



**ORDER OF THE HEALTH OFFICER No. C19-07y (updated)**

**ORDER OF THE HEALTH OFFICER  
OF THE CITY AND COUNTY OF SAN FRANCISCO  
ENCOURAGING COVID-19 VACCINE COVERAGE  
AND REDUCING DISEASE RISKS  
(Safer Return Together)**

DATE OF ORDER: June 11, 2021, updated July 8, 2021, July 20, 2021, August 2, 2021, August 12, 2021, August 24, 2021, September 10, 2021, October 13, 2021, December 14, 2021, December 29, 2021, January 10, 2022, January 26, 2022, February 14, 2022, March 2, 2022, March 10, 2022, and March 31, 2022

**Please read this Order carefully. Violation of or failure to comply with this Order is a misdemeanor punishable by fine, imprisonment, or both. (California Health and Safety Code § 120295, *et seq.*; California Penal Code §§ 69, 148(a)(1); and San Francisco Administrative Code § 7.17(b).)**

Summary: As of April 1, 2022, this Order replaces the prior update of this health order, Health Officer Order No. C19-07y (issued March 10, 2022), in its entirety.

The Health Officer is updating the Order in light of the recent changes to State guidelines and the lower number of cases and hospitalizations in the community associated with the spread in San Francisco and the Bay Area region of SARS-CoV-2, the virus that causes COVID-19. There remains the ongoing threat that the virus, including other future variants or subvariants, pose particularly to the health of medically vulnerable residents. But, based on current scientific knowledge, San Francisco is well positioned to address future increases in cases due in large part to the high rate of vaccination in the community, greater availability of effective treatments for those who are vulnerable to severe disease, and effective use of mitigation strategies, such as masking in indoor public settings when there are high levels of community transmission. The best pathway for San Francisco to continue to move forward in the face of the virus is for as many people as possible to complete their initial series of vaccination and receive their boosters when eligible. Medical data to date show that individuals who have received a booster shot increase their immunity to a level that confers significantly more protection from all circulating SARS-CoV-2 variants, including the Omicron variant and BA.2 subvariant, compared to completing just the initial vaccine series, and generally prevents severe disease. The United States Centers for Disease Control and Prevention and the California Department of Public Health recommend that everyone who has been vaccinated receive a booster shot as soon as they are eligible because immunity wanes several months after completion of the initial vaccine series. In the future, the Health Officer may need to adjust health precautions depending on the specific characteristics of future variants, and if so, the Health Officer will continue to use the least restrictive health measures to prevent severe disease on a population level basis in the community.



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Even though a high percentage of people are vaccinated in San Francisco and the Bay Area region and a significant percentage are boosted against the virus that causes COVID-19, there remains a risk that people may come into contact with others who have COVID-19 when outside their residence, particularly during periods of high community transmission. Many COVID-19 infections are caused by people who have no symptoms of illness. Also, there are people in San Francisco who have not completed their initial vaccine series or who are not yet boosted or eligible to receive a Booster, including children under five years old, and people who are immuno-compromised and may be particularly vulnerable to infection and disease.

Based on current health conditions and balancing those considerations with acknowledgement that there remains ongoing risk to vulnerable populations and the potential for future surges, this Order transitions face covering guidelines to an individual risk-focused approach. In this Order the Health Officer recommends that individuals wear a Well-Fitted Mask in indoor public settings based on three factors. First, you should consider your own risk tolerance. Second, you should consider the overall level of community transmission, such as when future variants occur (*e.g.*, the higher the rate of community transmission, the more seriously you should consider wearing a mask in indoor public settings). Third, you should consider whether you or someone with whom you work or live is at risk of severe disease.

At the same time, wearing a Well-Fitted Mask is still required under federal and state health rules in certain settings, including: on public transportation and in indoor public transportation facilities (at least through April 18); in emergency shelters and cooling centers; in healthcare settings; in state and local correctional facilities and detention centers; in homeless shelters; and in long term care settings and adult and senior care facilities. A copy of the current CDPH masking order is available online at [www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/guidance-for-face-coverings.aspx](http://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/guidance-for-face-coverings.aspx).

This Order maintains the requirement, layered on top of the recently revised CDPH health orders, for (1) Personnel working in designated High-Risk Settings—meaning general acute care hospitals, skilled nursing facilities, intermediate care facilities, residential care facilities for the elderly, homeless shelters, and jails, all as further defined below—as well as (2) Personnel working in other higher-risk settings—including adult care facilities, adult day programs, dental offices, home health care workers, and pharmacists, and (3) Personnel who routinely visit hospitals as part of their work and are part of the City’s first responder medical care system, such as firefighters, paramedics and emergency medical technicians—to both receive the full initial course of vaccination and, once they are eligible, to receive a Booster. But, based on changed health conditions including the ebbing of the previous Omicron surge, the lower number of cases and hospitalizations in the community, high levels of vaccination, availability of effective treatments, and reduced outbreak risk as determined by federal, state, and local public health officials, Personnel who are not permanently stationed or regularly assigned to High-Risk Settings but who in the course of their duties may enter or work in High-Risk Settings on an intermittent or occasional basis or for short periods of time (such as police



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and lawyers who visit people in the jails) are no longer required to receive a Booster, but are strongly encouraged to do so. And, firefighters, paramedics, and EMTs now have until June 30, 2022 to receive a Booster. Additionally, Personnel at homeless shelters (other than congregate living health facilities) are no longer required to receive a Booster, but are strongly encouraged to do so.

On March 17, 2022, the State of California announced that beginning on April 1, 2022, it will no longer require that people attending Indoor Mega-Events (*i.e.*, events with 1,000 or more attendees) provide proof of vaccination or negative testing to gain entry. Instead, the State will strongly recommend that venues hosting Indoor Mega-Events continue to impose that requirement. This Order aligns with the change in State rules for Indoor Mega-Events.

And this Order maintains other minimum COVID-19 safety requirements on businesses and governmental entities, such as a general requirement to report outbreaks in the workplace.

**UNDER THE AUTHORITY OF CALIFORNIA HEALTH AND SAFETY CODE  
SECTIONS 101040, 101085, AND 120175, THE HEALTH OFFICER OF THE CITY AND  
COUNTY OF SAN FRANCISCO ORDERS:**

1. Definitions.

For purposes of this Order, the following initially capitalized terms have the meanings given below.

- a. *Booster.* A “Booster” means an additional dose of a vaccine authorized to prevent COVID-19 by the FDA, including by way of an emergency use authorization, or by the World Health Organization (WHO), for which a person is Booster-Eligible. Consistent with CDC and CDPH guidance, either the Pfizer-BioNTech (Comirnaty) or Moderna (Spikevax) COVID-19 vaccine is preferred for the Booster.
- b. *Booster-Eligible.* A person is “Booster-Eligible” once they meet criteria to receive a Booster under CDC guidance. For example, as of the date of issuance of this update to the Order, individuals who are 18 or older may receive a booster of the Pfizer-BioNTech (Comirnaty), Moderna (Spikevax), or Johnson & Johnson’s Janssen COVID-19 vaccine at least five months after receiving a second dose of the Pfizer-BioNTech (Comirnaty) or Moderna (Spikevax) COVID-19 vaccine or two months after receiving the single dose Johnson & Johnson’s Janssen COVID-19 vaccine, and adolescents who are 12 to 17 years old may receive a booster of the Pfizer-BioNTech vaccine at least five months after their second dose of that vaccine. Consistent with CDC guidance (available online at [www.cdc.gov/coronavirus/2019-ncov/vaccines/booster-shot.html](http://www.cdc.gov/coronavirus/2019-ncov/vaccines/booster-shot.html)), anyone who received a WHO-authorized vaccine or a combination of vaccines should receive the Pfizer-BioNTech (Comirnaty) vaccine as their booster pursuant to the timing listing in that guidance. Those



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preferences apply to all initial vaccination series, regardless of which vaccine an individual received. The CDC has been frequently updating booster eligibility. More up-to-date information on booster eligibility may be found online at [www.sfdcp.org/boosters](http://www.sfdcp.org/boosters), and individuals, Businesses, and governmental entities are urged to stay informed about changes.

