

Guidance for Non-Healthcare Businesses and Organizations during COVID-19

Summary of April 20, 2022 Changes

- Updated links to current versions of governor’s proclamations.
- References added for vaccination [requirements and verification](#), including information on [WA Verify](#).
- Updated mask guidance, including links.
- Information on use of WA Notify included.
- Updated information on responding to cases or suspected cases of COVID-19 with links to information regarding [what to do if someone has symptoms of COVID-19](#) and [what to do if someone is identified as a close contact](#).
- Updated information on reporting outbreaks and tests and working with public health.
- Added link to [Behavioral Health Resources and Recommendations](#).

Introduction

This guidance contains public health recommendations for businesses, organizations, and other non-health care workplaces to help prevent the spread of COVID-19 in their establishments and communities. This document covers COVID-19 prevention responsibilities, orders and directives that remain in place, and how to respond and work with public health in the event of a COVID-19 case or outbreak at their establishment. Good public health practices can protect employees, volunteers, and members of the public that visit these establishments.

These are recommendations only. Any required activities will be noted as such.

Included Workplaces

This guidance covers all businesses, organizations, and other non-healthcare workplaces operating in Washington (WA) State, with the exception of K-12 schools, child care, early learning, youth development, and day camps (see [K-12 schools, child care, early learning, youth development, and day camps](#)). There are additional WA State guidance documents that may have **requirements** or other special considerations for certain sectors, including but not limited to:

- [Overnight camps](#)
- [Commercial fishing industry](#)
- [Homeless shelters](#)

For guidance on healthcare settings, see [COVID-19 Infection Prevention in Healthcare Settings](#).

Employer Prevention Responsibilities

Comply with Guidance and Regulations

All businesses are obligated to keep a safe and healthy workplace facility in accordance with local, state, and federal safety and health rules. Businesses are **required** to follow Governor Inslee’s “Washington Ready” proclamation 20-25 et seq. (“*and what follows;*” currently [20-25.19](#)). Businesses are also **required** to be in compliance with Washington State Department of Labor & Industries (L&I) COVID-19 guidance, requirements, and policies, including but not limited to:

- [L&I Requirements and Guidance for Preventing COVID-19](#)
- [L&I emergency rules and directives](#)

Employers should also maintain awareness of and follow any [local health jurisdiction](#) (LHJ) COVID-19 guidance, which may vary from Washington State Department of Health (WA DOH) guidance.

More resources can be found here:

- [Workplaces and Businesses | COVID-19 | CDC](#)
- [Washington State Department of Health \(DOH\) COVID-19 Resources and Recommendations](#)
- [Washington State Coronavirus \(COVID-19\) Response website](#)

Vaccination

Vaccination is an important tool to prevent COVID-19 infection and severe disease. Employers should support vaccination of their workers and facilitate their workers being up to date on COVID-19 vaccinations. See [Workplace Vaccination Program | CDC](#) for additional information on how to support worker vaccination.

Some of the guidance in this document varies by an individual’s vaccination status. A person is up to date on COVID-19 vaccinations when they have received all recommended doses based on their age and health status. The CDC’s vaccination page has the latest information on [staying up to date with COVID-19 vaccines](#). People who were vaccinated outside the United States are considered up to date with their COVID-19 vaccines when they have completed the recommended actions in Appendix A of [Clinical Guidance for COVID-19 Vaccination | CDC](#).

