



The Personal Protective Equipment (PPE) Bulletin has been created to provide ongoing direction to health-care providers regarding the recommended guidelines, processes and provincial supply of PPE.

Expansion of Masking Recommendation and Guidance:

The resumption and expansion of SHA services and family presence guidelines will result in an increased number of patients, clients and family members/support people entering our health care facilities. In a continued effort to keep everyone safe, the SHA has expanded current masking recommendations to include **all outpatients coming into SHA facilities**. This new practice will provide an additional layer of protection for patients and clients from the asymptomatic spread of COVID-19.

The masking of outpatients (ambulatory care, emergency departments, diagnostic imaging, primary care inside SHA sites, etc.) is in addition to already existing masking of staff and physicians who work in a clinical care area/facility or care home where they will be in direct or indirect contact with patients/residents/clients and all family members/support people.

There may be instances where patients or family member/support person are uncomfortable wearing a mask or it is not recommended (examples include but are not limited to: allergies, claustrophobia, children not keeping a mask on – children under two years should not be masked). If they cannot tolerate the SHA provided medical grade mask we ask that they consider the following as an alternative:

- Personal mask - if patients/clients have a cloth mask or alternative that they feel comfortable with they are welcome to wear it
- Maintain physical distance of a minimum of two metres at all times
- Perform hand hygiene regularly

This new practice goes into effect **Friday, June 5 at 5:00 p.m.** Please work with your teams to ensure that masks are provided at the entrances of your facility or at your unit for outpatients. The following materials have been developed to assist with the process of implementation:

- [Huddle Talk – Expanded Masking Recommendations](#)
- [Rapid Update – Who Should be Masked?](#)
- [Masking Guidelines for Patients/Residents/Clients](#)
- [Donning and doffing poster for the public](#)

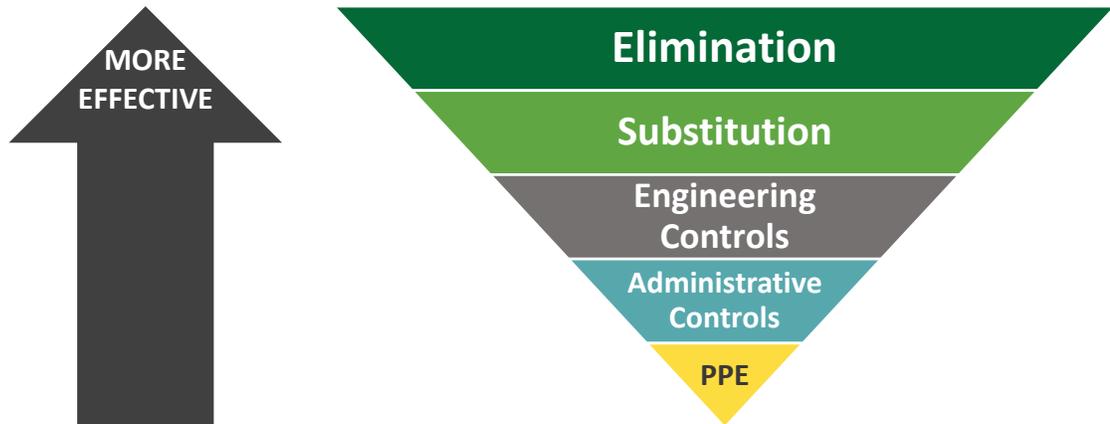
In addition to masking, staff, physicians, patients/residents/clients, and visitors should continue to frequently wash their hands, maintain physical distancing of two meters when possible and consider the hierarchy of control when identifying and mitigating exposures to COVID-19.

Hierarchy of Control:

Last week's Bulletin touched lightly on the hierarchy of control (HOC) and that it can be used to help when thinking through levels of protection for staff, physicians, and patients/clients/residents from exposure to COVID-19.

The Hierarchy of Control should be applied when addressing mitigation or elimination of hazards.





Depicted within the inverted pyramid below, the more effective controls are on the large, top side of the pyramid, as follows: elimination, substitution, engineering controls, administrative controls, and PPE.

Things to consider while using the Hierarchy of Control:

- Use higher levels for the greatest protection.
- Complete elimination of a hazard is not always possible, so using a combination of controls is ideal to mitigate risk.
- Consistently review hazards and identify if controls are in place, if they are reliable, and whether they can be improved.
- Make hazards and controls visual through signage and labels so everyone is aware.
- Reach out to local Occupational Health and Safety and Infection Prevention and Control teams to assist in this process and to pass on ideas about new controls.

Efforts should be made to find controls in the higher levels prior to going directly to using PPE. A [Rapid Update on the Hierarchy of Control](#) and a graphic for [How to Use the Hierarchy of Control](#) have been created to help walk your teams through this process.

Frequently Asked Questions:

1. How do I clean the foam on my face shield?

The [Rapid Update on Face Shield Disinfection](#) has been updated to reflect the process for cleaning face shields with foam. Ensure you are storing your face shield between uses in a way that reduces the chance of possible contamination. This could be in a Ziploc bag or in a sanitized drawer. Please come up with a storage solution that works for your area. Face shields should be discarded at the end of your shift. If you are ever in doubt whether you can clean a face shield, dispose of it and use a new one.

2. I recently saw a study that concluded that procedure masks were not effective PPE. Is there any validity to this?



The PPE Expert Panel has reviewed the [Lancet article](#) and determined that this meta-analysis does not provide sufficient evidence to support any changes being made to current SHA PPE practices in the areas of eye protection, distancing or masking.

3. When will the SHA begin to consider rolling back these masking guidelines and recommendations?

The masking recommendations and guidelines are reviewed weekly to determine the appropriateness and factor in current research and evidence. Further work is underway with Public Health Epidemiology to develop triggers for when to reduce or rescind masking recommendations.

4. With the expanded masking guidelines to include outpatients do we need to screen patients as they enter the main doors of a facility?

Previous facility screening practice required all patients to be screened at entrances to determine if they needed to wear a mask. This no longer needs to take place, however pre-screening and patient screening at the unit level should still continue to determine the precautions needed. If the only patient screening at your site was at the front entrance (smaller facility, primary health care site), continue with that process.

Please ensure that a medical grade mask is provided to all outpatients and designated family members/support persons upon entering the facility or unit. Designated family members and support persons are still required to be screened at facility entrances. It is recommended that boxes of masks are not left unattended.

