditions. If test positivity, hospitalization OR wastewater data for any virus reaches moderate in the region, masking is strongly recommended. This dashboard is the recommended tool for monitoring virus activity under this guidance.

- Facilities can use their own data on bed availability, employee absenteeism due to illness, and rates of clinical care episodes due to respiratory viruses.
- Wastewater surveillance of respiratory virus activity can be found on the following websites:
  - CDPH Wastewater Dashboard (shows when transmission levels are moderate or high; select “ABAHO” region)
  - Alameda County Wastewater Dashboard (forthcoming)

- CDC Respiratory Virus Activity Levels

**Additional Recommendations:**

- Health care facilities should implement policies that encourage and support seasonal COVID-19 and influenza vaccination for staff, patients and residents. Vaccination provides short term protection against any infection with COVID-19 and influenza and reduces the risk of severe disease in infected people.
- Health care facilities should continue to follow infection control guidelines including masking for source control for patients and residents with respiratory illness, when and where applicable.
- Facilities should continue to follow any masking policies under local outbreak response guidance, state licensing requirements, workplace safety regulations or other applicable regulatory policy.
- Outpatient clinical settings may consider adopting these masking policies depending on their setting and patient population needs.
- For facilities choosing not to follow these recommendations, alternate strategies should consider protecting patient populations at highest risk for severe illness including but not limited to those in chemotherapy units, neonatal intensive care, long-term acute care hospitals and ventilator-equipped skilled nursing facilities.
- Mask policies should accommodate or exempt staff and visitors with medical or behavioral conditions exacerbated by masking, or communication needs affected by masking, and should exempt young children.

**Definitions:**

- **Staff**: Health care facility employees, volunteers, contractors, and any others who provide services at the health care facility, regardless of whether patient and resident care or contact are ordinarily part of the staff member's duties.
- **Visitors:** All persons in the facility who are not staff or others providing services and who are not seeking or receiving health care.
- **Health care facility**: Licensed general acute care hospitals, long-term acute care hospitals, psychiatric hospitals, skilled nursing facilities, dialysis centers, and infusion centers.
- **Patient care areas**: Any rooms or workspaces where patient care is routinely delivered to inpatients or residents, or patients under observation for possible admission, including but not limited to patient and resident rooms, inpatient radiology facilities, surgical suites serving inpatients, and emergency departments, or any other areas where staff may come into direct contact with patients or residents routinely receiving care. Patient care areas do not include those areas specifically serving outpatients, such as outpatient clinics, outpatient laboratories, outpatient radiology facilities, and ambulatory surgical centers, nor do they include areas in which patient care may occasionally happen, for example during emergency resuscitations, but which are not specifically intended for patient care,

such as nursing stations, cafeterias, elevators, hallways, or vestibules. Charting rooms, break rooms, and offices are not considered patient care areas. Emergency vehicles and other medical transport vehicles are not covered by this recommendation. When a facility location is not clearly a patient care area as defined in this paragraph, facility administrators have the discretion to determine the nature of that location.

- **High-quality, well-fitting mask**: Non-vented N95, KN95, and KF94 respirators or surgical masks. A well-fitted non-vented N95, KN95, or KF94 respirator is strongly recommended, to provide maximum protection, even if not fit tested. A scarf, ski mask, balaclava, bandana, neck gaiter, turtleneck, collar, cloth mask, or any mask that has an unfiltered one-way exhaust valve does not qualify as a recommended face mask.