Which Mask for Which Task?

COVID-19 Prevention at Work: When to Use Face Coverings, Disposable Masks, and Respirators

This information is current as of June 2021.
Cloth face coverings, disposable masks, and respirators are important tools to prevent the spread of the coronavirus. Used along with social distancing and physical barriers, they can help protect workers and the public.

This publication provides guidance about when workers are required to use cloth face coverings and disposable masks to protect others from the coronavirus, and when they must use respirators to protect themselves.

This information supplements the technical guidance in Washington Coronavirus Hazard Considerations for Employers (except hospitals/clinics) Face Coverings, Masks, and Respirator Choices, updated on May 21, 2021, available at www.Lni.wa.gov/MaskConsiderations.

The information in this document does not apply to workers who care for or treat active COVID-19 patients in hospitals and clinics. Employers of those workers must follow Centers for Disease Control (CDC) guidelines for selecting respirators and other personal protective equipment (PPE). More information on CDC guidelines is available at www.cdc.gov/coronavirus/2019-nCoV/hcp.

**Why wear a face covering, disposable mask, or respirator?**

COVID-19 continues to be a dangerous and deadly virus for workers who are not fully vaccinated. Wearing a face covering, disposable mask, or respirator at work can lessen the risk for spreading the coronavirus. Businesses must post a sign reminding customers who aren’t fully vaccinated to wear a cloth face covering and may choose to inquire with those who aren’t wearing a mask. Social distancing, hand washing and disinfecting surfaces to prevent virus spread remains in effect.

The coronavirus can spread into the air on tiny particles of saliva when an infected person breathes, talks, coughs, or sneezes. Many infected people don’t have noticeable symptoms (are asymptomatic), so they might spread the virus to others without knowing it.

**Cloth face coverings** help keep exhaled particles from escaping into the air, but don’t effectively filter out particles already in the air.

**Disposable masks** are usually more protective than cloth face coverings.

**Respirators** offer a higher level of protection than cloth face coverings and disposable masks because they also prevent wearers from inhaling particles already in the air.

All three provide some protection when a person coughs and sneezes nearby. Some that are approved by the U.S. Food and Drug Administration (FDA) provide more protection against coughs and sneezes.

**What if a worker is fully vaccinated?**

Workers may choose to stop wearing a cloth face covering, disposable mask, or respirator used for COVID-19 prevention after their employer has decided to approve the change, verified they have been fully vaccinated, and made sure:

- Continued mask use isn’t required by their local public health jurisdiction, AND
- They don’t work in any of the following settings:
  - Health care (LTC, hospitals, doctors offices)
  - Public transportation (bus, train, aircraft, etc.)
  - In-person K-12 schools, childcare facilities, day camps
  - Correctional facilities
  - Homeless shelters
Employers should take time to reassess the situation before approving changes to respirator use for fully vaccinated workers. For example, the employer may decide, as a best practice, to require fully vaccinated workers who perform aerosol-generating procedures to continue to wear a respirator; or to use a disposable mask instead of a respirator.

Workers have the right to continue using cloth face coverings, disposable masks, or respirators during a public health emergency when it does not create a hazard regardless of their vaccination status.

Read Mask and Distancing Requirements are Changing: Key COVID-19 Updates for Fully Vaccinated Workers (www.Lni.wa.gov/go/F414-179-000) for further details.

Can workers use a face shield instead of a face covering?

No. A face shield is not a substitute for a cloth face covering. Face shields allow particles exhaled from the wearer to freely move around the edges of the shield and into the open air for others to breathe. Face shields may be worn along with cloth face coverings to protect workers from others who sneeze or cough nearby or to protect from splashes when diluting or applying harmful liquids like bleach or cleaning chemicals.

What if a worker with a medical or disability issue can’t wear a face covering?

For some workers, medical issues or disabilities make face coverings unsafe to wear. To be considered exempt from face-covering requirements, workers must provide their employer with an accommodation statement from their health care provider. The statement must specify that the worker should not wear a face covering because of a health condition or disability. Employers with workers who are unable to wear a face covering must take alternative steps to prevent the spread of the virus.

A face shield that includes a cloth extension attached along the entire edge of the shield is an acceptable alternative for workers seeking accommodation related to cloth face coverings.

Employers should assess any negative impacts that face coverings might have on workers with disabilities and adjust for accommodations per the Americans with Disability Act (ADA) process at www.eeoc.gov/laws/guidance/fact-sheet-disability-discrimination.

In addition, workers may remove their masks to communicate with people who are deaf or hard of hearing so they can read facial cues or lip-read, while keeping at least six feet or a physical barrier between them. If workers remove their mask to accommodate a deaf person, the employer should ensure that alternative protections are in place to prevent the spread of the virus.

Is social distancing less important for a worker required to wear a face covering?