Some industry sectors have vaccination **requirements** for their workforce that must be followed; review these requirements in Governor Inslee’s “COVID-19 Vaccination Requirement” proclamation [21-14](#) et seq. (currently [21-14.4](#)). Other workplaces may choose to require vaccination as a condition of employment; see [What You Should Know About COVID-19 and the ADA, the Rehabilitation Act, and Other EEO Laws | U.S. Equal Employment Opportunity Commission \(eoc.gov\)](#) for more information. As described in [L&I requirements](#), employers are **required** to verify workers’ vaccination status in workplaces where vaccinations are required, such as healthcare settings and schools. When verifying an employee’s vaccination status in a sector specified in Governor Inslee’s “COVID-19 Vaccination Requirement” proclamation [21-14](#) et seq. (currently [21-14.4](#)), the following may be used as proof of vaccination:

- CDC COVID-19 Vaccination Record Card or photo of the card;
- Documentation of vaccination from a health care provider or electronic health record;
- State immunization information system record, including [WA Verify](#); or

- For an individual who was vaccinated outside the United States, a reasonable equivalent of any of the above.

Additional information regarding vaccine requirements can be found on the governor's [Vaccine Mandate FAQ](#) page.

Businesses and organizations may request proof of COVID-19 vaccination from customers. Businesses are encouraged to require documentation of COVID-19 vaccination of customers through an official record, as opposed to personal attestation or an honor system. [Verification of vaccination status is not a violation of the Health Insurance Portability and Accountability Act \(HIPAA\) Privacy Rule.](#)

During a COVID-19 case or outbreak investigation, public health officials may require documentation of employee vaccination status, including viewing the employee's CDC vaccination card, state immunization information system record, or other documentation beyond an attestation.

WA Verify

One tool for verifying vaccination status is [WA Verify](#). In November 2021, DOH launched WA Verify, a new Digital COVID-19 Vaccine Verification Record system. The system provides a digital copy of state vaccine records and includes a QR code that can be scanned by a SMART Health Card reader. The Digital COVID-19 Vaccine Record retrieves COVID-19 records from the state's immunization system. For more information about WA Verify and how it can be used, see the [WA Verify FAQ](#) page.

Health Screening

Businesses and organizations may choose to require regular employee screening for COVID-19 symptoms, infection, and exposure in order to prevent exposure in the workplace. In addition, businesses should refer to [L&I DOSH Directive 1.70](#) for workplace requirements when a worker is identified as a case or close contact. See [Screening Visitors and Staff](#) for additional information.

Masks

Masks are an important tool for preventing transmission of respiratory viruses, including COVID-19.

Businesses are **required** to follow Washington State orders concerning face coverings:

- [Secretary of Health's Mask Order](#)
- [L&I Requirements and Guidance for Preventing COVID-19](#)
- [Governor's Proclamation 20-25 et seq.](#)

Businesses should review [Mask/Face Covering Guidance During COVID-19](#) for information on locations and situations where masks are required or recommended. In addition, workplaces should note that **L&I requires** workers to wear masks when following quarantine or isolation period guidelines for wearing a "well-fitting mask" per the WA DOH or the employer's local health jurisdiction (LHJ). In accordance with recommendations in [What to do if you test positive for COVID-19](#) and [What to do if you were potentially exposed to someone with COVID-19](#), workers are required to wear masks in the workplace in the following situations:

- During days 6-10 if a worker isolates for 5 days and then returns to work because their symptoms are improving, they have not had a fever in 24 hours without use of fever-reducing medications, and they do not work in an industry with a 10-day isolation
- During days 6-10 if a worker who is not up to date on vaccines quarantines for 5 days and then returns to work because they do not have symptoms and they do not work in an industry with a 10-day quarantine
- During days 0-10 if a worker who is up to date on COVID-19 vaccines is exposed to someone with COVID-19 and does not quarantine (note that some industries require quarantine regardless of vaccination status)

Businesses and organizations **may not** prohibit individuals from wearing masks if they choose to do so, except when customers are required to remove their face coverings briefly for identification purposes or in order to comply with state or federal law. Employers are **required** to allow workers to voluntarily wear masks and personal protective equipment as long as it does not create a safety or security issue.

See these additional guidance documents for more information:

- [Use Masks to Slow the Spread of COVID-19 | CDC](#)
- [OSHA Guidance on Mitigating and Preventing the Spread of COVID-19 in the Workplace](#)

Physical Distancing

In general, workers, guests, and customers are not required to stay at least six feet away from others at work, **except when required** by their employer or LHJ.

