NOTICE OF EXPIRATION OF COMMISSIONER OF PUBLIC HEALTH ORDER ON USE OF MASKS

In accordance with the provisions of Special Act 22-1, except as to school settings, Executive Order 13A and the Commissioner of Public Health order dated February 23, 2022, requiring the use of masks in health care settings and facilities and inside homeless shelters expires on April 15, 2022.

The provision of the Commissioner’s order mandating the use of masks inside preK-12 public or non-public (e.g., "private", "independent", "boarding", etc.) school buildings, excluding residential dormitories, only if a local or regional board of education or similar body governing a nonpublic school or schools requires the use of appropriate face-covering masks will remain in effect. The Special Act extends the Executive Order and the Commissioner’s authority under the order for schools until June 30, 2022.

Masking for Source Control in Healthcare Settings

Source control refers to the wearing of a well-fitting mask that completely covers the nose and mouth to help prevent spread of respiratory droplets to others. This can help reduce the spread of viruses such as SARS-CoV-2, the virus that causes COVID-19, by people who are infected but do not know that they are infectious.

Although universal mask use in healthcare settings and facilities will no longer be mandated by a Commissioner’s Order in our State with the expiration of this masking order, universal mask use may still be required in certain healthcare settings, in Connecticut, for example under federal rules for nursing homes. (CMS Nursing Home Visitation Guidance). Regardless of whether mask use continues to be mandated, DPH and the Centers for Disease Control and Prevention (CDC) still recommend universal masking for routine infection prevention and control in healthcare settings. CDC’s recommended routine infection prevention and control practices during the COVID-19 pandemic can be found here.¹

- Mask use for source control is recommended for everyone in a healthcare setting.
- Source control is particularly important for individuals, regardless of their vaccination status, who live or work in counties with substantial to high community transmission.²
- Source control is also particularly important for individuals who:
  - Are not up to date with all recommended COVID-19 vaccine doses; or
  - Have suspected or confirmed respiratory infection (e.g., those with respiratory symptoms); or
  - Had recent exposure to someone who was infectious with COVID-19; or
  - Have moderate or severe immunocompromise.

¹ https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html#anchor_1604360738701
² https://covid.cdc.gov/covid-data-tracker/#county-view?list_select_state=all_states&list_select_county=all_counties&data-type=Risk
While it is generally safest to implement universal use of source control masking for everyone in a healthcare setting, consideration for individuals who are up to date with all recommended COVID-19 vaccine doses (who do not otherwise meet the criteria described above) in healthcare facilities located in counties with low to moderate community transmission² can be found in CDC’s recommendations for routine infection prevention and control practices during the COVID-19 pandemic.¹