- c. *Business*. A “Business” includes any for-profit, non-profit, or educational entity, whether a corporate entity, organization, partnership or sole proprietorship, and regardless of the nature of the service, the function it performs, or its corporate or entity structure.
- d. *Cal/OSHA*. “Cal/OSHA” means the California Department of Industrial Relations, Division of Occupational Safety and Health, better known as Cal/OSHA.
- e. *CDC*. “CDC” means the United States Centers for Disease Control and Prevention.
- f. *CDPH*. “CDPH” means the California Department of Public Health.
- g. *Close Contact*. “Close Contact” means being within six feet of a Person With COVID-19 for a total of 15 minutes or more in a 24-hour period while the person is contagious. In turn, a “Person With COVID-19” means a person who tests positive for the virus that causes COVID-19 (SARS-CoV-2) or has been clinically diagnosed with COVID-19 by a healthcare provider. A person is no longer considered a Person With COVID-19 once all of the following occur: (a) at least one day (*i.e.*, 24 hours) has passed since their last fever (without use of fever-reducing medications), and (b) there has been improvement of other symptoms, and (c) at least five days have passed since symptoms first appeared. A person who tested positive for COVID-19 but never had symptoms is no longer considered a Person With COVID-19 five days after the date of their first positive test. The person is considered contagious if they *either* (i) had symptoms, from 48 hours before their symptoms began until at least five days after the start of symptoms, *or* (ii) did not have symptoms but learned they were COVID-19 positive from a test, from 48 hours before their COVID-19 test was collected until five days after they were tested.
- h. *County*. The “County” means the City and County of San Francisco.
- i. *COVID-19*. “COVID-19” means coronavirus disease 2019, the disease caused by the SARS-CoV-2 virus and that resulted in a global pandemic.
- j. *DPH*. “DPH” means the San Francisco Department of Public Health.
- k. *DPH Core Guidance*. “DPH Core Guidance” means the webpage and related materials titled *Core Guidance for COVID-19* that DPH regularly updates and includes health and safety recommendations for individuals and Businesses as well as web links to additional resources, available online at [sf.gov/information/core-guidance-covid-19](http://sf.gov/information/core-guidance-covid-19).



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- l. *Face Covering Requirements*. “Face Covering Requirements” means the limited requirements to wear a Well-Fitted Mask (i) under federal or state law including, but not limited to, California Department of Public Health guidance and Cal/OSHA’s regulations; (ii) in indoor common areas of homeless shelters, emergency shelters, and cooling centers, except while sleeping, showering, engaged in personal hygiene that requires removal of face coverings, or actively eating or drinking; (iii) in indoor common areas of jails except while sleeping, showering, engaged in personal hygiene that requires removal of face coverings, or actively eating or drinking; and (iv) under Section 3(b), below and Appendix A, attached to the Order. If a separate state, local, or federal order or directive imposes different face covering requirements, including requirements to wear respirators or surgical masks in certain settings, the more health protective requirement applies.
- m. *FDA*. “FDA” means the United States Food and Drug Administration.
- n. *Fully Vaccinated*. “Fully Vaccinated” has the same meaning as the newer term “Vaccinated with a Complete Initial Series,” defined below. Because other pre-existing Health Officer orders and directives and other DPH or County guidance materials may still use the term Fully Vaccinated that term continues to be defined in this Order.
- o. *Health Officer*. “Health Officer” means the Health Officer of the City and County of San Francisco.
- p. *High-Risk Settings*. “High-Risk Settings” means certain care or living settings involving many people, including many congregate settings, where vulnerable populations reside out of necessity and where the risk of COVID-19 transmission is high, consisting of general acute care hospitals, skilled nursing facilities (including subacute facilities), intermediate care facilities, residential care facilities for the elderly, homeless shelters, and jails (including, but not limited to, the Juvenile Justice Center Juvenile Hall).
- q. *Household*. “Household” means people living in a single Residence or shared living unit. Households do not refer to individuals who live together in an institutional group living situation such as in a dormitory, fraternity, sorority, monastery, convent, or residential care facility.
- r. *Mega-Event*. “Mega-Event” means an event with either more than 1,000 people attending indoors or more than 10,000 people attending outdoors. As provided in the State’s Post-Blueprint Guidance, a Mega-Event may have either assigned or unassigned seating, and may be either general admission or gated, ticketed and permitted events.
- s. *Personnel*. “Personnel” means the following people who provide goods or services associated with a Business in the County: employees; contractors and sub-contractors (such as those who sell goods or perform services onsite or who deliver goods for the



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- Business); independent contractors; vendors who are permitted to sell goods onsite; volunteers; and other individuals who regularly provide services onsite at the request of the Business. “Personnel” includes “gig workers” who perform work via the Business’s app or other online interface, if any.
- t. *Qualifying Medical Reason.* “Qualifying Medical Reason” means a medical condition or disability recognized by the FDA or CDC as a contra-indication to COVID-19 vaccination.
  - u. *Religious Beliefs.* “Religious Beliefs” means a sincerely held religious belief, practice, or observance protected by state or federal law.
  - v. *Residence.* “Residence” means the location a person lives, even if temporarily, and includes single-family homes, apartment units, condominium units, hotels, motels, shared rental units, and similar facilities. Residences also include living structures and outdoor spaces associated with those living structures, such as patios, porches, backyards, and front yards that are only accessible to a single family or Household.
  - w. *Schools.* “Schools” mean public and private schools operating in the County, including independent, parochial, and charter schools.
  - x. *State’s Post-Blueprint Guidance.* The “State’s Post-Blueprint Guidance” means the guidance entitled “Beyond the Blueprint for Industry and Business Sectors” that the California Department of Public Health issued on May 21, 2021 and updated as of March 17, 2022, including as the State may further extend, update or supplement that guidance in the future. (See [www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Beyond-Blueprint-Framework.aspx](http://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Beyond-Blueprint-Framework.aspx).)
  - y. *Test and Tested.* “Tested” means to have a negative test (a “Test”) for the virus that causes COVID-19 within the applicable timeframe as listed in this Order. Both nucleic acid (including polymerase chain reaction (PCR)) and antigen tests are acceptable. The following are acceptable as proof of a negative COVID-19 test result: a printed document (from the test provider or laboratory) or an email, text message, webpage, or application (app) screen displayed on a phone or mobile device from the test provider or laboratory. The information should include person’s name, type of test performed, negative test result, and date the test was administered. If any state or federal agency uses a more restrictive definition of what it means to be Tested for specified purposes (such as Cal/OSHA rules for employers in workplaces), then that more restrictive definition controls for those purposes. Some sections of this Order require antigen tests to be third-party verified (meaning administered or observed by the third-party) to meet requirements for showing proof of a negative Test.
  - z. *Unvaccinated.* “Unvaccinated” refers to a person age two or older who is eligible for COVID-19 vaccination and who is either (i) not at least Vaccinated with a Complete Initial Series or (ii) in an indoor setting where this Order requires proof of being





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Vaccinated with a Complete Initial Series as a condition of entry but has not provided such proof.

- aa. *Up-to-Date on Vaccination.* “Up-to-Date on Vaccination” means when a person both (i) is Vaccinated with a Complete Initial Series and (ii) has received a Booster once the person is Booster-Eligible. A person is Up-to-Date on Vaccination immediately on receipt of a Booster. Until a person is Booster-Eligible, they are considered Up-to-Date on Vaccination two weeks after completing their full initial series of vaccination.
- bb. *Vaccinated with a Complete Initial Series.* “Vaccinated with a Complete Initial Series” means two weeks after completing the entire recommended initial series of vaccination (usually one or two doses) with a vaccine authorized to prevent COVID-19 by the FDA, including by way of an emergency use authorization, or by the World Health Organization (WHO). For example, as of the date of issuance of this Order, an individual has completed an initial vaccination series at least two weeks after receiving a second dose of the Pfizer-BioNTech (Comirnaty) or Moderna (Spikevax) COVID-19 vaccine or two weeks after receiving the single dose Johnson & Johnson’s Janssen COVID-19 vaccine. A list of FDA-authorized vaccines is available at [www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/covid-19-vaccines](http://www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/covid-19-vaccines). A list of WHO-authorized vaccines is available at <https://extranet.who.int/pqweb/vaccines/covid-19-vaccines>. On August 23, 2021, the FDA granted full approval for the Pfizer-BioNTech (Comirnaty) vaccine for people age 16 and older, and on January 31, 2022, the FDA granted full approval for the Moderna (Spikevax) vaccine for people age 18 and older. And, on October 29, 2021, the FDA granted emergency use authorization for the Pfizer-BioNTech vaccine for children age five to 11.