However, physical distancing, physical barriers, and other work practices that prevent large groups of people congregating together for extended time can help to reduce the risk of outbreaks. This is particularly true for unvaccinated people or when ventilation is poor. There are certain sectors, such as homeless service providers, where physical distancing is strongly recommended. See [sector-specific guidance](#) for additional information.

Sick Leave

As of January 1, 2018, businesses are **required to provide paid sick leave** to their employees. Employers may provide more leave than the minimum requirement, if they choose.

Specific to COVID-19, an employee may use accrued sick leave:

- If an employee feels ill or experiences COVID-19 related symptoms
 - Including when an employee is caring for family members or dependents for the above reason
- While an employee seeks medical diagnosis, care, treatment, or preventive medical care related to COVID-19
 - Including when an employee is caring for family members or dependents for the above reason
- While an employee is following recommended isolation or quarantine periods, following COVID-19 exposure
 - Including when an employee is caring for family members or dependents for the above reason

- While an employee is caring for dependents whose school or place of care is closed for a health-related reason

In accordance with OSHA guidance on [Protecting Workers: Guidance on Mitigating and Preventing Spread of COVID-19 in the Workplace](#), employers should grant employees paid time off to be vaccinated, including for employees experiencing side effects of vaccination.

For more information, please see L&I's [Paid Sick Leave](#) and [Paid Sick Leave and Coronavirus Common Questions](#) webpages. Please see also [Common Questions About Presumptive Coverage for Health Care and Frontline Workers](#).

Returning to Work after Travel

Travelers should follow [CDC travel guidance](#).

Screening Testing

In order to prevent transmission in the workplace, workplaces may consider screening testing of asymptomatic workers without known exposure to COVID-19 in the following non-healthcare settings:

- Large workplaces
- Workplaces at increased risk of introduction of COVID-19 (e.g., where workers are in close contact with the public or in communities with [moderate to high transmission](#))
- Workplaces where there is a higher risk of COVID-19 transmission (e.g., where physical distancing is difficult and workers might be in close contact, or workplaces that provide congregate housing for employees).
- Workplaces where COVID-19 infection among employees will lead to greater negative impact, such as workplaces in remote settings where medical evaluation or treatment may be delayed, workplaces where continuity of operations is a high priority (e.g., [critical infrastructure](#) sectors), and workplaces with a high proportion of employees at increased risk for severe illness

Screening testing may include testing of all workers before entering a workplace, periodic testing of workers at regular intervals (e.g., weekly), targeted testing of new workers or those returning from a prolonged absence, or a combination of these approaches. See CDC guidance on [Testing in Non-Healthcare Workplaces](#) for additional information. Businesses can consult with their LHJ to assess the need for a screening program and to determine program characteristics.

General information about testing can be found on [DOH's Resources and Recommendation](#) page, as well as on [DOH's Testing for COVID-19](#) page. See [DOH's Self-Testing Guidance for Establishments](#) for information on use of self-testing in the workplace.

Washington Administrative Code (WAC) [246-101 requires](#) facilities conducting COVID-19 tests to report results to public health. See [Reporting Test Results](#) section for additional information.

WA Notify

[WA Notify](#) is a simple, free, and anonymous exposure notification tool that works through smartphones to alert users if they may have been exposed to COVID-19 without sharing any

personal information. By adding WA Notify to a smartphone, the user can be notified if they have spent time near another WA Notify user who later tests positive for COVID-19.

WA Notify is an effective tool to notify close contacts quickly and confidentially. Those notified are provided guidance and asked to follow the quarantine protocol appropriate for their situation and in conjunction with their employer's requirements. Participation in the WA Notify exposure notification system is completely private and voluntary.

