

Change in Practice: Masking of health care workers

At Nova Scotia Health Authority (NSHA) we have made a change in practice regarding masking of health care workers (HCW) and want our physicians and staff to understand our actions. Although we have enough PPE to meet immediate needs, demand for personal protective equipment (PPE) continues to increase, along with continued disruptions to the supply chain internationally. While we continue to work hard to source PPE through both traditional and innovative means, we must plan for potential critical shortages of PPE. As a result, we will need to adopt PPE conservation strategies in order to mitigate risk to patients and providers while avoiding the complete depletion of PPE.

Ensuring the safety of healthcare workers during the COVID-19 is our top priority. Most importantly, our understanding of the **risk** from COVID-19 to healthcare workers has not changed. SARS-CoV-2 is spread through droplets and is **not** spread by airborne transmission (like measles). Therefore, droplet precautions are sufficient to protect healthcare workers from developing COVID-19 during routine care.

The most important resource in combatting this pandemic is **YOU**. Your health and safety are critical for us to continue providing the care that our patients deserve. We do not take this responsibility lightly and will continue to ensure that we have all the resources needed to carry out our job safely and effectively.

The reason we are now changing our approach to PPE is to conserve our current supplies of PPE so that we can have the **right** PPE, for the **right** people, for the **right** situation, **every time** during this pandemic.

As of April 4, 2020, NSHA will implement a universal masking practice for staff who are working in clinical areas. You are given one mask to be worn through your shift/workday, and will be expected to wear a mask for extended periods while providing patient care. This is being done to protect you and your patients as well as to conserve our supply of masks. Further to this, we are making the following additional changes to PPE use. It is clear that given the current demands on PPE, we need a strategy to conserve our supplies of all PPE so that we can continue to have the **right** PPE, for the **right** people, for the **right** situation, **every time during this pandemic**.

How this will work:

Non-physician staff will obtain their mask from the unit manager or designate.

Consulting physicians who do not have a base unit or floor should obtain their mask from their Department Head or designate. You will be expected to wear your mask at all times with the exception of breaks to eat or using the restroom. You will be expected to wear your mask for all subsequent patient encounter. All consultants will need to sign out the mask at the nursing desk. For those physicians who have a base floor, your mask will be issued by the nurse manager or delegate of that unit. Any member of the medical staff who is not certain about their 'home unit' from which to obtain masks should contact their Department or Division Head who will assign you a unit.

If your masks become contaminated with splash or spray, and you have already used your second mask, you may request an additional mask. Otherwise, you should change your mask if you think it has come in contact with a patient or if it becomes so moist that it no longer feels intact.

Please note that if you are working with any aerosol generating medical procedures or seeing a patient under airborne precautions, you will need to use a N95 mask. You can take off your procedure mask, store it face-side up on a clean surface. **Please make sure to clean your hands carefully any time you manipulate, handle, remove or replace your mask.** If you store your mask in a bag, the bag cannot be reused, as it has been contaminated with the outside surface of your mask.

Doffing (removing) mask

Remove your mask by handling the elastic ear loops, store the mask face-side up on a clean surface or within a clean bag paper bag. Then wash your hands.

Donning (putting on) the mask again

Wash your hands. Replace the mask on your face carefully, handling it with the elastic earloops as much as possible. Discard the bag. Wash your hands after donning the mask. Wipe off the clean area where your mask was placed with a disinfectant wipe.

Further guidance may be forthcoming about conservation of PPE. Please also accept that this will be bumpy at first as we sort out our processes.

We have included some frequently asked questions (FAQs) in the attached PDF

These recommendations follow from CDC guidance that can be found at <https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/face-masks.html>