



**California  
Nurses  
Association**



**National  
Nurses  
United**

*A Voice for Nurses. A Vision for Health Care.*

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March 11, 2020

Dr. Sonia Y. Angell, State Public Health Officer and Director  
California Department of Public Health  
PO Box 997377, MS 0500  
Sacramento, CA 95899-7377  
VIA ELECTRONIC MAIL TO: [cdph.internetadmin@cdph.ca.gov](mailto:cdph.internetadmin@cdph.ca.gov)

**RE: Centers for Disease Control Interim Infection Prevention and Control  
Recommendations for Patients with Suspected or Confirmed Coronavirus Disease 2019  
(COVID-19) in Healthcare Settings, Revised March 10, 2020**

Dear Dr. Angell;

The California Nurses Association/National Nurses United (CNA/NNU), representing more than 100,000 registered nurses (RNs) who provide direct care services to patients in California health facilities, appreciates the opportunity to share with you our concerns regarding recent troubling changes to the Centers for Disease Control's (CDC) Interim Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed Coronavirus Disease 2019 (COVID-19) in Healthcare Settings.

As you may know, yesterday the CDC further weakened its guidance on measures to contain COVID-19 by rolling back Personal Protective Equipment (PPE) recommendations from N-95 respirators to instead allow the use of simple surgical masks. CDC made this change despite a stark lack of information and coordination. These changes will gravely endanger nurses, healthcare workers, patients, and our communities.

CNA/NNU is especially concerned because much is still unknown about COVID-19 and the virus that causes it, SARS-CoV-2. In emerging infectious disease events like COVID-19, it is imperative that public health agencies and healthcare employers follow the precautionary principle—we cannot wait until harm occurs before action is taken to protect people's health. We have grave concerns that surgical masks will not protect our nurses from exposure to COVID-19. They cannot be relied upon for novel pathogens such as COVID-19 because they do not seal to the person's face and are not tested to the filtration efficiencies of respirators.

Reports of thousands of healthcare workers infected in China and overwhelmed hospitals demonstrate the need to maintain the highest levels of protection to prevent the spread of COVID-19. In fact, lessons from China's experience with the spread of COVID-19 underscore the importance of having the highest PPE protection in our hospitals: *41% of cases in Wuhan*

were acquired in the hospital (including 40 healthcare workers and 17 patients).<sup>1</sup> And, in mid-February, Chinese officials reported 1,716 cases of COVID-19-infected healthcare workers,, six of them fatal.<sup>2</sup>

California's Aerosol Transmissible Diseases (ATD) Standard offers a higher standard of infectious disease protection for healthcare workers. Under the ATD standard, COVID-19 is considered a disease/pathogen requiring airborne infection isolation under CCR Title 8, Sec. 5199, Appendix A because it is a "novel or unknown pathogen." Nurses and other healthcare workers are protected by the ATD standard, and it is critical that California hold the line on public health by vigorously enforcing these rules. Attached to this letter is a compilation of various studies we have drafted entitled "Airborne Precautions Must be Maintained for COVID-19 to Protect Nurses and Other Healthcare Workers and to Prevent Spread in our Communities." This document discusses the science and what we know so far about the transmissibility of COVID-19.<sup>3</sup>

As we approach the prospect of patient surge, resistance from the healthcare industry to implement protective standards will continue to grow. CDPH must assess the accuracy of healthcare facility claims. In order to ensure that all available resources are used effectively, it is necessary to identify the difference between an unwillingness to allocate the resources needed to fulfill obligations to frontline caregivers and patients as opposed to an inability to access the resources and implement surge protocols.

Furthermore, our analysis indicates the most strategic method for preserving PPE supplies is to reduce the need for its use via engineering and other controls. For example, healthcare facilities should be limiting visitors and reducing entrances and monitoring them.

In sum, CNA/NNU strongly opposes the latest CDC revisions or any approach that fails to provide optimal protection and infection control standards. Now is the time to use every possible tool available to guarantee the highest level of protection, guided by the precautionary principle, to prevent further spread of infection, protect healthcare workers, and preserve our capacity to respond to a widespread outbreak. It is not the time to weaken standards and protections, as the CDC has done.

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<sup>1</sup> Wang, Dawei, Bo Hu, and Chang Hu, (Feb 7, 2020), "Clinical Characteristics of 138 Hospitalized Patients With 2019 Novel Coronavirus-Infected Pneumonia in Wuhan, China." JAMA, published online, [https://jamanetwork.com/journals/jama/fullarticle/2761044?guestAccessKey=f61bd430-07d8-4b86-a749-bec05bfff65&utm\\_source=For\\_The\\_Media&utm\\_medium=referral&utm\\_campaign=ftm\\_links&utm\\_content=tfl&utm\\_term=020720](https://jamanetwork.com/journals/jama/fullarticle/2761044?guestAccessKey=f61bd430-07d8-4b86-a749-bec05bfff65&utm_source=For_The_Media&utm_medium=referral&utm_campaign=ftm_links&utm_content=tfl&utm_term=020720).

<sup>2</sup> "COVID-19 sickens over 1,700 health workers in China, killing 6," CIDRAP News, February 14, 2020, <http://www.cidrap.umn.edu/news-perspective/2020/02/covid-19-sickens-over-1700-health-workers-china-killing-6>.

<sup>3</sup> Please note we have copies of all items referenced in the attached document, and please let us know if you would like a copy of any of them.

If you have any questions, please contact Saskia Kim 916-491-3204. Thank you for your consideration of our concerns.

Sincerely,

A handwritten signature in black ink, reading "Stephanie Roberson". The signature is fluid and cursive, with the first name "Stephanie" written in a larger, more prominent script than the last name "Roberson".

Stephanie Roberson, Director  
Government Relations  
California Nurses Association/National Nurses United

cc: Governor Gavin Newsom  
Mark Ghaly, Secretary, Health and Human Services Agency  
Hon. Dr. Richard Pan, Chair Senate Health Committee  
Hon. Jim Wood, Chair Assembly Health Committee