v.4.1 Updated April 27, 2020

This document will be updated frequently.

Visit the <u>New Coronavirus InfoNet page</u> at the start of every shift to ensure you are referencing the most up to date document (date **and** version number)

Combining universal masking and PPE use during COVID-19 pandemic

Introduction

This document has been prepared to provide clarity around universal masking procedures for **all** Bruyère staff, as well as how it is to be combined with PPE for additional precautions on the clinical units.

Masks have two functions: 1) source control, meaning protecting others from the wearer and 2) as part of personal protective equipment, meaning protecting the wearer from others during care. **All** staff (including those who do not work on a clinical unit) will be given procedure masks (or alternates, based on supply availability) to wear while at work. Wearing a mask is **not** a substitute for physical distancing.

Principles of Universal Masking

- The mask is to be donned by **all** staff when arriving on site and removed when eating and drinking or leaving campus at the end of the shift/day.
- All staff wearing only a mask must continue to practice physical distancing, maintaining at least two metres (six feet) of separation from patients, residents and others (including staff) to prevent exposing themselves to droplets.
- Because of the supply limitations we are experiencing and preparing for, a single mask may be worn for an extended period (i.e., donned at the beginning of the shift and continued to be worn until the end), as long as it is not visibly soiled, wet or damaged..
- Staff members who work in clinical areas will be provided masks and eye protection (goggles, face shields) daily. Goggles will be available at the screening station and the face shields can be found in the clean utility room on the unit.
- When staff members remove their masks on break to eat, they must ensure physical distancing from others, practice proper hand hygiene, and disinfect the surface where they are eating with available disinfectant products.
 - o If this is not possible, staff members are asked to:
 - leave their mask on and seek an alternate location for their meals,
 - work together with their colleagues in break rooms to ensure physical distancing is maintained, or
 - change break schedules to stagger them more, whenever possible.
- Masks are to be discarded in the PPE collection bins.
 - Soiled, damaged or wet masks should be discarded, as soon as they are removed, in the collection bins provided on the units.
 - A mask being worn at the end of the shift should be discarded in the collection bin as you leave the building.
- After use, the masks are to be handled in a manner that minimizes the potential for crosscontamination. This means never touching the front of the mask and always removing by grabbing the loops or straps. Immediately clean your hands after handling the mask.
- Hand hygiene is to be performed before putting on and after removing, or otherwise handling, the
 mask. Perform hand hygiene before and after every patient/resident interaction. Always follow the
 4 Moments for Hand Hygiene on the clinical units.

Combining universal masking with PPE on clinical units:

Universal masking scenarios	PPE required	Change gown or gloves?	Disinfect eye protection?	Re-use mask?
On unit, more than 2m away from patients/ residents	✓ Mask	Not applicable	Not applicable	Yes. Keep it on at all times. Perform hand
In patient/resident room, more than 2m away from patient/resident	Gloves and/or gown, if risk assessment for task to be performed determines PPE is required (e.g., patient/resident on Contact precautions for MRSA, ESBL, etc.)	If gloves worn: Change gloves and clean hands between each patient/ resident environment If gown worn: Gown must be reused for encounters with the same patient/ resident environment. Hang the gown in the room for re-use, unless soiled or wet. If there is more than one patient/resident in the room, the same gown can be worn for activities inside the room, even between patient/resident environments. If more than one staff member is required to work in the same patient/resident environment, each staff member must have their own gown.	Not applicable	hygiene before and after touching mask. Only replace if it becomes visibly soiled, wet or damaged.
Direct care of patient/ resident (< 2m) with no additional precautions (i.e., patient/resident on Routine Practices)	✓ Mask ✓ Eye protection (goggles preferred, or face shield, based on availability) Gloves and/or gown, if risk assessment for type of care to be provided determines PPE is required	If gloves worn: Change gloves and clean hands between each patient/ resident If gown worn: Gown must be reused for encounters with the same patient/ resident. Hang the gown in the room for re-use, unless soiled or wet. If there is more than one patient/ resident in the room, the same gown can be worn for activities inside the room, even between patients/ residents. If more than one staff member is required to	If wet or contaminated, disinfect eye protection between patients/ residents	

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Direct care of patient/resident (< 2m) on Contact Precautions	✓ Mask ✓ Eye protection (goggles preferred, or face shield, based on availability) ✓ Gown ✓ Gloves	care for the same patient/resident, each staff member must have their own gown. Change gloves and clean hands between each patient/resident Gown must be reused for encounters with the same patient/ resident. Hang the gown in the room for re-use, unless soiled or wet. If there is more than one patient/resident in the room, the same gown can be worn for activities inside the room, even between patients/residents. If more than one staff member is required to care for the same patient/resident, each staff member must have their own gown.	If wet or contaminated, disinfect eye protection between patients/ residents	
Direct care of patient/resident (< 2m) on Droplet & Contact Precautions	 ✓ Eye protection (face shield preferred, or goggles, based on availability) ✓ Gown ✓ Gloves 	Change gloves and clean hands between each patient/resident Gown must be reused for encounters with the same patient/ resident. Hang the gown in the room for re-use, unless soiled or wet. If there is more than one patient/resident in the room, the same gown can be worn for activities inside the room, even between patients/ residents. If more than one staff member is required to care for the same	After using face shield (or googles, if face shield not available), remove and disinfect it after leaving the room (or cohort area)	
In room of confirmed or suspect COVID-19 patient/resident while aerosolgenerating medical	✓ Fit-tested N95 respirator ✓ Eye	patient/resident, each staff member must have their own gown. Change gloves and clean hands between each patient/resident Gown must be reused	After using face shield (or googles, if face shield not available), remove and disinfect it	Remove the N95 respirator only after leaving the room and closing the door behind
procedures are being	protection	for encounters with	only after leaving	you. Clean your

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done (face shield preferred, or goggles, based on availability) ✓ Gown Gloves (face shield preferred, or goggles, Hang the gown room for re-use soiled or wet. If more than one member is requicare for the sam patient/resident staff member m their own gown.	closing the door behind you procedure mask back on. Dispose of the N95 in the collection bin. e staff ired to ne t, each oust have
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Gowns – Additional Information

- Hanging the gowns for re-use: When not in use, the gown can be hung on the hook in the patient/resident room. When removing the gown, fold the gown inward along the length of the gown and hang it so that, as much as possible, the front side of the gown is facing the wall, away from anyone walking past it.
- When putting the gown back on, avoid touching the front of the gown as much as possible.
- Replacing gowns: Replace a gown if it becomes wet, soiled or damaged. Gowns are to be placed in the soiled linen hamper for washing.

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Eye Protection (Goggles and Face Shields) - Additional Information

- For patients/residents on Droplet & Contact precautions, face shield use protects the wearer's eyes, as well as the front of the mask, from droplet contamination.
- Clean and disinfect goggles/face shield using soap and water first, if visibly soiled, followed by disinfection with a disinfectant wipe/solution (depending on availability). If goggles/face shield are not visibly soiled then soap and water is not required, proceed to disinfection.
- Place goggles/face shields in grey bins in soiled utility rooms prior to leaving the unit.

Prepared by Bruyère Infection Prevention & Control (April 26, 2020).