No. Face coverings, disposable masks, and respirators do not replace social distancing. Besides staying at least six feet away from others, workers must still practice frequent hand washing and frequent cleaning and disinfecting of surfaces and tools, and follow other critical safety measures required by the Washington State Department of Labor & Industries (L&I) (www.Lni.wa.gov/CovidSafety) and the Governor’s reopening guidelines to help prevent the spread of the coronavirus at www.governor.wa.gov/issues/covid-19-resources.
Negligible Risk

Someone working alone or driving by themselves is not required to wear a cloth face covering because the risk for transmission is negligible (very low), regardless of their vaccination status.

“Alone” means the worker is isolated from interactions with others and has little or no expectation of in-person interruptions. If someone working alone has to pass another person once or twice a day, they should stay at least six feet away to maintain negligible risk. If that isn’t possible, then a cloth face covering is required during passing.

**Examples of negligible-risk jobs:**

- A sole occupant in an office with a door.
- Small landscaping crews of three or four workers who drive separately and work alone outdoors all day.
- A crane operator isolated in an enclosed cab.
- Delivery drivers with no face-to-face interaction with others when picking up or dropping off packages.
- A lone janitor in a building.
Workers who aren’t fully vaccinated must wear a reusable cloth face covering when risk for transmission is low. Workers who are fully vaccinated may opt to wear one (see also, “What if a worker is fully-vaccinated?” above).

Risk for transmission is low when workers travel with or work around others and stay at least six feet apart, except for briefly passing by others up to several times a day.

Risk is also considered low when one or two workers provide personal services to healthy clients who also wear a cloth face covering.

**Examples of low-risk workplaces and jobs with low-risk activities:**

- A driver and passenger sitting six feet apart in a vehicle and only needing to pass each other briefly when entering and exiting the vehicle several times a day.
- Manufacturing facilities that are set up to keep workers separated while they operate machinery and perform other tasks.
- Custodial staff who work after hours around others and do not clean up after known COVID-19 cases.
- One or two healthy workers in a room providing haircuts or other personal services to clients who also wear a face covering.
- Waiters at restaurants and cafes with curbside pick-up services only.
- Mechanics working on vehicles around others (but six feet away) at repair shops.

Top photo provided by author Doc James, https://commons.wikimedia.org/wiki/File:HomemadeFacemask.jpg
Medium Risk

Workers who aren’t fully vaccinated must wear a non-cloth disposable mask when risk for transmission is medium. Workers who are fully vaccinated may opt to wear one (see also, “What if a worker is fully-vaccinated?” above).

Examples include dust masks used for hobbies, but not approved by the National Institute for Occupational Safety and Health (NIOSH); surgical-style masks not approved by the FDA; and masks such as KN90s or KN95s approved in other countries.

Risk for transmission is generally considered medium when workers stay at least six feet away from others except for several times throughout the day when the six-foot distance is broken for several minutes and prevention measures such as physical barriers aren’t feasible.

When workers are in vehicles, it’s considered a medium risk for up to one hour per trip if:

- There are no more than two people per compact car.
- There are no more than four in larger sedans or work trucks with two rows of seats.
- There are no more than seven in passenger vans depending on capacity.

And:

- Occupants stay at least three feet apart.
- Mechanical and natural ventilation is optimized (e.g., fresh air from vehicle system and/or open windows).

For personal services, workers are considered medium risk when three to six people are working in a room with healthy clients who wear a cloth face covering.

Examples of medium-risk jobs and medium-risk activities:

- Commercial fishing crews.
- Crews of workers being transported to a job site.
- Grocery store produce stockers who work during store hours around customers.
- Manicurists working with clients wearing cloth face coverings.
- Kitchen workers in restaurants.
- Ride-service drivers who only pick up masked passengers.
- Transit operators.

Examples of masks for use during medium-risk work. From left to right, top to bottom: KN95, surgical-style mask, hobby dust mask.
High Risk

Workers who aren't fully vaccinated must wear a respirator when risk for transmission is high. Workers who are fully vaccinated may opt to wear one after their employer has made a decision to approve that change. The employer may decide, after reassessment of risk for some situations, to continue required use of respirators or to require use of a disposable mask instead of a respirator (see also, “What if a worker is fully-vaccinated?” above).

Respirators used for high-risk activities must be approved by the National Institute for Occupational Safety and Health (NIOSH) or by an equivalent approval body from outside the United States. Examples include: elastomeric (rubber-like) half- or full-facepiece respirators with cartridges, tight or loose-fitting powered air-purifying respirators (PAPRs) with particulate cartridges, and filtering facepiece N-, R-, or P-95s to 100s (when supplies allow).

Risk for transmission is considered high when workers travel or work within three feet of others for more than 10 minutes an hour many times a day, and other prevention measures aren't feasible.

Risk is also considered high when workers:

- Clean and sanitize areas recently occupied by someone with known COVID-19 illness.
- Provide services in residences of clients with known COVID-19 illness.
- Perform procedures that aerosolize saliva, mucous, or secretions from eyes; or that cause increased or forced breathing, coughs, sneezes, or yawning.