Unless otherwise specified, the following are acceptable as proof of being Vaccinated with a Complete Initial Series or Up-to-Date on Vaccination: (i) the CDC vaccination card, which includes name of person vaccinated, type of vaccine provided, and date last dose administered, or similar documentation issued by another foreign governmental jurisdiction, (ii) a photo of a vaccination card as a separate document, (iii) a photo of the a vaccination card stored on a phone or electronic device, (iv) documentation of vaccination from a healthcare provider, (v) unless prohibited elsewhere in this Order in a specific context, written self-attestation of vaccination signed (including an electronic signature) under penalty of perjury and containing the name of the person vaccinated, type of vaccine taken, and date of last dose administered, or (vi) a personal digital COVID-19 vaccine record issued by the State of California and available by going to <https://myvaccinerecord.cdph.ca.gov> or similar documentation issued by another State, local, or foreign governmental jurisdiction, or by an approved private company (a list of approved companies offering digital vaccine verification is available at [www.sfdph.org/dph/alerts/files/vaccine-verification-sites.asp](http://www.sfdph.org/dph/alerts/files/vaccine-verification-sites.asp)). If any state or federal agency uses a more restrictive definition of what it means to be Vaccinated with a Complete Initial Series or to prove that status for specified purposes (such as



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Cal/OSHA rules for employers in workplaces), then that more restrictive definition controls for those purposes. Also, to the extent Cal/OSHA approves an alternate means of documenting whether an employee has completed the full initial series or is “fully vaccinated,” even if less restrictive than the definition contained here, employers may use the Cal/OSHA standard to document their employees’ vaccination status.

- cc. *Ventilation Guidelines.* “Ventilation Guidelines” means ventilation guidance from recognized authorities such as the CDC, the American Society of Heating, Refrigerating and Air-Conditioning Engineers, or the State of California (available online at [www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Interim-Guidance-for-Ventilation-Filtration-and-Air-Quality-in-Indoor-Environments.aspx](http://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Interim-Guidance-for-Ventilation-Filtration-and-Air-Quality-in-Indoor-Environments.aspx)), including Cal/OSHA.
- dd. *Well-Fitted Mask.* A “Well-Fitted Mask” means a face covering that is well-fitted to an individual and covers the nose and mouth especially while talking, consistent with the Face Covering Requirements. CDC guidance regarding Well-Fitted Masks may be found at [www.cdc.gov/coronavirus/2019-ncov/your-health/effective-masks.html](http://www.cdc.gov/coronavirus/2019-ncov/your-health/effective-masks.html). A well-fitting non-vented N95, KN95, or KF94 respirator is strongly recommended as a Well-Fitted Mask, even if not fit-tested, to provide maximum protection. A well-fitting surgical/procedural mask with a cloth mask worn over it to increase fit is also recommended. Given higher transmissibility of the Omicron variant, cloth masks alone are no longer recommended. A Well-Fitted Mask does not include a scarf, ski mask, balaclava, bandana, turtleneck, collar, or single layer of fabric or any mask that has an unfiltered one-way exhaust valve.

2. Purpose and Intent.

- a. Purpose. The public health threat of serious illness or death from COVID-19 is much lower in the County and the Bay Area than many parts of the State and country due to the high rate of vaccination of the community. But COVID-19 continues to pose a risk especially to individuals who are not eligible to be vaccinated or are not yet Up-to-Date on Vaccination, and certain safety measures continue to be necessary or strongly recommended to protect against COVID-19 cases and deaths. Being Up-to-Date on Vaccination, including receiving a Booster as soon as Booster-Eligible, is the most effective method to prevent transmission and ultimately COVID-19 hospitalizations and deaths. It is important to ensure that as many eligible people as possible are vaccinated against COVID-19. Further, it is critical to ensure there is continued reporting of cases to protect individuals and the larger community. Accordingly, this Order allows Businesses, schools, and other activities to resume fully while at the same time putting in place certain requirements or recommendations designed to (1) extend vaccine coverage to the greatest extent possible; (2) limit transmission risk of COVID-19; (3) contain any COVID-19 outbreaks; and (4) generally align with guidance issued by the CDC and the State relating to COVID-19 except in limited instances where local conditions require more restrictive measures. This Order is based on evidence of continued community transmission of SARS-





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CoV-2 within the County as well as scientific evidence and best practices to prevent transmission of COVID-19. The Health Officer will continue to monitor data regarding the evolving scientific understanding of the risks posed by COVID-19, including the impact of vaccination, and may amend or rescind this Order based on analysis of that data and knowledge. It is possible that the Health Officer will determine in the future that prior health precautions that have been relaxed or removed need to be imposed again, based on changes in local health conditions and the course of the pandemic.

- b. Intent. The primary intent of this Order is to continue to protect the community from COVID-19, including by providing health recommendations as requirements are lifted, and to also increase vaccination rates to reduce transmission of COVID-19 long-term, so that the whole community is safer and the COVID-19 health emergency can come to an end.
  - c. Interpretation. All provisions of this Order must be interpreted to effectuate the purposes and intent of this Order as described above. The note and summary at the beginning of this Order as well as the headings and subheadings of sections contained in this Order are for convenience only and may not be used to interpret this Order. In the event of any inconsistency between the summary, headings, or subheadings and the text of this Order, the text will control. Certain initially capitalized terms used in this Order have the meanings given them in Section 1 above. The interpretation of this Order in relation to the health orders or guidance of the State is described in Section 10 below.
  - d. Application. This Order applies to all individuals, Businesses, and other entities in the County. For clarity, the requirements of this Order apply to all individuals who do not currently reside in the County when they are in the County. Governmental entities must follow the requirements of this Order that apply to Businesses, unless otherwise specifically provided in this Order or directed by the Health Officer.
  - e. DPH Core Guidance. All individuals and Businesses are strongly urged to follow the DPH Core Guidance (available online at [sf.gov/information/core-guidance-covid-19](https://sf.gov/information/core-guidance-covid-19)) containing health and safety recommendations for COVID-19.
  - f. Effect of Failure to Comply. Failure to comply with any of the provisions of this Order constitutes an imminent threat and menace to public health, constitutes a public nuisance, and is punishable by fine, imprisonment, or both, as further provided in Section 12 below.
3. General Requirements for Individuals.
- a. Vaccination. Individuals are strongly urged to be Up-to-Date on Vaccination, meaning, as further provided in Section 1, that they are Vaccinated with a Complete Initial Series and, as soon as they are Booster-Eligible, receive their Booster. In particular, people at risk for severe illness with COVID-19—such as unvaccinated



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older adults and unvaccinated individuals with health risks—and members of their Household, are urged to be Up-to-Date on Vaccination, including receiving a Booster, as soon as they can. Information about who is at increased risk of severe illness and people who need to take extra precautions can be found at

[www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html](http://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html).

For those who are not yet Up-to-Date on Vaccination, making informed choices about the risk of different activities, wearing a Well-Fitted Mask indoors, testing before gathering indoors, or choosing outdoor activities as much as possible are also ways to prevent the risk of COVID-19 transmission. Individuals who are Up-to-Date on Vaccination have the best protection against COVID-19.

- b. Face Coverings. Everyone, and especially those who remain Unvaccinated, is recommended to wear a Well-Fitted Mask in the following situations:
- When an individual wants added protection based on individual risk tolerance, for example, when indoors with people whose vaccination status is unknown. People should respect an individual's decision to wear face coverings even in settings where they are not required, and no Business or other person should take an adverse action against individuals who chose to wear a face covering to protect their health.
  - When there is a higher risk of community spread and infection, such as during surges caused by future variants.
  - When an individual, or someone with whom an individual lives or works, is at a higher risk of a negative health outcome, such as older and immuno-compromised individuals.
- i. Masks Still Required in Certain Settings. Everyone is required to wear a Well-Fitted Mask, regardless of vaccination status, in the following indoor settings: public transportation and public transportation facilities; High-Risk Settings; health care and other long-term care facilities where masking is required by regulatory orders and rules; and anywhere else that federal or state health orders require doing so. Under current federal law, at least through April 18, 2022 per the United States Transportation Security Administration's recent announcement of an extension, and the current CDPH face mask guidance, when riding or waiting to ride on public transit people who are inside the vehicle or other mode of transportation or are indoors at a public transit stop or station, must wear Well-Fitted Masks. This requirement extends to all modes of transportation other than private vehicles, such as airplanes, trains, subways, buses, taxis, ride-shares, maritime transportation, street cars, and cable cars. But any passenger who is outdoors or in open-air areas of the mode of transportation, such as open-air areas of ferries, buses, and cable-cars, is not required by federal law to wear a face covering.



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Appendix A lists exceptions and allowances in such settings when a Well-Fitted Mask is not required. Face covering requirements in Schools and Programs for Children and Youth are covered in Health Officer Directive Nos. 2020-33 and 2020-14, respectively, including as those directives are further updated in the future. And, wearing a Well-Fitted Mask is strongly recommended for those in isolation or quarantine.