Hygiene

Employers are **required** to provide hand washing stations with soap per [L&I directives](#). All people should practice good hygiene including washing their hands frequently and covering their sneezes and coughs. Wash hands often with soap (fragrance-free) and water for at least 20 seconds before and after eating, using the restroom, blowing your nose, coughing, sneezing, or when hands are visibly soiled. Employees should avoid touching their eyes, nose, and mouth. If soap and water are not readily available, use a hand sanitizer that contains 60-95% alcohol content (fragrance-free). Cover all surfaces of your hands and rub them together until they are dry, then wash hands with soap and water as soon as possible.

Cleaning and Disinfection

High touch surfaces should be cleaned regularly and then disinfected at least once a day. Ensure restrooms are cleaned and disinfected regularly. Do not use misting, fogging, fumigation, or wide-area spraying to control the spread of COVID-19. These methods are not effective, do not clean contaminated surfaces, and are hazardous to human health. See [Cleaning and Disinfecting Guidance for Public Spaces](#) for more guidance.

Always thoroughly clean with soap, water, and a microfiber cloth before applying the disinfectant to the surface. Ensure compliance with the required wet contact time for the disinfectant by following all requirements on the label. Current CDC guidance for cleaning and disinfection for COVID-19 states that disinfectants should be registered by the EPA for use against SARS-CoV-2. Find the current list here: [List N: Disinfectants for Use Against SARS-CoV-2 \(COVID-19\)](#). Disinfectants based on hydrogen peroxide or alcohol are safer for use. See this [info sheet](#) from the University of Washington with options for safer cleaning and disinfecting products that work well against SARS-CoV-2.

Ventilation

Good ventilation and indoor air quality are important in reducing airborne exposure to respiratory pathogens, chemicals, and odors. Ensure mechanical ventilation systems operate properly and are adjusted to bring in as much outside air as possible. Have the ventilation system professionally evaluated and increase filters to a MERV 13 rating if the HVAC system can accommodate this. Facilities should strive to provide 4-6 air changes per hour.

Use of fans for cooling is acceptable. Avoid blowing air across the breathing zone of room occupants. See the WA DOH [Creating Safer Air Movement for Cooling Guidance](#) for more information. Do not use ozone generators, electrostatic precipitators and ionizers, or negative ion air purifiers because they can produce harmful by-products. Portable HEPA air cleaners, without additive technology, can supplement ventilation and are most critical in rooms with poorer ventilation or in isolation areas.

For more information and options related to ventilation, see DOH’s recommendations for [Ventilation and Air Quality for Reducing Transmission of COVID-19](#) or [CDC’s guidance for improving ventilation and increasing filtration](#) as well as the Association for Heating, Ventilating and Air-Conditioning Engineers (ASHRAE) guidance on ventilation.

COVID-19 Point of Contact

Employers are encouraged to identify a central COVID-19 Point of Contact. The Point of Contact will liaise with public health agencies and serve as a point of contact for employees to report all suspected and confirmed cases and ensure centralized tracking. All employees should know who the Point of Contact is and how to contact them.

Records

The business should maintain a list of known COVID-19 cases among employees and customers, and a list of all exposed people who may be close contacts. See [What to do if someone is a close contact of someone with COVID-19](#) for information on identifying close contacts. Be prepared to share this list with public health if it is requested. A template is available [here](#).

Employers also have a **requirement** to notify employees of potential exposure at the workplace and should maintain records. See [What to Do if Someone Worked while Contagious with COVID-19](#) below.