Examples of high-risk activities:

- Working or traveling with multiple people in a small room, confined space, vehicle, or other small space for more than 10 minutes in an hour.
- Using an ultrasonic scaler or air and water syringe on a client in a dentist office.
- Administering medication with a nebulizer.
- Performing spirometry or coaching a client on deep or forced breathing exercises.
- Providing in-home maintenance or pet euthanasia services for a masked client with known or potential COVID-19 illness.

Examples of high-risk jobs:

- Dentists and dental hygienists.
- Mortuary services.
- Work crews in confined spaces.

Examples of NIOSH-approved respirators for use during high-risk work. From left to right, top to bottom: N95 filtering facepiece, elastomeric half-facepiece with particulate (HEPA) filters, elastomeric full-facepiece with particulate (HEPA) filters, loose fitting PAPR with particulate (HEPA) filters.

Top left photo provided by author Banej, https://commons.wikimedia.org/wiki/File:3M_N95_Particulate_Respirator.JPG
When risk for transmission is extremely high, workers who aren’t fully vaccinated must wear a NIOSH-approved N95, half- or full-facepiece elastomeric respirator with cartridges; PAPR (powered air-purifying respirator) with particulate cartridges; or an FDA-approved surgical mask with eye protection, or other respirators with NIOSH-equivalent approval from outside the United States.

Workers who are fully vaccinated may opt to wear a respirator after their employer has made a decision to approve that change; however, for some situations like transporting patients with COVID-19 or working in enclosed spaces with poor ventilation for prolonged periods of time within 3 feet of non-vaccinated people it is recommended they wear at least a surgical mask (see also, “What if a worker is fully-vaccinated?” above).

Workers must also:

- Wear goggles or face shields to protect their eyes during face-to-face interactions when not using full-facepiece respirator styles.
- Have the client wear a surgical mask or other type of mask (as supplies allow), when feasible, during face-to-face tasks for as long as possible during transport or care.

Transmission risk is extremely high when workers transport people with COVID-19 or work in residential or non-hospital or clinic settings within six feet of someone infected with the coronavirus.

Transmission risk is also extremely high when workers have direct contact with another person’s mouth, nose, or eyes, even if they appear to be healthy or asymptomatic.

**Examples of extremely high-risk jobs:**

- Emergency Medical Technicians (EMTs).
- Occupational or physical therapists providing therapy to quarantined clients.

**Examples of extremely high-risk tasks:**

- Conducting visual eye exams or tonometry.
- Taking mouth or nose swab samples at drive-up testing stations.

Examples of NIOSH-approved respirators for use during high-risk work. From left to right, top to bottom: N95 filtering facepiece, surgical N95 filtering facepiece, elastomeric half-facepiece with particulate (HEPA) filters, elastomeric full-facepiece with particulate (HEPA) filters, and loose-fitting PAPR with particulate (HEPA) filters.
Use and Care

When respirators are required, employers must provide NIOSH-approved respirators (or respirators with equivalent approval from a country outside the United States) and follow Respirator Program requirements to ensure workers receive a medical evaluation, fit test, and training; and practice maintenance, storage, and other necessary provisions as required by the Respirators rule in Chapter 296-842 WAC (www.Lni.wa.gov/safety-health/safety-rules/rules-by-chapter/?chapter=842).

When respirators aren’t required for COVID-19 prevention, but the worker opts to use one, employers must follow voluntary use requirements in the Respirators rule to ensure safe use.

If workers are required to use an N95 or other tight-fitting respirator, they must be clean shaven so the respirator can form a reliably tight face seal. PAPRs with loose-fitting hoods do not require fit testing and may be an alternative for bearded workers.

Protecting workers from retaliation or discrimination

It is against the law for employers to fire, demote, retaliate, or discriminate against workers for exercising their safety and health rights. Those include the right to:

- Raise safety and health concerns with employers.
- Participate in union activities related to safety and health.
- File safety and health complaints.
- Participate in Division of Occupational Safety & Health (DOSH) investigations.
- Voluntarily use face coverings, goggles, and other protective devices or equipment when it’s safe to do so and meets workplace health and safety requirements.
- Seek accommodation due to age or an underlying health condition that puts them at high risk for severe illness (as defined by the CDC).
- Refuse to perform unsafe work when the refusal meets certain requirements.

Workers can file retaliation complaints with DOSH and/or with the federal Occupational Safety and Health Administration (OSHA) within 30 days of the alleged incident.

Learn more: www.Lni.wa.gov/WorkplaceDiscrimination.

Resources

Call a consultant near you at 1-800-547-8367 or email DOSHConsultation@Lni.wa.gov for free, confidential help. www.Lni.wa.gov/DOSHConsultation.

The DOSH coronavirus website (www.Lni.wa.gov/safety-health/safety-topics/topics/coronavirus) includes resources from the CDC and OSHA.

Upon request, foreign language support and formats for persons with disabilities are available. Call 1-800-547-8367. TDD users, call 711. L&I is an equal opportunity employer.