- ii. Fit and Filtration Guidance. When wearing a mask, everyone should consistently wear the best mask they can obtain, considering fit and filtration (and without using a one-way exhalation valve that is not filtered). As provided in the definition of a Well-Fitted Mask, a well-fitting non-vented N95, KN95, or KF94 respirator is strongly recommended. A well-fitting surgical/procedural mask with a cloth mask worn over it to increase fit is also recommended. More information about fit and filtration and the best mask options is available online at [www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Get-the-Most-out-of-Masking.aspx](http://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Get-the-Most-out-of-Masking.aspx).
- c. Monitor for Symptoms. Individuals should monitor themselves for symptoms of COVID-19. A list of COVID-19 symptoms is available online at [www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html](http://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html). Anyone with any symptom that is new or not explained by another condition must comply with subsections 3(d) and 3(e) below regarding isolation and quarantine.
- d. Isolation. Anyone who has or likely has COVID-19, meaning that person (i) has a positive COVID-19 test result, (ii) is diagnosed with COVID-19, or (iii) has a COVID-19 symptom that is new or not explained by another condition, must refer to the latest COVID-19 isolation health directive issued by the Health Officer (available online at [www.sfdph.org/directives](http://www.sfdph.org/directives)) and follow the requirements detailed there. There are special requirements for healthcare workers and emergency medical services personnel in healthcare settings.
- e. Quarantine. Anyone who had Close Contact must refer to the latest COVID-19 quarantine health directive issued by the Health Officer (available online at [www.sfdph.org/directives](http://www.sfdph.org/directives)) and follow the requirements detailed there. There are special requirements for healthcare workers and emergency medical services personnel in healthcare settings.
- f. Moving to, Traveling to, or Returning to the County. Everyone is strongly encouraged to comply with (1) any State travel advisories (available online at [www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Travel-Advisory.aspx](http://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Travel-Advisory.aspx)) and (2) CDC travel guidelines (available online at [www.cdc.gov/coronavirus/2019-ncov/travelers/travel-during-covid19.html](http://www.cdc.gov/coronavirus/2019-ncov/travelers/travel-during-covid19.html)).
- g. Minimum Requirements. Based on their risk preferences, individuals may decide for themselves to take greater safety precautions than required or even recommended under this Order. Also, nothing in this section limits any requirements that apply



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under this Order to indoor public settings, indoor Mega-Events, or that Cal/OSHA or other State authority may impose on any indoor setting involving gatherings.

4. General Requirements for Businesses and Governmental Entities.

- a. Vaccination. Businesses and governmental entities are generally encouraged to require Personnel and patrons to be Up-to-Date on Vaccination, meaning they are Vaccinated with a Complete Initial Series and have received a Booster when they are Booster-Eligible.
  - i. Vaccination or Testing Recommendation for Certain Indoor Businesses. The following Businesses are strongly encouraged (though not mandated) to require patrons and staff to provide either proof of being Up-to-Date on Vaccination (including receipt of a Booster once Booster-Eligible) or proof of a negative Test before entry or service:
    - Operators or hosts of establishments or events where food or drink is served indoors—including, but not limited to, dining establishments, bars, clubs, theaters, and entertainment venues.
    - Gyms, recreation facilities, yoga studios, dance studios, and other fitness establishments, where any patrons engage in cardiovascular, aerobic, strength training, or other exercise involving elevated breathing.
    - Operators and hosts of indoor and outdoor Mega-Events, as set forth in Section 7 below.
- b. Masking.
  - i. Mask Requirements and Allowances. Businesses and governmental entities must follow the requirements for masking listed in this Order and Appendix A to this Order and may, but are not required by this Order, to require masks be worn indoors.
  - ii. Providing a Well-Fitted Mask. Businesses and other entities subject to this Order are encouraged to provide a Well-Fitted Mask at no cost to people (patrons and Personnel) who do not have one upon entry inside the facility.
  - iii. Cal/OSHA Requirements. Businesses and other entities should also follow any additional Cal/OSHA regulations relating to COVID-19 health and safety measures in the workplace, including regarding masking, and more information can be found online at [www.dir.ca.gov/dosh/coronavirus/covid19faqs.html](http://www.dir.ca.gov/dosh/coronavirus/covid19faqs.html). Nothing in this Order is intended to reduce any of those requirements or otherwise modify them in a way that is less protective of public health, or to limit an individual's own choices to take more health protective measures.



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- c. Personnel Health Screening. Businesses and governmental entities should develop and implement a process for screening Personnel for COVID-19 symptoms, but this requirement does not mean they must perform on-site screening of Personnel. Businesses and governmental entities should ask Personnel to evaluate their own symptoms before reporting to work. If Personnel have symptoms consistent with COVID-19, they should follow subsections 3(d) and 3(e) above. Businesses and governmental entities may be required to conduct such screenings for Personnel under Cal/OSHA's regulations. Businesses and other entities must adhere to applicable Cal/OSHA regulations relating to COVID-19 health and safety measures in the workplace and should frequently check for updates to those regulations such as by checking online at [www.dir.ca.gov/dosh/coronavirus/covid19faqs.html](http://www.dir.ca.gov/dosh/coronavirus/covid19faqs.html).
- d. Businesses Must Allow Personnel to Stay Home When Sick. Businesses are required to follow Cal/OSHA regulations allowing Personnel to stay home where they have symptoms associated with COVID-19 that are new or not explained by another condition or if they have been diagnosed with COVID-19 (by a test or a clinician) even if they have no symptoms, and to not to have those Personnel return to work until they have satisfied certain conditions, all as further set forth in the Cal/OSHA rules. Also, Businesses must comply with California Senate Bill 114 (Labor Code, sections 248.6 and 248.7), which provides that employers with more than 25 employees must give every employee up to 80 hours of COVID-related sick leave retroactive to January 1, 2022 and through September 30, 2022 (pro-rated for less than full time employees), including that employees may use this paid sick leave to get vaccinated or for post-vaccination illness. Each Business is prohibited from taking any adverse action against any Personnel for staying home in any of the circumstances described in this subsection.
- e. Signage. All Businesses and governmental entities are encouraged to conspicuously post signage reminding individuals of the following COVID-19 prevention best practices to reduce transmission:
- Get vaccinated and boosted;
  - Stay home if sick;
  - Wear a mask indoors if you are unvaccinated; and
  - Clean your hands.
- Businesses and governmental entities are also encouraged to include in signage any custom requirements the business or entity requires of its patrons or Personnel regarding testing, vaccination, and masking. Sample signage is available online at <https://sf.gov/outreach-toolkit-coronavirus-covid-19>.
- f. Ventilation Guidelines. All Businesses and governmental entities with indoor operations are urged to review the Ventilation Guidelines and implement ventilation strategies for indoor operations as feasible. Nothing in this subsection limits any ventilation requirements that apply to particular settings under federal, state, or local law.



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- g. Mandatory Reporting by Businesses and Governmental Entities. Consistent with Cal/OSHA regulations, Businesses and governmental entities must require that all Personnel immediately alert the Business or governmental entity if they test positive for COVID-19 and were present in the workplace either (1) within 48 hours before onset of symptoms or within 10 days after onset of symptoms if they were symptomatic; or (2) within 48 hours before the date on which they were tested or within 10 days after the date on which they were tested if they were asymptomatic. If a Business or governmental entity is concerned about a workplace outbreak among Personnel, it may get additional information [www.sfdcp.org/covid19-positive-workplace](http://www.sfdcp.org/covid19-positive-workplace). Businesses and governmental entities must also comply with all case investigation and contact tracing measures directed by DPH including providing any information requested within the timeframe provided by DPH, instructing Personnel to follow isolation and quarantine protocols specified by CDPH and Cal/OSHA and any additional protocols specified by DPH, and excluding positive cases and unvaccinated close contacts from the workplace during these isolation and quarantine periods.

Schools and Programs for Children and Youth are subject to separate reporting requirements set forth in Health Officer Directive Nos. 2020-33 and 2020-14, respectively, including as those directives are further updated in the future.

- h. Compliance with CDPH Vaccination Status Order's Mask Requirements. Businesses and governmental entities with Personnel in Acute Health Care Settings, Long-Term Care Settings, High-Risk Congregate Settings, and Other Health Care Settings—as those terms are defined in the CDPH Vaccination Status Order, available online at [www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Unvaccinated-Workers-In-High-Risk-Settings.aspx](http://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Unvaccinated-Workers-In-High-Risk-Settings.aspx)—must provide appropriate face coverings as required by the CDPH Vaccination Status Order.
- i. Minimum Requirements; Ability to Adopt More-Restrictive Measures. This Order establishes the minimum requirements related to COVID-19 protections. Nothing in this Order is intended to reduce any other federal, state, or local legal requirements or otherwise modify them in a way that is less protective of public health, or to limit an individual Business' or governmental entity's choices to take more health protective measures. Businesses or governmental entities may impose further restrictions that are more protective of public health than the minimum requirements or recommendations under this Order, including requiring patrons or Personnel to be Vaccinated with a Complete Initial Series or Up-to-Date on Vaccination, requiring them to wear a Well-Fitted Mask, requiring them to have a negative Test, or taking other more restrictive measures that are more protective of public health and meet their operational needs.