Responding to Cases or Suspected Cases of COVID-19

What to Do if Someone has Symptoms of COVID-19

If a staff member (e.g., employee, contractor, or volunteer) develops [symptoms of COVID-19](#), regardless of their vaccination status, they should immediately take the following steps:

- Wear a well-fitting mask (if not already doing so)
- Notify their designated COVID-19 Point of Contact
- Return home (or stay home if not at work)
- Follow the isolation, testing, and healthcare consultation steps in “What to do if a Person is Symptomatic” section of the [COVID-19 Symptom Decision Trees](#)
- Comply with all workplace illness management policies, including those pertaining to testing

If the staff member resides in workplace housing, they should be isolated in a space with fully private sleeping quarters and bathroom so they do not interact with others. Staff caring for ill persons should use appropriate [medical grade PPE](#). If a person had signs or symptoms of COVID-19 at work, immediately shut down areas occupied by sick workers to keep others away and follow [CDC cleaning and disinfection recommendations](#). The ill person should follow [CDC guidance for what to do when sick](#).

If the ill person tests positive for COVID-19, they should follow the steps under the [Isolation](#) section (below). If they were present at work when contagious, follow the steps listed under [What to do if someone worked while contagious with COVID-19](#).

Isolation

Isolation guidance based on whether a worker tests positive, negative, or is not tested can be found in “What to do if a Person is Symptomatic” of the [COVID-19 Symptom Decision Trees](#).

Businesses should provide their employees who test positive for COVID-19 or who have symptoms of COVID-19 with [COVID-19 Symptom Decision Trees](#) and [What to do if you test positive for COVID-19](#).

Some workplace settings have different isolation guidance than the general public, including workers in correctional and detention facilities, homeless shelters and transitional housing, commercial maritime settings (e.g., commercial seafood vessels, cargo ships, cruise ships), crowded work settings where physical distancing is not possible due to the nature of the work (e.g., warehouses, factories, and food packaging and meat processing facilities), and temporary worker housing. See [What to do if you test positive for COVID-19](#) and/or [setting-specific guidance documents](#) for applicable isolation **requirements** and recommendations.

What to Do if Someone Worked while Contagious with COVID-19

If someone worked while contagious with COVID-19, it is possible others may have been exposed to the person with COVID-19 and are considered close contacts. A person is contagious with COVID-19 starting two days before they have symptoms (or if asymptomatic, two days before the collection date of a positive test for COVID-19) and through 10 days after symptom onset (or 10 days after the collection date of their positive test if they remain asymptomatic). If a person with COVID-19’s isolation period is longer than 10 days (e.g., because they are severely ill or immunocompromised), they are contagious through the end of their isolation period. See [What to Do if Someone is a Close Contact of Someone with COVID-19](#) for next steps for close contacts at work.

Staff should inform their workplace COVID-19 Point of Contact if they have COVID-19 and worked while contagious. The employer should identify close contacts in the workplace in order to provide guidance (see [What to Do if Someone is a Close Contact of a Person with COVID-19](#)) and notify all employees and the employers of subcontracted employees of potential exposure to COVID-19.

Employers are **required** to inform staff who may have been exposed to COVID-19 about the potential exposure while maintaining confidentiality of the person who tested positive, as required by the [Americans with Disabilities Act \(ADA\)](#). An employer is **required** to provide written notice to all employees, and the employers of subcontracted employees, who were on the premises at the same worksite as the person with COVID-19 that they may have been exposed to COVID-19. Please see [L&I’s Reporting and Notification Requirements FAQ](#).

If there has been a sick person or someone who tested positive for COVID-19 at work within the previous 24 hours, the business should follow [CDC guidance](#) to clean and disinfect the spaces they occupied.

See [Reporting Cases and Outbreaks and Working with Public Health](#) for information on workplace notifications and reporting cases and outbreaks to public health and L&I.

What to Do if Someone is a Close Contact of a Person with COVID-19

A close contact is someone who was within six feet of a person with COVID-19 for at least 15 cumulative minutes over a 24-hour period during the time the person with COVID-19 was

contagious. A person is contagious with COVID-19 starting two days before they have symptoms (or if asymptomatic, two days before the collection date of a positive test for COVID-19) and through 10 days after symptom onset (or 10 days after the collection date of their positive test if they remain asymptomatic). If a person with COVID-19's isolation period is longer than 10 days (e.g., because they are severely ill or immunocompromised), they are contagious through the end of their isolation period. A person is a close contact even if they were wearing a mask. The definition of a close contact may vary in some situations (e.g., less time spent near an unmasked person who is coughing).

