



March 5, 2020

To: First Responder Agencies including Fire, Law, and EMS Ambulance transport agencies

Subject: Universal masking recommended for all first responder agency staff

I want to thank you for the important work your professional staff perform day in and day out on the front lines of this response to the Covid19 health emergency.

Until now in the United States, there has not been a recommendation for asymptomatic people to wear masks outside of specified higher-risk settings.

New findings on the natural history COVID-19 infection and illness, however, have prompted reconsideration of these recommendations. In particular:

- The CDC has now said that up to 25% of current infections at any given time may be asymptomatic.
- CDC has further changed its guidance to consider persons with COVID-19 to have been potentially infectious up to 48 hours prior to the onset of symptoms.
- Some nations that have followed universal masking policies population-wide, have experienced slower rates of growth in infections overall than nations which have not encouraged universal masking.

These findings have resulted in reconsideration masking policies broadly in various settings, including in health care settings, among public agencies and local health departments. I believe masking of first responder staff will further reduce the risk of an exposure that could compromise this critical part of the county emergency response workforce.

As the number of cases increases throughout Contra Costa County, it becomes clear that COVID-19 is indeed widespread in every community in our county. I believe the number of cases in the community is far greater than official case counts, perhaps as much as 5 to 10 times as high, due to the limited testing capacity and lag times of testing results that we have been experiencing in both public and private labs. **Given this extensive community transmission I am recommending all first responder agency staff institute universal masking with at least a surgical mask (not N95) level of protection for all staff working in close contact with the public or co-workers in office setting.**

The expectation is that employees would maintain coverage of nose/mouth area with a mask throughout the course of their shift except during periods where employee is dining; or, while in a stationary location where employee is able to maintain distance greater than 6 feet from other colleagues or the public. When placing and removing mask,



hand hygiene should occur before and after placement. Reasonable efforts should be made to limit touches to outer surface of mask and to utilize the elastic or paper bands to place and remove masks.

Given the limitations of supply of various forms of personal protective equipment (PPE), including surgical masks, many agencies have adopted PPE preservation practices including the following:

1. Issue one mask to each employee at the start of each shift, to be worn all shift
2. Consider reusing masks on subsequent days/shifts if the mask remains clean, dry and not showing visible wear.
3. In situations of extreme surgical mask shortages, cloth masks may be considered as an alternative.

Given the significant impacts on the workforce of staff home quarantining after exposures to covid19 positive individuals or suspect cases, I want to make all first responder agencies aware of alternative exposure management strategies suggested by CalEMSA, to allow employees with workplace or community exposures to continue to work with self-monitoring of symptoms:

"Consistent with CDC recommendations prehospital care personnel that have experienced a low, medium, or high-risk exposure<sup>1</sup> to a COVID-19 positive patient and are asymptomatic should be allowed to work. These personnel should still report temperature and absence of symptoms each day prior to starting work and should wear a facemask (surgical or N95) while at work for 14 days after the exposure. If these personnel develop even mild symptoms consistent with COVID-19, they must cease patient care activities, don a facemask (if not already wearing), and notify their supervisor or occupational health services prior to leaving work."

<https://emsa.ca.gov/wp-content/uploads/sites/71/2020/03/WorkforceMaintenancePolicyandProcedure.pdf>



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