5. Schools and Programs for Children and Youth

- a. Schools. Largely because many children are not yet Vaccinated with a Complete





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- Initial Series or eligible for a Booster, schools must follow the health and safety requirements set forth in Health Officer Directive No. 2020-33, including as it may be amended in the future, to ensure the safety of all students and Personnel at the school site. All children who are Booster-Eligible (including under an emergency use authorization) are strongly urged to receive a Booster as soon as possible. Also, adult Personnel in TK-12 schools, including educators, aides, administrators, and other staff, are strongly encouraged to be Up-to-Date on Vaccination.
- b. Programs for Children and Youth. Largely because some children are not eligible to be vaccinated against COVID-19 at this time and many children are not yet Vaccinated with a Complete Initial Series or eligible for a Booster, the following Programs for Children and Youth must operate in compliance with the health and safety requirements set forth in Health Officer Directive No. 2020-14, including as it may be amended in the future: (1) group care facilities for children who are not yet in elementary school—including, for example, licensed childcare centers, daycares, family daycares, and preschools (including cooperative preschools); and (2) with the exception of schools, which are addressed in subsection (a) above, educational or recreational institutions or programs that provide care or supervision for school-aged children and youth—including for example, learning hubs, other programs that support and supplement distance learning in schools, school-aged childcare programs, youth sports programs, summer camps, and afterschool programs.
- c. Mega-Events. Operators or hosts of events held at schools or under Programs for Children and Youth that meet the definition of a Mega-Event are strongly recommended to comply with the State’s Post-Blueprint Guidance concerning Mega Events.
6. Vaccination Requirements for Personnel in High-Risk Settings and Other Health Care Personnel.
- a. High-Risk Settings. Except for some Personnel as provided in subsections (a)(iii), (b), and (c) below, and for Personnel exempt under subsection (d) below, all of the following requirements apply in High-Risk Settings:
- i. Businesses and governmental entities with Personnel in High-Risk Settings must:
1. As of September 30, 2021, ascertain vaccination status of all Personnel in High-Risk Settings who routinely work onsite;
  2. As of September 30, 2021, ensure that before entering or working in any High-Risk Setting, all Personnel who routinely work onsite have received their first dose of a one-dose COVID-19 vaccine regimen or their second dose of a two-dose COVID-19 vaccine regimen authorized to prevent COVID-19 by the FDA, including by way of an emergency use authorization, or by the World Health Organization. Until such Personnel



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are Vaccinated with a Complete Initial Series, they are subject to at least the minimum public health and safety requirements in subsection (a)(iv) below; and

3. As of March 1, 2022, ensure that all such Personnel who routinely work onsite, within 15 days of being Booster-Eligible, receive a Booster. And for the period between when such Personnel are Booster-Eligible but have not yet received one and when they become Up-to-Date on Vaccination (meaning one week after receipt of a Booster), the operator of the High-Risk Setting must ensure that each such person comply with the public health and safety requirements in subsection (a)(iv) below regarding testing even though they have already received their full initial course of vaccination. For clarity, those who are Booster-Eligible on or before February 14, 2022 must have received their Booster by March 1, 2022, and those who are Booster-Eligible after February 14, 2022 must receive it within 15 days after they become eligible.

And consistent with updated CDPH “Health Care Worker Vaccine Requirement” guidance (linked below in Section 6(b)), such Personnel who provide proof of COVID-19 infection after being Vaccinated with a Complete Initial Series (a “Recent Pre-Booster Infection”) may defer Booster administration under this subsection for up to 90 days from the date of their first positive COVID-19 test or clinical diagnosis, which in some situations may extend the deadline for receipt of a Booster beyond March 1, 2022. Such Personnel who are not eligible for a Booster by March 1, 2022 must be in compliance no later than 15 days after the timeframe specified in this paragraph for receiving the Booster. Personnel with a deferral due to a proven COVID-19 infection must be in compliance no later than 15 days after the expiration of their deferral.

- ii. As of September 30, 2021, Personnel who routinely work onsite in High-Risk Settings must have received their first dose of a one-dose COVID-19 vaccine regimen or their second dose of a two-dose COVID-19 vaccine regimen authorized to prevent COVID-19 by the FDA, including by way of an emergency use authorization, or by the World Health Organization. Until such Personnel are Vaccinated with a Complete Initial Series, they are subject to at least the minimum public health and safety requirements in subsection (a)(iv) below. As of March 1, 2022, Personnel who routinely work onsite in High-Risk Settings must, within 15 days of being Booster-Eligible, receive a Booster. For clarity, those who are Booster-Eligible on or before February 14, 2022 must have received their Booster by March 1, 2022, and those who are Booster-Eligible after February 14, 2022 must receive it within 15 days after they become eligible. Personnel who are required by this subsection 6(a)(ii) to receive a Booster may use the Recent Pre-Booster Infection deferral described above in subsection 6(a)(i)(3) and must be in compliance no later than 15 days after the expiration of the deferral described in that subsection.



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For clarity, Personnel who routinely work onsite in High-Risk Settings and subject to this subsection 6(a)(ii) includes firefighters, paramedics, emergency medical technicians (EMTs), and jail staff subject to CDPH's State and Local Correctional Facilities and Detention Centers Health Care Worker Vaccination Requirement (available at:

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Correctional-Facilities-and-Detention-Centers-Health-Care-Worker-Vaccination-Order.aspx>). Notwithstanding the

foregoing, Personnel who routinely work onsite at homeless shelters (other than congregate living health facilities) are strongly recommended (but not required) to be Up-to-Date on Vaccination when they are Booster-Eligible.

For purposes only of this subsection (ii), firefighters, paramedics, and EMTs, have until June 30, 2022 to receive a Booster, or if they are not yet eligible before that date, then within 15 days of being Booster-Eligible. Until such firefighters, paramedics, and EMTs receive a Booster, they must be Vaccinated with a Complete Initial Series, free of any COVID-19 symptom, wear a Well-Fitted Mask, and have a negative Test in the manner required by subsection (iv)(1) below, to continue to work in a High-Risk Setting.

- iii. Businesses and governmental entities with Personnel who are not permanently stationed or regularly assigned to a High-Risk Setting but who in the course of their duties may enter or work in High-Risk Settings on an intermittent or occasional basis or for short periods of time—including police, other law enforcement, and attorneys who enter jail settings or other High-Risk Settings as part of their work—are required to (1) ascertain vaccination status of all such Personnel and (2) ensure that before entering or working in any High-Risk Setting, all such Personnel are Vaccinated with a Complete Initial Series with any vaccine authorized to prevent COVID-19 by the FDA, including by way of an emergency use authorization, or by the World Health Organization, unless exempt under subsection (d) below. Additionally, as of September 29, 2021, all such Personnel must have received their first dose of a one-dose COVID-19 vaccine regimen or their second dose of a two-dose COVID-19 vaccine regimen authorized to prevent COVID-19 by the FDA, including by way of an emergency use authorization, or by the World Health Organization. Until such Personnel are Vaccinated with a Complete Initial Series, they are subject to at least the minimum public health and safety requirements in subsection (a)(iv) below. Personnel who are not permanently stationed or regularly assigned to a High-Risk Setting but who in the course of their duties may enter or work in High-Risk Settings even on an intermittent or occasional basis or for short periods of time are strongly recommended (but not required) to receive a Booster when they are Booster-Eligible. For clarity, Personnel subject to this subsection (a)(iii) who have not received their Booster but are Vaccinated with a Complete Initial series are not subject to the health and safety requirements in subsection (a)(iv) below, but must follow the Face



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Covering Requirements and any other applicable federal, state, or local requirements.

- iv. All Businesses and governmental entities subject to this Section 6 must require any Personnel who routinely work onsite at a High-Risk Setting and are exempt or who are otherwise not Up-to-Date on Vaccination (for clarity, the reference to these Personnel means any person who is Booster-Eligible for but not yet received a Booster) to comply with at least the following public health and safety measures:
  1. get Tested for COVID-19 at least once a week—and at least twice a week for Personnel who are in general acute care hospitals, skilled nursing facilities, intermediate care facilities, and jails—using either a nucleic acid (including polymerase chain reaction (PCR)) or antigen test; and
  2. at all times at the worksite in the High-Risk Setting wear a face covering in compliance with the State Public Health Officer Order of July 26, 2021 (“CDPH Vaccination Status Order”), available at <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Unvaccinated-Workers-In-High-Risk-Settings.aspx>.

Because of the COVID-19 risks to any exempt Personnel who are not Up-to-Date on Vaccination, the High-Risk Setting must provide such Personnel, on request, with a well-fitting non-vented N95 respirator and strongly encourage such Personnel to wear that respirator at all times when working with patients, residents, clients, or incarcerated people.

