



**Thunder Bay Regional
Health Sciences
Centre**

COVID-19 Pandemic

Personal Protective Equipment (PPE) Program

Occupational Health & Safety
August 18th, 2020

Revision: 3
Revision Date: October 30th, 2020

Table of Contents

Introduction	3
Responsibilities	4
Procedure Masks	5
Steps for Donning a Procedure Mask	5
Steps for Doffing a Procedure Mask	5
Other Considerations	5
When a Procedure Mask Can Be Removed	5
Cloth Masks	6
Steps to Apply a Cloth Mask	6
Steps to Remove and Store Cloth Masks	6
Steps to Apply a Used Cloth Mask	6
Other Considerations	6
Laundering Your Cloth Mask	6
When a Cloth Mask Can Be Removed	7
N95 Respirators	7
Steps for Donning an N95 Mask	7
Steps for Doffing an N95 Mask	7
Steps for N95 Reprocessing	8
Eye Protection	8
Face Shields & Goggles	8
High Risk Areas	8
All Other Clinical Areas	8
Reprocessing	9
Steps for Donning Eye Protection	9
Steps for Doffing and Cleaning Eye Protection	9
Steps for Donning Used Eye Protection	9
Gowns	10
Steps for Donning a Gown	11
Steps for Doffing a Gown	11
COVID-19 PPE Requirements	12

Introduction

Thunder Bay Regional Health Sciences Centre (the Hospital) will ensure the use of personal protective equipment (PPE) to protect workers that are exposed to potential hazards associated with COVID-19 while performing duties at work.

This program applies to all workers, which for the purpose of this program includes: staff, professional staff, learners, volunteers, contract employees and to any person working on behalf of the Hospital. The Hospital may, at its discretion, implement PPE requirements for visitors or Care Partners during global pandemics which will be communicated by the Incident Management Team (IMT). This program will be updated at the direction of the IMT in collaboration with the Occupational Health & Safety Department.

This program outlines the selection, use and care of PPE specific to preventing the spread of COVID-19. In addition to PPE, physical distancing and hand hygiene remain key components to preventing the spread of COVID-19.

Prior to each interaction with a patient or their environment, a Point of Care Risk Assessment should be completed to assess the patient's status and the health care worker's personal risk to determine what interventions and controls are required to prevent the spread of infection. For Point of Care interaction - determine if additional precautions (i.e. contact, droplet, airborne) are required in addition to Routine Practices.

Follow routine practices to don and doff the proper PPE for patient care in the proper order.

[Click here to read "Management of Novel Respiratory Infections ICP-1-16"](#)

[Click here to view "PPE Recommendations for Suspected/Confirmed COVID-19 Cases Quick Reference Guide"](#)

Responsibilities

Employer:

- As per the Occupational Health & Safety Act, ensure that PPE is available, properly used and maintained, is a proper fit, is inspected for damage or deterioration.
- Take every precaution reasonable in the circumstance for the protection of the worker.

Managers:

- Potential hazards have been identified and appropriate PPE is selected to match the hazard.
- Workers have been trained in the proper PPE and its care and use before wearing.
- Workers have been advised of the disciplinary consequences for not wearing and/or using the appropriate PPE.
- Ensure PPE is available and being used as prescribed.
- Take every precaution reasonable in the circumstance for the protection of the worker.

Workers:

- PPE is used or worn as required by the employer and the Regulations.
- PPE (including masks, gowns, gloves, etc.) is visually inspected prior to each use.
- PPE that is absent or defective is immediately reported to supervisor/manager.
- PPE that is defective is not used for any task.
- PPE is maintained in good working order and in accordance with the manufacture instructions.
- PPE is not altered in any way from its original state.
- No item of PPE shall be used in any manner where that item will create a hazard to the user.
- Trained in the proper PPE and its care and use before wearing.
- PPE is selected based on a Patient (Point of) Care Risk Assessment (PCRA).

Reference policy: OHS-os-213 Personal Protective Equipment

Procedure Masks

- The procedure mask is to be worn at all times when providing direct patient care or have direct contact with a patient (within 2 meters) and is only to be removed in order to DON appropriate PPE as per clinical risk assessment and Infection Prevention and Control (IPAC) policies.
- Used procedure masks are to be disposed of when wet, soiled or damaged or at the end of every shift.
- For Point of Care interaction - determine if additional precautions (e.g. N95 mask) are required and perform a Point of Care Risk Assessment (IPC-1-18).
- If no additional precautions are required, proceed without removing your procedure mask.
- If additional precautions are required (e.g. N95 mask) or while on break doff the procedure mask and place it on a clean surface away from patient care area or in paper bag.

