

**ORDER OF THE LONG BEACH HEALTH OFFICER**

Order Requiring

**ANNUAL INFLUENZA IMMUNIZATION OR MASKING AND ADDITION OF UPDATED COVID-19  
IMMUNIZATION OR MASKING REQUIREMENT FOR HEALTHCARE PERSONNEL DURING THE  
2023-2024 RESPIRATORY VIRUS SEASON**

Date Order Issued: October 3, 2023

Revision Date: January 18, 2024

This Order is in effect until rescinded in writing by the Health Officer.

**SUMMARY OF THE ORDER:**

Influenza is a highly communicable respiratory disease. It exists all year, but infection rates and severity of symptoms increase markedly in the fall and winter months. During the 2022-2023 influenza season, the CDC estimated that nationally influenza resulted in between 27-54 million illness, 12-26 million medical visits, 300,000-650,000 hospitalizations, and 19,000-58,000 deaths.

COVID-19 has added a significant burden to the respiratory virus landscape. Throughout the pandemic, Long Beach alone has experienced nearly 168,000 cases and over 1,400 deaths due to COVID-19. From 2020 to 2022, COVID-19 was the third leading cause of death in Long Beach, behind heart disease and cancer. Despite a significant decrease in deaths in 2023, COVID-19 poses a risk of severe health consequences, including severe illness, hospitalization, and death particularly for older adults and persons with weakened immune systems.

Last fall, there was a significant burden of increased hospitalizations due to spikes in cases of influenza, COVID-19, and respiratory syncytial virus (RSV). With COVID-19 still circulating and increasing, we must bring attention to the risk posed by these respiratory viruses. As a result, we are referring to the time period as the respiratory virus season, and not simply the influenza season.

Influenza immunizations, updated COVID-19 immunizations, and masking are important actions that healthcare personnel (HCP) can take to protect other HCP, patients, and others from respiratory viruses. Unvaccinated HCP are not only at higher risk for contracting influenza and COVID-19 but can also transmit these viruses to their coworkers or patients. Patients in healthcare facilities, especially young children, pregnant women, elderly individuals, and persons with chronic health conditions or who are immunocompromised are particularly vulnerable to respiratory virus infections and their complications.

January 18, 2024

Administration of influenza immunizations for HCP is recommended at the beginning of the respiratory virus season. California law requires acute care hospitals in California to annually offer free influenza vaccinations on-site to their employees and require all employees to be vaccinated. Any acute care hospital employee who elects not to be vaccinated must provide the hospital with a written declaration that they decline the vaccination [See, Cal. Health & Safety Code §1288.7(a)]. In addition, occupational safety regulations mandate that many types of health care facilities, including hospitals, skilled nursing facilities, intermediate care facilities and EMS provider agencies make the seasonal influenza vaccine reasonably available to all employees with occupational exposure and ensure that each employee who refuses the vaccine signs a statement declining vaccination [See, 8 Cal. Code Regs. §5199 (c)(6)(D) & (h)(10)].

In the City of Long Beach, a Health Officer Order mandating that HCP be either vaccinated or masked while in contact with patients or when working in patient-care areas has been issued annually since 2013. Since that time, the average rate of HCP immunization in all of Los Angeles County has risen from 58% to 86% in 2020, but still falls short of the 90% target set by “Healthy People 2020.” This past 2022-2023 influenza season, the average rate of hospital-based HCP immunization rates in Long Beach was 66%, compared to 85% in 2018-2019.

There is a need to continue efforts to increase immunization rates to protect both HCP and the patients they serve. We strongly encourage other unlicensed healthcare and direct care entities to voluntarily adopt the same measures for their employees to protect their personnel and patients during the respiratory virus season.

When the CDC’s COVID-19 Hospital Admission Level for new COVID-19 hospital admissions reaches 10 admissions per 100,000 population (7-day total), Los Angeles County will have reached the Medium Level (defined by the CDC as between 10-19.9 new COVID-19 hospital admissions per 100,00 population (7-day total)). To provide increased respiratory infection control and protection, this Order requires both HCP in and visitors to Licensed Healthcare Facilities that provide Inpatient Care (marked by an asterisk in section 3 below), regardless of COVID-19 or influenza vaccination status, to wear a Respiratory Mask when the CDC’s COVID-19 Hospital Admission Level meets or exceeds the Medium Level.