Regular testing and masking as required under this Section 6 are not as protective of public health as being Up-to-Date on Vaccination in helping prevent transmission of COVID-19; accordingly, those measures are a minimum safety requirement for exempt Personnel in High-Risk Settings. Businesses and governmental entities subject to this Section 6 may require additional safety measures for such Personnel. For example, factors a Business or governmental entity may consider in determining appropriate safety measures for exempt Personnel include, but are not limited to:

- a) Whether the Personnel will place other people at risk of transmission of COVID-19 because they are required to come into contact (including on an emergency basis) with other Personnel or with persons whose vaccination status is unknown, who are not yet eligible for the vaccine, or who are members of a vulnerable population (*e.g.*, the elderly, incarcerated people, and acute care patients);
- b) The type and frequency of testing available to the Personnel and whether the Business or governmental entity has the ability to provide



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testing to Personnel, without relying on public health resources, and track the requisite testing;

- c) Whether the Business or governmental entity can ensure compliance with the mask mandate whenever the Personnel are around other people in the workplace; and
- d) Whether the proposed accommodation imposes an undue burden because it is costly, infringes on other Personnel's job rights or benefits, compromises workplace safety, decreases workplace efficiency, or requires other Personnel to do more than their share of potentially hazardous or burdensome work.

Nothing under the Order limits the ability of a Business or governmental entity under applicable law to determine whether they are unable to offer a reasonable accommodation to unvaccinated Personnel with an approved exemption and to exclude such exempt Personnel from a High-Risk Setting.

- v. All Businesses and governmental entities subject to this Section 6 must, consistent with applicable privacy laws and regulations, maintain records of employee vaccination or exemption status.
- vi. All Businesses and governmental entities subject to this Section 6 must provide these records to the Health Officer or other public health authorities promptly upon request, and in any event no later than the next business day after receiving the request.
- vii. This mandated vaccination schedule allows Businesses, governmental entities, and affected Personnel adequate time to comply with this Order. In the interest of protecting residents of High-Risk Settings, Personnel, and their families, Businesses, governmental entities, and affected Personnel are strongly urged to meet these vaccination requirements as soon as possible.

For clarity, this requirement applies to Personnel in other buildings in a site containing a High-Risk Setting, such as a campus or other similar grouping of related buildings, where such Personnel do any of the following: (i) access the acute care or patient, resident, client, or incarcerated person areas of the High-Risk Setting; or (ii) work in-person with patients, residents, clients, or incarcerated people who visit those areas. All people in San Francisco who work in a clinical setting with a population that is more vulnerable to COVID-19 are strongly urged to be Up-to-Date on Vaccination, including receiving a Booster as soon as Booster-Eligible.

If a person covered by the requirements of this Section 6 to be Up-to-Date on Vaccination recently had COVID-19 when that person would otherwise have been Booster-Eligible based on the period since becoming Vaccinated with a Complete



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Initial Series, then that person should try to obtain the Booster as soon as possible at least 10 days after recovering and ending isolation. But to continue working in the High-Risk Setting that person does not need to receive the Booster until 30 days after recovering from infection and discontinuing isolation, unless a healthcare provider recommends in a note that the Booster be delayed for a longer specified period.

- b. CDPH Requirements For Adult Care Facilities, Direct Care Workers, Other Health Care Workers, and Pharmacists. Businesses and governmental entities with Personnel in certain types of facilities and contexts, including those that provide health care, certain other care services, services in congregate settings, and the Personnel who work in those settings must comply with the following CDPH Orders and All Facilities Letters, including as they are updated in the future, which require Personnel of such Businesses and governmental entities to be Up-to-Date on Vaccination, including receipt of a Booster when Booster-Eligible, unless exempt under those Orders and All Facilities Letters by the deadlines listed in each order or letter:

“Adult Care Facilities and Direct Care Worker Vaccine Requirement”, updated February 22, 2022, available online at [www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Adult-Care-Facilities-and-Direct-Care-Worker-Vaccine-Requirement.aspx](http://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Adult-Care-Facilities-and-Direct-Care-Worker-Vaccine-Requirement.aspx)

“Health Care Worker Vaccine Requirement”, updated February 22, 2022, available online at [www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Health-Care-Worker-Vaccine-Requirement.aspx](http://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Health-Care-Worker-Vaccine-Requirement.aspx)

“Coronavirus Disease 2019 (COVID-19) Testing, Vaccination Verification and Personal Protective Equipment for Health Care Personnel (HCP) at Health Care Facilities” (AFL 21-29.3), updated February 22, 2022, available online at [www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-29.aspx](http://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-29.aspx)

“Coronavirus Disease 2019 (COVID-19) Testing, Vaccination Verification and Personal Protective Equipment for Health Care Personnel (HCP) at the Various Types of Intermediate Care Facilities” (AFL 21-30.3), updated February 22, 2022, available online at [www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-30.aspx](http://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-30.aspx)

“Coronavirus Disease 2019 (COVID-19) Vaccine Requirement for Healthcare Personnel (HCP)” (AFL 21-34.3), updated February 22, 2022, available online at [www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-34.aspx](http://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-34.aspx).

- c. Dental Offices. Personnel who provide healthcare in dental offices are considered to provide care in “Clinics & Doctor Offices (including behavioral health, surgical)” under the following CDPH order and must comply with the requirements in that order: “Health Care Worker Vaccine Requirement”, updated February 22, 2022, available online at [www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-](http://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-)





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[of-the-State-Public-Health-Officer-Health-Care-Worker-Vaccine-Requirement.aspx](#).

- d. Limited Exemptions. Personnel covered by this Section 6 may be exempt from the vaccination requirements under this section only upon providing the requesting Business or governmental entity a declination form stating either of the following: (1) the individual is declining vaccination based on Religious Beliefs or (2) the individual is excused from receiving any COVID-19 vaccine due to Qualifying Medical Reasons. A sample ascertainment and declination form is available online at [www.sfdph.org/dph/covid-19/files/declination.pdf](http://www.sfdph.org/dph/covid-19/files/declination.pdf). As to declinations for Qualifying Medical Reasons, to be eligible for this exemption Personnel must also provide to their employer or the Business a written statement signed by a physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician stating that the individual qualifies for the exemption (but the statement should not describe the underlying medical condition or disability) and indicating the probable duration of the individual's inability to receive the vaccine (or if the duration is unknown or permanent, so indicate). As to declinations based on Religious Beliefs, a Business or governmental entity may seek additional information as allowed or required by applicable law to determine whether Personnel have a qualifying Religious Belief. Personnel who qualify for and are granted by the employing Business or governmental entity an exemption due to Religious Beliefs or Qualifying Medical Reasons, as provided above, must still follow at least the minimum health and safety requirements in subsection (a)(iv), above. Nothing in this Order is intended to limit any Business's or governmental entity's ability under applicable law to determine whether they are able to offer a reasonable accommodation to Personnel with an approved exemption. Because testing and masking is not as effective as being Up-to-Date on Vaccination at preventing the spread of COVID-19, a Business may determine that the minimum requirements in subsection (a)(iv) above are not sufficient to protect the health and safety of people in High-Risk Settings.
- e. Record Keeping Requirements. Businesses or governmental entities subject to this Section 6 must maintain records with following information:
- i. For Personnel who are Vaccinated with a Complete Initial Series, and also for Personnel where being Up-to-Date on Vaccination is required by this Order: (1) full name and date of birth; (2) vaccine manufacturer; and (3) date of vaccine administration (for first dose and, if applicable, all subsequent doses required by this Order). Nothing in this subsection is intended to prevent an employer from requesting additional information or documentation to verify vaccination status, to the extent permissible under the law.
  - ii. For unvaccinated Personnel: signed declination forms with written health care provider's statement where applicable, as described in subsection (d) above.
- f. Compliance with CDPH Orders. In addition to the requirements set forth above:



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- i. Until any more health protective requirements in this section take effect, Businesses and governmental entities with Personnel in High-Risk Settings must comply with the requirements of the CDPH Vaccination Status Order; and
    - ii. Businesses and governmental entities with Personnel in adult care facilities and Other Health Care Settings—as that term is defined in the CDPH Vaccination Status Order—must be in full compliance with the requirements of the CDPH Vaccination Status Order.
    - iii. Businesses and governmental entities with Personnel who provide services or work in facilities covered by the State Public Health Officer Order of August 5, 2021, updated most recently on February 22, 2022 (titled “Health Care Worker Vaccine Requirement”), must comply with the requirements of that order, including as that order may be amended in the future. See [www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Health-Care-Worker-Vaccine-Requirement.aspx](http://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Health-Care-Worker-Vaccine-Requirement.aspx).
  - g. Cooperation with Public Health Authorities. Businesses or governmental entities with Personnel subject to this Section 6 must cooperate with Health Officer or DPH requests for records, documents, or other information regarding the Business or governmental entity’s implementation of these vaccination requirements. This cooperation includes, but is not limited to, identifying all jobs or positions within the organization and describing: (1) whether a given job or position is subject to the vaccination requirements of this Section 6, (2) how the Business or governmental entity determined a job or position is subject to vaccination requirements of this Section 6, and (3) how the Business or governmental entity is ensuring full compliance with the vaccination requirements set forth in this Section 6. Complete responses to these requests must be provided to the Health Officer or DPH promptly upon request, and in any event within three business days after receiving the request.
  - h. Chart. For convenience of reference, a chart summarizing which settings and Personnel are subject to which state and local vaccination requirements is available at <https://www.sfdph.org/dph/alerts/files/C19-07-State-and-Local-Mandates-Chart.pdf>.
7. Mega-Events. All Businesses, governmental entities, and other organizations hosting Mega-Events, including when held at schools or under Programs for Children and Youth as provided in Section 5 above, are strongly urged (but no longer required) to continue to follow the recommendations in the State’s Post-Blueprint Guidance for Mega-Events, available online at [www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Beyond-Blueprint-Framework.aspx](http://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Beyond-Blueprint-Framework.aspx), including requiring patrons and staff to either show proof of being Vaccinated with a Complete Initial Series or having received a negative COVID-19 Test as a condition to entry for indoor Mega-Events.
  8. COVID-19 Health Indicators. The City will, for the time being, continue to make publicly available on its website updated data on COVID-19 case rates, hospitalizations



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and vaccination rates. That information can be found online at <https://sf.gov/resource/2021/covid-19-data-and-reports>. The Health Officer will monitor this data, along with other data and scientific evidence, in determining whether to modify or rescind this Order, as further described in Section 2(a) above.

9. Incorporation of State and Local Emergency Proclamations and Federal and State Health Orders. The Health Officer is issuing this Order in accordance with, and incorporates by reference, the emergency proclamations and other federal, state, and local orders and other pandemic-related orders described below in this Section. But this Order also functions independent of those emergency proclamations and other actions, and if any State, federal, or local emergency declaration, or any State or federal order or other guidance, is repealed, this Order remains in full effect in accordance with its terms (subject to Section 13 below).
  - a. State and Local Emergency Proclamations. This Order is issued in accordance with, and incorporates by reference, the March 4, 2020 Proclamation of a State of Emergency issued by the Governor, the February 25, 2020 Proclamation by the Mayor Declaring the Existence of a Local Emergency, and the March 6, 2020 Declaration of Local Health Emergency Regarding Novel Coronavirus 2019 (COVID-19) issued by the Health Officer, as each of them have been and may be modified, extended, or supplemented.
  - b. State Health Orders. This Order is also issued in light of the various orders, directives, rules, and regulations of the State, including, but not limited to, those of the State's Public Health Officer and Cal/OSHA. The State has expressly acknowledged that local health officers have authority to establish and implement public health measures within their respective jurisdictions that are more restrictive than those implemented by the State Public Health Officer.
  - c. Federal Orders. This Order is further issued in light of federal emergency declarations and orders, including, but not limited to, the January 20, 2021 Executive Order on Protecting the Federal Workforce and Requiring Mask-Wearing, which requires all individuals in Federal buildings and on Federal land to wear masks, maintain physical distance, and adhere to other public health measures, and the February 2, 2021 Order of the CDC, which requires use of masks on public transportation, as each of them may have been and may be modified, extended or supplemented.
10. Obligation to Follow Stricter Requirements of Orders.

Based on local health conditions, this Order includes a limited number of health and safety restrictions that are more stringent or more detailed than those contained under State orders. Where a conflict exists between this Order and any state or federal public health order related to the COVID-19 pandemic, the most restrictive provision (*i.e.*, the more protective of public health) controls. Consistent with California Health and Safety Code section 131080 and the Health Officer Practice Guide for Communicable Disease Control in California, except where the State Health Officer may issue an order expressly



**ORDER OF THE HEALTH OFFICER No. C19-07y (updated)**

directed at this Order and based on a finding that a provision of this Order constitutes a menace to public health, any more restrictive measures in this Order continue to apply and control in this County.

11. Obligation to Follow Health Officer Orders and Directives and Mandatory State Guidance.

In addition to complying with all provisions of this Order, all individuals and entities, including all Businesses and governmental entities, must also follow any applicable orders and directives issued by the Health Officer (available online at [www.sfdph.org/healthorders](http://www.sfdph.org/healthorders) and [www.sfdph.org/directives](http://www.sfdph.org/directives)) and any applicable mandatory guidance issued by the State Health Officer or California Department of Public Health. To the extent that provisions in the orders or directives of the Health Officer and the mandatory guidance of the State conflict, the more restrictive provisions (*i.e.*, the more protective of public health) apply. In the event of a conflict between provisions of any previously-issued Health Officer order or directive and this Order, this Order controls over the conflicting provisions of the other Health Officer order or directive.

12. Enforcement.

Under Government Code sections 26602 and 41601 and Health and Safety Code section 101029, the Health Officer requests that the Sheriff and the Chief of Police in the County ensure compliance with and enforce this Order. The violation of any provision of this Order (including, without limitation, any health directives) constitutes an imminent threat and immediate menace to public health, constitutes a public nuisance, and is punishable by fine, imprisonment, or both. DPH is authorized to respond to such public nuisances by issuing Notice(s) of Violation and ordering premises vacated and closed until the owner, tenant, or manager submits a written plan to eliminate all violations and DPH finds that plan satisfactory. Such Notice(s) of Violation and orders to vacate and close may be issued based on a written report made by any City employees writing the report within the scope of their duty. DPH must give notice of such orders to vacate and close to the Chief of Police or the Chief's designee to be executed and enforced by officers in the same manner as provided by San Francisco Health Code section 597. As a condition of allowing a Business to reopen, DPH may impose additional restrictions and requirements on the Business as DPH deems appropriate to reduce transmission risks, beyond those required by this Order and other applicable health orders and directives.

13. Effective Date.

This Order is effective at 12:01 a.m. on June 15, 2021 and will continue, as updated, to be in effect until the Health Officer rescinds, supersedes, or amends it in writing. The changes made in the March 31, 2022 update are effective at 12:01 a.m. on April 1, 2022.



**ORDER OF THE HEALTH OFFICER No. C19-07y (updated)**

14. Relation to Other Orders of the San Francisco Health Officer.

At 12:01 a.m. on April 1, 2022, this Order revises and entirely replaces the prior update to Health Officer Order No. C19-07y (issued March 10, 2022). Leading up to and in connection with the effective date of this Order, the Health Officer has rescinded a number of other orders and directives relating to COVID-19, including those listed in the Health Officer's Omnibus Rescission of Health Officer Orders and Directives, dated June 11, 2021. On and after the effective date of this Order, the following orders and directives of the Health Officer shall continue in full force and effect: Order Nos. C19-16 (hospital patient data sharing), C19-18 (vaccine data reporting), C19-19 (minor consent to vaccination), and C19-20 (test collection sites); and the directives that this Order references in Sections 3 and 5, as the Health Officer may separately amend or later terminate any of them. Health Officer Order No. C19-15 was also reinstated on August 19, 2021, and remains in effect as outlined in that order (including as it is amended in the future). Also, this Order also does not alter the end date of any other Health Officer order or directive having its own end date or that continues indefinitely.

15. Copies.

The County must promptly provide copies of this Order as follows: (1) by posting on the DPH website ([www.sfdph.org/healthorders](http://www.sfdph.org/healthorders)); (2) by posting at City Hall, located at 1 Dr. Carlton B. Goodlett Pl., San Francisco, CA 94102; and (3) by providing to any member of the public requesting a copy.

16. Severability.

If a court holds any provision of this Order or its application to any person or circumstance to be invalid, then the remainder of the Order, including the application of such part or provision to other persons or circumstances, shall not be affected and shall continue in full force and effect. To this end, the provisions of this Order are severable.

**IT IS SO ORDERED:**

Susan Philip, MD, MPH,  
Health Officer of the  
City and County of San Francisco

Dated: March 31, 2022

Attachment:

- Appendix A – Face Covering Requirements (last updated March 31, 2022)

## **Order No. C19-07y – Appendix A: Face Covering Requirements**

**[March 31, 2022]**

1. **General Recommendation to Wear a Well-Fitted Mask; Requirement in Limited Indoor Settings.**

The intent of this Order and the masking rules in this Appendix is to align with the masking rules and recommendations issued by the State of California and the federal government, with this Appendix providing additional information for specific situations to help Businesses, governmental entities, and individuals comply with those rules and recommendations and make informed choices to improve safety during the pandemic.