Reviewing logs, databases, and video footage, and interviewing employees with COVID-19 may be useful for identifying close contacts in order to notify them of their exposure. For employer **requirements** to notify employees and subcontractors of potential exposure, please see the [What to Do if Someone Worked while Contagious with COVID-19](#) section above.

Businesses should refer to [What to do if you were potentially exposed to someone with COVID-19](#) for guidance for close contacts (e.g., masking, testing, and quarantine), provide identified close contacts with this guidance, and exclude people in quarantine from the workplace. See the "Identify and Care for Close Contacts" decision tree in [COVID-19 Symptom Decision Trees](#) for a close contact guidance visual reference; this decision tree only applies when the close contact can wear a well-fitting mask and is *not* in a K-12 school, health care facility, correctional facility, homeless shelter, crowded work site, temporary worker housing, or commercial maritime setting.

Critical Infrastructure Workers

During periods of critical staffing shortages, [critical infrastructure](#) workplaces may consider shortening the isolation or quarantine period for staff to ensure continuity of operations. This option should be used as a last resort and only in limited circumstances, such as when the cessation of facility operation may cause serious harm or danger to public health or safety. Additional risk mitigation precautions should be used. **Decisions to shorten isolation or quarantine in these settings should be made in consultation with the local health jurisdiction.**

Reporting Outbreaks and Tests and Working with Public Health

Workplaces have outbreak and test reporting requirements and may work with public health to respond to and control outbreaks.

Outbreak Reporting

Businesses should notify their [local health jurisdiction](#) of any cases of COVID-19 in the workplace. Businesses are **required** to notify their LHJ within 24 hours if the employer suspects COVID-19 is spreading in their workplace or if the employer is aware of 2 or more employees who develop confirmed or suspected COVID-19 within a 14-day period (Governor Proclamation 20-25 et seq. – currently [20-25.19](#)).

A workplace is considered to be experiencing a COVID-19 outbreak when the following criteria have been met:

- There are two or more COVID-19 cases who tested positive by a [viral test](#), AND
- At least two cases have symptom onsets (or positive test specimen collection dates if asymptomatic) within 14 days of each other, AND

- Cases were epidemiologically linked in the workplace (e.g., case-patients share a work shift or building, or benefit from employee sponsored transportation or housing), AND There is no plausible epidemiological linkage suggesting transmission is more likely to have occurred in another setting (e.g., household) outside of the workplace.

If you suspect your workplace is experiencing a COVID-19 outbreak, contact your LHJ within 24 hours.

Certain settings, such as schools and correctional facilities, have different outbreak definitions. Refer to the guidance on those settings for additional information.

Employers with more than 50 employees at a workplace or worksite are **required** to report to L&I within 24 hours of confirming 10 or more of their employees at the workplace or worksite in Washington have tested positive for COVID-19 ([SB 5115](#)). These 10 or more employees may have tested positive over either of the following periods of time:

- Any period of time communicated by the Washington State Department of Health or a local health jurisdiction to the employer to be a COVID-19 outbreak at their worksite, OR
- When the positive test collection dates of these 10 or more cases occurred between the following start and end points:
 - Start: when 2 or more employees at a worksite test positive for COVID-19 within 14 consecutive days of each other
 - End: when 28 consecutive days have passed since the last positive test result for any employee at the worksite

Employers can report to L&I 24/7 by calling 1-800-423-7233 and using option 1.