This Health Officer Order is effective within the City of Long Beach.

**UNDER THE AUTHORITY OF CALIFORNIA HEALTH AND SAFETY CODE (HSC) SECTION 120175,  
THE CITY OF LONG BEACH HEALTH OFFICER ORDERS:**

- 1) PURPOSE.** Influenza and COVID-19 pose a risk to persons within Long Beach City. Vaccination against influenza and COVID-19 is still the most important strategy to prevent serious illness and death from these respiratory illnesses. When HCP are vaccinated, there is a reduced risk to those who interact with them.

This Order continues the requirement that every licensed acute care hospital, skilled nursing facility, intermediate care facility, and emergency medical service provider

agency within the City of Long Beach implement a program under which HCP receive an annual influenza immunization for the current respiratory virus season or wear a respiratory mask (i.e., surgical, procedure, or N-95) for the duration of the season while in contact with patients or when working in patient-care areas. Moreover, this Order expands the influenza immunization or respiratory mask requirement to HCP in all licensed healthcare facilities as defined in Section 3 of this Order.

Beyond implementing protective measures against influenza, this Order also aims to limit the spread of COVID-19 and requires HCP in all licensed healthcare facilities be immunized with the updated COVID-19 vaccine (2023-2024 Formula) or wear a respiratory mask while in contact with patients or working in patient-care areas for the duration of the respiratory virus season.

During December 2023, the rate of new COVID-19 Hospital Admissions reached CDC's Medium Level. For the previous 8 months, COVID-19 hospital admissions remained at the CDC's Low Level. This current increase indicates a higher impact of serious illness from COVID-19 on the community. Accordingly, it is important to implement the health protective measures to require masking of HCP and visitors at Licensed Healthcare Facilities that provide Inpatient Care to improve source control<sup>1</sup> within such facilities when the CDC COVID-19 Hospital Admission Level meets or exceeds the Medium Level.

**2) INTENT.** The primary intent of this Order is to lower the risk of influenza and COVID-19 transmission to patients and staff by requiring all licensed healthcare facilities in Long Beach to, as a protective measure, require HCP (as defined in Paragraph 3a) who decline influenza or updated COVID-19 immunization to wear a respiratory mask while in contact with patients or working in patient-care areas for the duration of the respiratory virus season. Additionally, this Order aims to curb exposure to and transmission of respiratory illnesses in Licensed Healthcare Facilities subject to this Order when the CDC COVID-19 Hospital Admissions Level meets or exceeds the Medium Level in Los Angeles County.

**3) LICENSED HEALTHCARE FACILITIES SUBJECT TO THIS ORDER.** This Order applies to the following licensed health care facilities:

- a. General Acute Care Hospitals\*
- b. Skilled Nursing Facilities (including Subacute Facilities)\*
- c. Intermediate Care Facilities\*
- d. Emergency Medical Service (EMS) Provider Agencies

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<sup>1</sup> **Source Control.** "Refers to the use of masks to cover a person's mouth and nose and to help reduce the spread of large respiratory droplets to others when the person talks, sneezes, or coughs. This can help reduce the spread of SARS-CoV-2, the virus that causes COVID-19, by someone who is infected but does not know it." Centers for Disease Control and Prevention (CDC). NIOSH Science Blog: respiratory Protection vs. Source Control – What's the difference? Retrieved from [Respiratory Protection vs. Source Control – What's the difference? | Blogs | CDC](#). Accessed on 1/16/2024.