Everyone, including even people who are Vaccinated with a Complete Initial Series or are Up-to-Date on Vaccination (meaning they have completed their initial course of vaccination and have received a Booster once eligible for a Booster, as further defined in Section 1 of the body of the Order), is recommended to wear a Well-Fitted Mask in indoor public settings in the following situations:

- When an individual wants added protection based on individual risk tolerance, for example, when indoors with people whose vaccination status is unknown. People should respect an individual's decision to wear face coverings even in settings where they are not required, and no Business or other person should take an adverse action against individuals who chose to wear a face covering to protect their health.
- When there is a higher risk of community spread and infection, such as during surges caused by future variants.
- When an individual, or someone with whom an individual lives or works, is at a higher risk of a negative health outcome, such as older and immuno-compromised individuals.

Additional Face Covering Requirements may be imposed elsewhere in this Order or by state or federal rules or regulations.

Also, everyone is required to wear a Well-Fitted Mask, regardless of vaccination status, in the following indoor settings: public transportation and public transportation facilities; emergency shelters and cooling and heating centers; High-Risk Settings (as defined in Section 1 of the Order); health care and other long-term care and adult and senior care facilities where masking is required by regulatory orders and rules; and anywhere else that federal or state health orders require doing so, as described in Section 3(b)(i) of the Order and this Appendix. For public transportation and public transportation facilities, masks are required indoors under this Order as well as under federal law (with the United States Transportation Security Administration recently announcing its extension of an indoor mask mandate for public transit through at least April 18, 2022) and the CDPH Guidance for the Use of Face Masks.



## **Order No. C19-07y – Appendix A: Face Covering Requirements**

**[March 31, 2022]**

Employees may be subject to additional restrictions or be required to provide additional documentation under state or federal laws and regulations, including Cal/OSHA's regulations. Businesses and other entities must adhere to applicable Cal/OSHA regulations relating to COVID-19 health and safety measures in the workplace and should frequently check for updates to those regulations such as by checking online at [www.dir.ca.gov/dosh/coronavirus/covid19faqs.html](http://www.dir.ca.gov/dosh/coronavirus/covid19faqs.html).

And as provided in Section 6 below, individual Businesses, governmental entities, or venue operators or hosts may impose requirements regarding masking, in addition to those in this Order, that are more protective of public health.

### 2. Ventilation.

Businesses and operators of other public and private facilities where people may remove their Well-Fitted Masks indoors are encouraged to use at least one of the following ventilation strategies: (1) all available windows and doors accessible to fresh outdoor air are kept open as long as air quality and weather conditions permit; (2) fully operational HVAC system; or (3) appropriately sized portable air cleaners in each room. For clarity, if windows and doors are closed due to air quality or weather conditions, then a Business or operator of a public or private facility should whenever feasible follow at least one of remaining ventilation strategies before allowing people to remove their Well-Fitted Masks under this Order.

### 3. Proof of Vaccination.

Businesses, governmental entities, and other venue operators or hosts are encouraged to require people to provide proof that they are Vaccinated with a Complete Initial Series or are Up-to-Date on Vaccination (including receipt of a Booster once Booster-Eligible) before allowing people to remove their Well-Fitted Mask indoors. And as provided in the Order, each Business, governmental entity, and other entity that is required to confirm proof of being Vaccinated with the Complete Initial Series is strongly urged to implement measures as soon as possible to require its patrons and staff (as distinct from Personnel) to be Up-to-Date on Vaccination, including requiring them to show proof of receipt of a Booster once they are eligible.

Despite the easing of masking requirements under this update to the Order, Businesses, governmental entities, and other venue operators or hosts may still require all patrons to wear a Well-Fitted Mask in their facilities. And no person can be prevented from wearing a Well-Fitted Mask as a condition of participation in an activity or entry into a Business.

### 4. Status-Based Exemptions. The following exemptions apply in the limited situations where Well-Fitted Masks are still required under this Order.

## **Order No. C19-07v – Appendix A: Face Covering Requirements**

**[March 31, 2022]**

- a. **Medical or Safety Exemption.** A person does not need to wear a Well-Fitted Mask when they can show: (1) a medical professional has provided a written exemption to the Face Covering Requirement, based on the person’s medical condition, other health concern, or disability; or (2) that they are hearing impaired, or communicating with a person who is hearing impaired, where the ability to see the mouth is essential for communication; or (3) wearing a Well-Fitted Mask while working would create a risk to the person related to their work as determined by local, state, or federal regulators or workplace safety guidelines. In accordance with CDPH and CDC guidelines, if a person is required by this Order to wear a Well-Fitted Mask but is exempt from wearing one under this paragraph, they still must wear an alternative face covering, such as a face shield with a drape on the bottom edge, unless they can show either: (1) a medical professional has provided a written exemption to this alternative face covering requirement, based on the person’s medical condition, other health concern, or disability; or (2) wearing an alternative face covering while working would create a risk to the person related to their work as determined by local, state, or federal regulators or workplace safety guidelines.

A Well-Fitted Mask should also not be used by anyone who has trouble breathing or is unconscious, incapacitated, or otherwise unable to remove the Well-Fitted Mask without assistance.

- b. **Children.** In accordance with CDPH and CDC guidelines, any child younger than two years old must not wear a Well-Fitted Mask because of the risk of suffocation. When required to do so by this Order, Children age two to nine years must wear Well-Fitted Masks to the greatest extent feasible. Children age two to nine years may wear an alternative face covering (as that term is described in Section 4(a), above) if their parent or caregiver determines it will improve the child’s ability to comply with this Order. Children age two to nine and their accompanying parents or caregivers should not be refused any essential service based on a child’s inability to wear a Well-Fitted Mask (for example, if a four-year old child refuses to keep a Well-Fitted Mask on in a grocery store), but the parent or caregiver should when possible take reasonable steps to have the child, when required to do so by this Order, wear a Well-Fitted Mask to protect others and minimize instances when children without Well-Fitted Masks are brought into settings with other people. Parents and caregivers of children age two to nine years must supervise the use of Well-Fitted Masks to ensure safety and avoid misuse. Children must wear face coverings in schools as required under State health rules.
- c. **Personal Protective Equipment.** A person required by this Order to wear a Well-Fitted Mask does not need to do so when wearing personal protective equipment (“PPE”) that is more protective than a Well-Fitted Mask, including when required by (i) any workplace policy or (ii) any local, state, or federal law, regulation, or other mandatory guidance. When a person is not required to wear such PPE and in an indoor public setting, they must wear a Well-Fitted Mask or PPE that is more protective unless otherwise exempted under this Order.

## Order No. C19-07y – Appendix A: Face Covering Requirements

[March 31, 2022]

### 5. Activity- and Location-Based Exemptions.

The activity- and location-based exemptions in this Section apply to everyone in the designated settings where this Order requires everyone, regardless of vaccination status, to wear a Well-Fitted Mask. To the extent allowed under Face Covering Requirements and subject to any additional health restrictions a particular Business, governmental entity, or other venue operator or host may impose for a facility or other setting it owns, operates, or controls, people in settings where this Order requires wearing a Well-Fitted Mask are not required do so in any of the following situations:

- a. Indoor Public Setting While Alone or With a Member of Household. A person does not need to wear a Well-Fitted Mask when they are alone or with a member of their Household in a public building or completely enclosed space such as an office, and people who are not part of their Household are not likely to be in the same space. If someone who is not part of a person's Household enters the enclosed space, both people must wear a Well-Fitted Mask for the duration of the interaction unless otherwise exempt under Sections 4 and 5 of this Appendix.
- b. Active Eating and Drinking. People may remove their Well-Fitted Mask while actively eating or drinking.
- c. Showering, Personal Hygiene, or Sleeping. People may remove their Well-Fitted Mask only while showering or actively engaging in personal hygiene that requires removal of the Well-Fitted Mask. People may remove their Well-Fitted Mask while sleeping in indoor public settings.

### 6. Minimum Requirements; Ability to Adopt More-Restrictive Measures.

This Order establishes the minimum requirements related to indoor masking. Nothing in this Order, including this Appendix A, is intended to reduce any other federal, state, or local legal requirements or otherwise modify them in a way that is less protective of public health, or to limit an individual Business' or governmental entity's choices to take more health protective measures. Businesses or governmental entities may impose further restrictions that are more protective of public health than the minimum requirements under this Order, including, without limitation, requiring patrons or Personnel to be Vaccinated with a Complete Initial Series or Up-to-Date on Vaccination, requiring them to wear a Well-Fitted Mask, or taking other measures that meet their operational needs (such as, by way of example only, mandating that people be Up-to-Date on Vaccination and only allowing a testing alternative if someone has an exemption to vaccination based on Religious Beliefs or a Qualifying Medical Reason.)