Steps for Donning a Procedure Mask:

1. Perform hand hygiene;
2. Secure ear loops behind ears;
3. Mold metal piece to nose bridge;
4. Perform hand hygiene;
5. Keep hands away from face and do not touch the front of the mask.

Steps for Doffing a Procedure Mask:

1. Perform hand hygiene;
2. Grasp ear loops and remove without touching the front of the mask (ties/ear loops/straps are considered 'clean' and may be touched with hands; the front of the mask is considered to be contaminated);
3. Bend forward to allow the mask to fall away from the face;
4. Place mask on a clean surface away from the patient care area with the inner mask portion facing upward to avoid contamination. Alternatively place in paper bag;
5. Perform hand hygiene.

Other Considerations

- Take extra care when removing a mask as this is when self-contamination may occur;
- Do not touch the front of the mask, and if so, immediately perform hand hygiene;
- Once a procedure mask becomes, damaged or soiled, it must be removed, disposed of and replaced. Otherwise use the mask for your shift;
- Careful and meticulous hand hygiene must occur after handling a used mask to avoid self-contamination.

When a Procedure Mask Can Be Removed

Workers are not required to wear a procedure mask if they are:

- Working behind a physical barrier; or
- Consuming food or drink in a location designated for consumption (Note: must be done while maintaining 2 meters from any person or situated behind a physical barrier within the Hospitals' cafeteria or staff lounges).

[Click here to view "How to Care for a Procedure Mask"](#)

Cloth Masks

- A cloth mask can be worn when staff are not providing direct patient care and are not within 2 meters of a patient.
- A cloth mask must be removed and replaced with appropriate level of PPE based on a Point of Care Risk Assessment when the situation warrants.

Steps to Apply a Clean Cloth Mask

1. Perform hand hygiene;
2. Secure ear loops behind ear;
3. Mold metal piece to nose bridge;
4. Perform hand hygiene;
5. Keep hands away from face and do not touch the front of the mask.

Steps to Remove and Store Cloth Masks

Anytime your cloth mask is removed (doffed), it must be stored in a hospital-provided paper bag.

1. Write your name, location and date on the hospital-provided paper bag.
2. Perform hand hygiene.
3. Open the paper bag, and ensure it is standing up.
4. To remove your mask.
 - Lean forward
 - Touch only the straps behind your ears.
 - Remove the straps from your ears and allow the mask to fall away from your face.
 - Using the straps, place the mask inside the paper bag with the outside of the mask down.
5. Fold the top of the bag closed.
6. Perform hand hygiene.
7. Store in a designated area.
8. Perform hand hygiene.

Steps to Apply a Used Cloth Mask

1. Perform hand hygiene;
2. Remove your previously used cloth mask from the paper bag by only touching the ear loops;
3. Place the mask on face by only touching the ear loops;
4. Adjust the mask by only touching the outermost edge of the cloth mask;
5. Discard the paper bag – do not reuse it;
6. Perform hand hygiene.

Other Considerations

- Do not touch the front of the mask, and if so, immediately perform hand hygiene.
- Once a reusable mask becomes wet, damaged, or soiled, it must be removed and placed in the provided bag to be taken home to launder.

Laundering Your Cloth Mask

1. Transport the mask home in the hospital-provided paper bag.
2. Prepare to remove the cloth mask from the bag.
 - Perform hand hygiene.
 - Unfold the bag. Touch only the outside of the bag.

- Empty the mask directly into washing machine or sink.
- Dispose of the paper bag immediately.
- Perform hand hygiene.
- Wash your mask with laundry detergent.
 - Use warm or cold water (NOT HOT).
 - Mask may be machine washed or hand washed.
- Dry your mask.
 - Air drying is best.
 - If using a dryer, set at a low temp to protect the polypropylene filter.

When a Cloth Mask Can Be Removed

Workers are not required to wear a cloth mask if they are:

- in an area of the Hospital not designated for public access (e.g. office-based settings only) and can safely maintain 2 meters distance from any other person;
- Working behind a physical barrier; or
- Consuming food or drink in a location designated for consumption (Note: must be done while maintaining 2 meters from any person or situated behind a physical barrier within the Hospitals' cafeteria).

[Click here to view "Cloth Masks Care and Cleaning Instructions"](#)

N95 Respirators

Workers are required to don their designated fit-tested N95 respirator as per clinical point of care risk assessment or conducting an aerosol generating medical procedure (AGMP).