- e. Congregate Living Health Facilities\*
- f. Chemical Dependency Recovery Hospitals\*
- g. Acute Psychiatric Hospitals\*
- h. Dialysis Centers
- i. Home Health Agencies
- j. Primary Care Clinics
- k. Ambulatory Surgery Centers
- l. Hospice Facilities\*

**4) DEFINITIONS.** For the purposes of this Order, the following terms have the meanings given below:

- a. **Respiratory Virus Season.** Refers to November 1 of one year through April 30 of the following year. If surveillance data in a particular year demonstrate that the respiratory virus season is different than November 1 to April 30, this period may be amended in an updated Order.
- b. **Healthcare Personnel.** Refers to all paid and unpaid employees, contractors, students, volunteers, and EMS HCP who have direct patient contact or work in patient-care areas in licensed healthcare facilities subject to this Order and the prehospital care setting (e.g., any setting in which medical care is provided prior to the patient's arrival at the hospital). This includes, but not limited to, physicians, nurses, aids, physical therapists, emergency medical technicians (EMTs), paramedics, contract workers, students, volunteers, registration/reception staff, housekeeping, and maintenance personnel.
- c. **Respiratory Mask.** Refers to what can be a surgical, procedure, or N95 mask also designated by some manufacturers as isolation, dental, or medical procedure facemask.
- d. **Patient-Care Areas.** Refers to areas in facilities that include, but are not limited to, patient or resident rooms and areas where patients receive diagnostic or treatment services, can be taken for procedures or tests, and are allowed to be present (e.g., elevators, hallways, and nurses' stations). These areas also include any prehospital setting in which EMS personnel are in contact with patients and other areas facility administrators deem could result in exposure to patients and possible disease transmission.
- e. **Licensed Healthcare Facilities that provide Inpatient Care.** Refers to Licensed Healthcare Facilities to which persons are admitted for a 24-hour stay or longer, and includes only General Acute Care Hospitals, Skilled Nursing Facilities (including Subacute Facilities), Intermediate Care Facilities, Congregate Living Health Facilities, Chemical Dependency Recovery Hospitals, Acute Psychiatric Hospitals, and Hospice Facilities (See Licensed Healthcare Facilities noted with an asterisk in Section 3).

**5) REQUIRED MASKING IN INPATIENT HEALTHCARE FACILITIES.** During the period that the new COVID-19 Hospital Admissions in Los Angeles County meets or exceeds the CDC's

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\* Refers to Licensed Inpatient Healthcare Facilities to which persons are admitted for a 24-hour stay or longer which are subject to masking requirements if the new COVID-19 Hospital Admissions in Los Angeles County meets or exceeds the CDC's Medium Level (See section 4e and 5).

Medium Level, all HCP, regardless of COVID-19 and influenza vaccination status, in Licensed Healthcare Facilities that provide Inpatient Care are required to wear a Respiratory Mask while in contact with patients or working in Patient-Care Areas. In addition, all persons visiting a Licensed Healthcare Facility that provides Inpatient Care are required to wear a Respiratory Mask when around patients and while in Patient-Care Areas. Once the County's new COVID-19 Hospital Admission Level has receded into the Low Level for at least 14 consecutive days (defined by the CDC as less than 10 new COVID-19 hospital admissions per 100,000 population (7-day total)), this masking requirement may be modified or rescinded.

- 6) INFLUENZA VACCINATION REQUIREMENT.** All employees of a licensed healthcare facility (as defined in Section 3) who meet the definition of healthcare personnel (as defined in Section 4b) must receive an Influenza immunization prior to or during the respiratory virus season, annually defined as November 1 to April 30, or wear a respiratory mask while in contact with patients or working in patient-care areas.

By November 1, 2023, HCP who decline an influenza immunization must provide their employer, on a form provided by their employer, a written declaration that they have declined the influenza vaccination. HCP who decline or have not yet obtained the influenza vaccine must wear a respiratory mask while in contact with patients or working in patient-care areas for the duration of the respiratory virus season.

- 7) COVID-19 VACCINATION REQUIREMENT.** All employees of a licensed healthcare facility (as defined in Section 3) who meet the definition of healthcare personnel (as defined in Section 4b) must receive an updated COVID-19 vaccine (2023-2024 Formula) prior to or during the respiratory virus season, annually defined as November 1 to April 30, or wear a respiratory mask while in contact with patients or working in patient-care areas.