Reporting Test Results

Washington Administrative Code (WAC) [246-101](#) requires facilities conducting COVID-19 tests to report results to public health. This includes employers performing COVID-19 point-of-care testing or self-tests under a Medical Test Site/CLIA license. More information about reporting can be found on the [Reporting COVID-19 Test Results for Point-of-Care Testing Facilities](#). More information about Medical Test Site/CLIA licenses can be found [here](#). General information about testing can be found on [DOH's Resources and Recommendation](#) page, as well as on [DOH's Testing for COVID-19](#) page.

Working with Public Health Authorities

Public health authorities, most often the LHJ, may be able to assist a workplace in responding to a case or outbreak of COVID-19. Everyone is **required** to cooperate with public health authorities in the investigation of cases, suspected cases, outbreaks, and suspected outbreaks ([WAC 246-101](#), Governor's Proclamation 20-25 et seq. – currently [20-25.19](#)). Public health authorities may provide recommendations or requirements to respond to the COVID-19 case or outbreak.

Businesses should work with the public health authorities of the jurisdiction of the physical location where there is a case or outbreak. For example, if a national corporation has headquarters in one state and a physical location in WA where there is an outbreak, the corporation should work with the public health authorities in WA (and possibly with additional public health authorities, if warranted).

Businesses should be prepared to provide public health authorities with information about workers with COVID-19, as businesses are **required** to release information about COVID-19 cases to public health authorities as part of a case or outbreak investigation if requested. This information may include, but is not limited to:

- Name
- Date of birth
- Job title/description
- Parent or guardian name, if a minor
- Home phone number, or home phone number of parent or guardian
- Home address
- Locations visited in the workplace
- Dates of workplace attendance
- Type of COVID-19 test
- Date of positive test
- Date of symptom onset
- Vaccination status
- Medical conditions
- Preferred language spoken
- Information about any staff member close contacts with COVID-19

The business should also gather information about everyone the staff member with COVID-19 may have been in close contact with at the workplace during their infectious period. See [What to do if someone is a close contact of someone with COVID-19](#) for information on identifying close contacts.

Workplace closure in response to COVID-19 cases

There may be instances where closure of a workplace is warranted to stop transmission of COVID-19. The time period on such closures can vary, from initial short-term closures to allow time for health officials to gain a better understanding of the COVID-19 situation and help your workplace determine appropriate next steps, to extended closure to stop transmission of COVID-19. Businesses should work with their local health jurisdiction to determine when it is necessary to close a workplace and when the workplace can reopen.

Mental and Behavioral Health Resources

Please visit the DOH [Behavioral Health Resources and Recommendations](#) webpage for additional information on how to support employees.

More COVID-19 Information and Resources

Stay up-to-date on the [current COVID-19 situation in Washington](#), [Governor Inslee's proclamations](#), [symptoms](#), [how it spreads](#), and [how and when people should get tested](#). See our [Frequently Asked Questions](#) for more information.

A person's race/ethnicity or nationality does not, itself, put them at greater risk of COVID-19. However, data are revealing that communities of color are being disproportionately impacted by COVID-19. This is due to the effects of racism, and in particular, structural racism, that leaves

some groups with fewer opportunities to protect themselves and their communities. [Stigma will not help to fight the illness](#). Share only accurate information to keep rumors and misinformation from spreading.

- [WA State Department of Health 2019 Novel Coronavirus Outbreak \(COVID-19\)](#)
- [WA State Coronavirus Response \(COVID-19\)](#)
- [Find Your Local Health Department or District](#)
- [CDC Coronavirus \(COVID-19\)](#)
- [Stigma Reduction Resources](#)

Have more questions? Call our COVID-19 Information hotline: **1-800-525-0127**

Monday – 6 a.m. to 10 p.m., Tuesday – Sunday and [observed state holidays](#), 6 a.m. to 6 p.m. For interpretative services, **press #** when they answer and **say your language**. For questions about your own health, COVID-19 testing, or testing results, please contact a health care provider.

To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 ([Washington Relay](#)) or email civil.rights@doh.wa.gov.