Steps for Donning an N95 Respirator

1. Perform hand hygiene;
2. Hold the respirator in the palm of your hand with the straps facing downward;
3. Place the N95 respirator on your face covering your nose and mouth;
4. Pull the top strap up and over top of your head and place it on the crown of your head;
5. Take the bottom strap up and over top of your head and place it behind your head below your ears;
6. Mold the nose piece of the respirator over the bridge of your nose to obtain a tight seal;
7. Perform a fit check by placing your hands over the respirator and taking deep breaths. No air should escape the seal of the respirator. If so, press the nose piece and redo the fit check. If you are concerned your N95 respirator does not fit appropriately, contact the Occupational Health & Safety Department for a fit test;
8. Always follow the manufacturer's instructions for wearing a respirator.

Steps for Doffing an N95 Respirator

1. Perform hand hygiene;
2. Tilt your head forward;
3. Use two hands to grab the bottom strap, pull to the sides then over your head;
4. Use both hands to grab the upper strap, pull to the sides then over your head;
5. Keep tension on the upper strap as you remove it, which will let the mask fall forward;
6. Perform hand hygiene.

Steps for N95 Reprocessing

1. All N95 masks are to be saved after a single interaction with the patient/environment. Never reuse a N95 mask that has not been reprocessed;
2. Dispose of N95 masks that are wet, damaged or soiled;
3. Prior to donning your N95 mask, using a permanent marker on the outside front, write your name, work location and place a tick mark. Once the N95 mask is reprocessed, tick marks are used to keep track of the number of decontamination cycles it has gone through;
4. Doff the N95 mask following proper protocol and do not fold or bend;
5. Place individual doffed N95 masks into a self-sealing decontamination pouch (provided). Write your name, date and work location on the pouch. Seal the pouch, without folding or bending the mask;
6. Place the sealed pouch in the labeled collection container in the dirty utility room.

[Click here to view "N95 Reprocessing Collection"](#)

Eye Protection (Face shields or Goggles)

Eye protection is mandatory for all staff who have contact with patients.

Eye Protection will be issued to staff in the same manner as procedure masks. That is, supplies will be provided as appropriate by your primary manager and will be ordered and delivered via Stores.

All clinicians are to complete a point of care assessment prior to every patient interaction. For further information and Personal Protective Equipment (PPE) Guidelines, please consult your manager and policy IPC-2-16 - Management of Novel Respiratory Infections.

As part of our Hospital's ongoing efforts to conserve PPE, and in accordance with the recommendations of Ontario Health, eye protection will be cleaned/reprocessed as per the following guidelines.

[Click here to view "How to Care for Your Eye Protection"](#)

Face shields

The Hospitals' current face shields cannot be reprocessed in MDRD due to the foam at the top of the shield. Face shields are to be wiped down between patients and dispose of at the end of your shift.

Goggles

High Risk Areas (ED, ICU and 3A COVID Unit) and Areas of Unknown Risk (Renal Dialysis, Cancer Centre, Labour & Delivery, Diagnostic Imaging, and Outpatient Clinics):

- Eye protection is assigned to a staff person for the shift;
- Eye protection is cleaned by the user as per standards if removed;
- Eye protection can be stored on a paper towel (short term) or in a paper bag between uses;
- At end of shift eye protection is sent to MDRD for reprocessing.

All Other Clinical Areas:

- Eye protection is assigned to a staff person for their consecutive shifts;
- Eye protection is cleaned by the user as per standards if removed;
- Eye protection can be stored on a paper towel (short term) or in a paper bag (between shifts) between uses;

- At end of consecutive shifts eye protection is sent to MDRD for reprocessing. i.e. If working Monday to Friday, eye protection would be cleaned and stored on unit between shifts as per instructions and send to MDRD on Friday.

To have goggles reprocessed by MDRD:

- Once you have finished using the goggles, please place them inside the designated bins in your dirty utility rooms or designated locations on your unit;
- Dirty goggle pick up will need to be set up based on department. Please discuss Dirty goggle pick up with Materials Management to define process for your area. In all cases, Clean goggle requirements are ordered through requisitioning of item #3210

Steps for Donning Eye Protection (Face shields or Goggles)

1. Perform hand hygiene;
2. Put on eye protection without touching the inside of the eye protection;
3. Perform hand hygiene;
4. Keep hands away from face and do not touch the front of the eye protection.

Steps for Doffing and Cleaning Eye Protection (Face shields or Goggles)





1. Perform hand hygiene;
2. Don gloves;
3. Remove Eye Protection;
4. Carefully wipe the inside of the eye protection using a germicidal wipe;
5. Carefully wipe the outside of the eye protection using a germicidal wipe;
6. Wipe the outside of the eye protection with clean water to remove residual;
7. Fully dry (air dry or use clean towels);
8. Place eye protection on a clean surface away from the patient care area with the inner side facing upward to avoid contamination. Alternatively place in a paper bag. Avoid touching the inside of the eye protection;
9. Label the surface area or paper bag with name, date and location;
10. Remove gloves and perform hand hygiene.