By November 1, 2023, HCP who decline the updated COVID-19 immunization must provide their employer, on a form provided by their employer, a written declaration that they have declined the updated COVID-19 vaccination. HCP who decline or have not yet obtained the updated COVID-19 vaccine must wear a respiratory mask while in contact with patients or working in patient-care areas for the duration of the respiratory virus season.

Facilities are encouraged to stay abreast of [COVID-19 vaccine-rated guidance issued by the CDC](#), including eligibility requirements for the updated COVID-19 vaccines (2023-2024 Formula). If an HCP has had a recent prior infection or received a COVID-19 vaccine in the last two months, they should discuss their eligibility to receive the updated COVID-19 vaccine with their provider or pharmacist.

- 8) MAINTENANCE OF RECORDS.** Consistent with applicable privacy laws and regulations, the operator of the licensed healthcare facility must maintain records of all HCP vaccination or declination status.

- a. The facility must provide such records to the Long Beach Department of Health and Human Services or their designee promptly upon request, and in any event, no later than three business days after receiving the request.
- b. Operators of the facilities subject to the requirement must maintain records with the following information:
  - i. Full name and date of birth of HCP
  - ii. Vaccine manufacturer
  - iii. Date of vaccine administration
- c. For unvaccinated workers: a declination form signed by the unvaccinated HCP.

**9) REPORTING.** Upon request by the Long Beach Department of Health and Human Services, facilities and EMS provider agencies must report their HCP influenza and COVID-19 immunization rates within the requested timeframe either through the CDC's National Healthcare Safety Network, a tool provided by the EMS agency, or a tool provided by the Long Beach Department of Health and Human Services.

**10) MASKING AND OTHER INFECTION CONTROL POLICIES AND PRACTICES.** Nothing in the Order limits otherwise applicable requirements related to personal protective equipment (PPE), personnel training, and infection control policies and practices.

**11) ACCESS TO VACCINATIONS.** All licensed healthcare facilities covered by the Order are encouraged to provide onsite vaccinations for HCP and all employees, easy access to nearby vaccinations, and education and outreach on vaccinations. Of note, facilities must also comply with vaccination related and other requirements set forth by California law and/or occupational safety regulations that apply to their site.

**12) COPIES.** The City of Long Beach shall promptly provide copies of this Order by:

- a. Posting it on the Long Beach Department Health and Human Services' website: [www.longbeach.gov/fluforproviders](http://www.longbeach.gov/fluforproviders).
- b. Providing it to any member of the public requesting a copy.

**13) SEVERABILITY.** If any subsection, sentence, clause, phrase, or word of this Order or any application of it to any person, structure, gathering, or circumstance is held to be invalid or unconstitutional by a decision of a court of competent jurisdiction, then such decision will not affect the validity of the remaining portion or applications of this Order.

**14) AMENDMENTS TO ORDER.** This Order may be revised or amended in the future to reflect evolving local or overarching public health conditions.

**15) STATUTORY AUTHORITY.** This Order is issued pursuant to the California Health and Safety Code (HSC) section 120175.

January 18, 2024

**16) ISSUE DATE.** This Order is issued on Monday, **January 18, 2024**, and will continue until it is revised, rescinded, superseded, or amended in writing by the City Health Officer.

IT IS SO ORDERED:

A handwritten signature in black ink on a white background. The signature reads "Anissa Davis" in a cursive, flowing script.

Anissa Davis, MD, DrPH,  
Health Officer  
City of Long Beach  
**January 18, 2024**

#### **HEALTH OFFICER ORDER RESOURCES**

For additional information regarding this Health Officer Order, the following documents will be available on the Long Beach Department of Health and Human Services website at: [www.longbeach.gov/fluforproviders](http://www.longbeach.gov/fluforproviders).

- Fact Sheet: Influenza Vaccination for Healthcare Personnel
- Fact Sheet: COVID-19 Vaccination for Healthcare Personnel
- Health Officer Order FAQ
- Rationale for Mandated Influenza Vaccination for Healthcare Personnel

If you have any questions, contact the Long Beach Health and Human Services, Communicable Disease Surveillance and Control Division at 562.570.4302 or [lbepi@longbeach.gov](mailto:lbepi@longbeach.gov), Monday through Friday from 8:00am to 5:00pm.