Steps for Donning Used Eye Protection (Face shields or Goggles)

1. Perform hand hygiene;
2. Remove your previously cleaned eye protection from the clean surface or paper bag without touching the inside of the eye protection;
3. Put on eye protection without touching the inside of the eye protection;
4. Perform hand hygiene.

Gowns

Based on your Point of Care Risk Assessment you may be required to wear reusable or disposable isolation gowns. Please review the following:

Based on Your Point of Care Risk Assessment...		
Area	No Fluid exposure risk	High Fluid exposure risk
Emergency Department Renal Department Diagnostic Imaging	 <p>Reusable Gown (yellow or blue <u>fabric</u>)</p>	 <p>Reusable Gown (yellow or blue <u>fabric</u>) and Disposable Blue Gown</p>
All other inpatient/ outpatient areas	 <p>Reusable Gown (yellow or blue <u>fabric</u>) *If unavailable, use disposable gown</p>	 <p>AAMI Level 2 Disposable Gown (yellow or blue) *Colors may vary, check packaging for rating</p>

*High fluid procedure or exposure = clothing or skin exposed to splashes, sprays or items contaminated with blood, excretions or secretions e.g. IV start/removal, port access, etc.

*Actual gowns may appear different from photos.

Steps for Donning a Gown

1. Perform hand hygiene;
2. Fully cover torso from neck to knees, arms to end of wrists, and wrap around the back;
3. Fasten in back of neck and waist.

Steps for Doffing a Gown

1. Perform hand hygiene;
2. Unfasten gown ties, taking care that sleeves don't contact your body when reaching for ties;
3. Pull gown away from neck and shoulders, touching inside of gown only;
4. Turn gown inside out;
5. Fold or roll into a bundle and discard in proper waste container.

PPE REQUIREMENTS DURING COVID-19

Individual	Activity	Minimum Requirements during COVID-19 Pandemic	Requirements with COVID-19 Suspected or Confirmed Patients
Workers	Providing direct care (including nasopharyngeal swab collection)	<ul style="list-style-type: none"> Surgical/procedure mask Eye protection Gloves 	Droplet and Contact precautions, including: <ul style="list-style-type: none"> Surgical/procedure mask Isolation gown Gloves Eye protection
Workers	Performing known or potential aerosol-generating medical procedures (AGMP), excluding intubation	Airborne, Droplet and Contact precautions, including: <ul style="list-style-type: none"> N95 respirator (fit-tested, seal checked) Isolation gown Gloves Eye protection Negative pressure room, if available. If not, use a single room with the door closed 	
Workers	Performing endotracheal intubation, including during cardio-pulmonary resuscitation	<ul style="list-style-type: none"> N95 respirator (fit-tested, seal checked) Isolation gown Gloves Eye protection 	Enhanced Airborne, Droplet and Contact precautions, including: <ul style="list-style-type: none"> Kleengard A60 suit, 1 size larger than body size Bouffant N95 respirator (fit-tested, seal checked) Eye protection Nitrile gloves, 12" long (one under) Nitrile gloves (patient care), 1 size larger than what is normally worn
Workers	Transporting the patient	<ul style="list-style-type: none"> Surgical/procedure mask Eye protection 	Droplet and Contact precautions, including: <ul style="list-style-type: none"> Surgical/procedure mask Eye protection Gloves Gown if skin or clothing will come into contact with the patient or their environment
Worker	Non-patient care	<ul style="list-style-type: none"> Cloth mask If unable to maintain a spatial distance of >2m to a patient or separation by a physical barrier from the patient: <ul style="list-style-type: none"> Surgical/procedure mask Eye protection 	Droplet and Contact precautions, including: <ul style="list-style-type: none"> Surgical/procedure mask Isolation gown Gloves Eye protection
Visitors/ Care Partners in outpatient or inpatient unit settings	General	<ul style="list-style-type: none"> Cloth mask or better 	Droplet and Contact precautions, including: <ul style="list-style-type: none"> Surgical/procedure mask Isolation gown Gloves Eye protection
Screeners at points of active screening (e.g., triage, entrance points)	Preliminary screening	If able to maintain spatial distance of ≥ 2 m or separation by physical barrier: <ul style="list-style-type: none"> No PPE required Otherwise: <ul style="list-style-type: none"> Surgical/procedure mask Isolation gown Gloves Eye protection 	