



Infection Prevention and Control Guidance: Continuous Use of Medical Grade Face Masks and Eye Protection for Full Shifts in Healthcare Settings During COVID-19 Pandemic – All Phases

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Overview

This directive aligns with the guidance provided by the Public Health Agency of Canada (PHAC) and supports the previous provincial initiatives aimed at improving safety for both healthcare workers (HCWs) and patients, while maintaining judicious use of PPE.

This directive is being issued in response to the emerging evidence that asymptomatic, pre-symptomatic or minimally symptomatic individuals can transmit COVID-19 and is meant to prevent transmission of COVID-19 between HCWs, patients and co-workers.

The Public Health Agency of Canada (PHAC) recommends the continuous use of medical grade face masks by HCWs during all phases of the pandemic and the continuous use of eye protection based on local Area epidemiology.

As more information becomes available about the risks of acquiring COVID-19 in the workplace, Infection Prevention and Control (IPC) guidelines continue to evolve. As such, in conjunction with new guidance and recommendations from the PHAC, IPC is recommending that **based on local Area color phase**, eye protection should be used continuously with masking to ensure that our HCWs are protected from the risk of transmission of COVID-19.

With the emergence of COVID -19, IPC best practice guidelines recommend the use of goggles or face shields for eye protection in the management of suspect/confirmed COVID-19 patients. "Appropriately fitted, indirectly vented goggles with a manufacturer's anti-fog coating provide the most reliable practical eye protection from splashes, sprays, respiratory droplets and aerosols. Face shields are commonly used as an infection control alternative to goggles. As opposed to goggles, a face shield can also provide protection to other facial areas." CDC 2021.

Continuous use of medical grade face masks and eye protection is the practice of wearing the same mask and eye protection for repeated close contact with different patients, without removing the mask and eye protection between patient encounters. The duration of the continuous use is dependent on the nature of the task or activity being undertaken.

- Eye protection will be readily available to all HCWs and includes disposable/reusable face shields and reusable goggles and safety glasses.
- Eye protection is to be changed or cleaned and disinfected every time a face mask is changed.
- Personal glasses are NOT considered adequate eye protection.
- Facemasks with attached visors are not recommended as appropriate eye protection when caring for suspect/confirmed COVID-19 patients.
- Goggles or face shields are required for the care of suspect/confirmed COVID-19 patients and in high risk clinical settings: ERs, ICUs, ORs, COVID-19 Units and Assessment Centers.
- Safety glasses may be worn for the management of patients in non-high-risk clinical settings and non-clinical settings. If prescription safety glasses are worn in high risk areas a face shield must be worn as well.

Note: A clinical setting is defined as an area where care or services are provided to a patient (e.g. patient care unit, outpatient clinic/services, registration, etc.).

Note: Review [Appendix A: "Eye Protection Required During COVID-19 Pandemic"](#)

Continuous use of face masks and eye protection is not required when HCWs:

- are in individual workstations
- are in offices
- are eating and drinking with physical distancing maintained
- have received special dispensation through Employee Health Services under duty to accommodate or workplace safety issues are identified.
- are entering and exiting the facility when only a medical grade face mask is required to be worn.

When implemented continuous face mask and eye protection use will be referred to as one unit of PPE referenced within the document as facial protection.

The use of facial protection, together with diligent hand hygiene, are most critical for preventing transmission of respiratory infections.

Note: If a HCW identifies that he/she has special needs related to illness, disability, or various circumstances and is unable to wear the facial protection outlined in this document they will be directed to reach out to Employee Health Services to provide direction on how their identified concern will be addressed.

The continuous use of facial protection for full shifts in healthcare settings is in addition to personal protective equipment (PPE) identified by Practice Standards and the HCWs' point of care risk assessment (PCRA) and is recommended as follows:

Yellow Phase

Clinical Settings

- All HCWs will wear a medical grade face mask continuously, at all times in all areas of their workplace when a physical barrier (i.e.: plexiglass) is not in place to prevent transmission of droplets.
- All HCWs will wear facial protection (medical grade face mask and eye protection ([goggles/face shield](#))) when providing care to suspect/confirmed COVID-19 patients.
- The continuous use of eye protection is optional for HCWs working in clinical settings or when indicated by PCRA
- The face mask should be immediately changed and safely disposed of whenever it is damaged, soiled/wet, and after care for any patient on Isolation Precautions.
- HCWs must take care not to touch the front of their mask. If the front of face mask is touched or the face mask is adjusted the HCW must immediately perform hand hygiene.
- Face masks should not be worn below the chin. Wearing PPE improperly increases the risk for cross contamination
- HCWs will leave the patient's room if they need to remove their face mask.
- HCWs will follow all Infection Prevention and Control protocols including hand hygiene and the use of additional PPE when delivering patient care according to the IPC PCRA.
- When taking a break or eating a meal, the HCW must remove their face mask per the guidance for extended and reuse below. If the mask is not damaged, soiled/wet or contaminated, it should be stored safely for reuse.
- Physical distancing must be maintained while the face mask is removed.
- A face mask should be donned and doffed as per the instructions outlined under the [IPC Guidance for Donning and Doffing Medical Grade Face Mask and Eye Protection](#), before the HCW returns to work.

Non-Clinical Settings

- All HCWs who do not work in a clinical setting will wear a medical grade face mask at all times in all areas of their workplace, except when in individual offices or workstations.
- HCWs must take care not to touch the front of their mask. If the front of face mask is touched or the face mask is adjusted the HCW must immediately perform hand hygiene.
- Face masks should not be worn below the chin. Wearing PPE improperly increases the risk for cross contamination
- When taking a break or eating a meal, the HCW must remove their face mask per the guidance for extended and reuse below. If the mask is not damaged, soiled/wet or contaminated, it should be stored safely for reuse.
- Physical distancing must be maintained while the face mask is removed.
- A face mask is donned and doffed as per the instructions outlined under the [IPC Guidance for Donning and Doffing Medical Grade Face Mask and Eye Protection](#), before the HCW returns to work.

Orange Phase

Clinical Settings

- All HCWs working in high-risk clinical settings (i.e. COVID-19 units, ERs, All ICUs, ORs, and COVID-19 Assessment Centres) will wear facial protection (medical grade face mask and eye protection ([goggles/face shield](#))) continuously, at all times when providing patient care as well as when providing indirect patient care, while in patient room such as meal delivery and environmental services when a physical barrier (i.e., plexiglass) is not in place to prevent transmission of droplets.
- All HCWs will wear facial protection (medical grade face mask and eye protection ([goggles/face shield](#))) when providing care to suspect/confirmed COVID-19 patients.
- All HCWs will wear a medical grade face mask continuously, at all times in all areas of their workplace when a physical barrier (i.e., plexiglass) is not in place.
- The continuous use of eye protection (safety glasses) is optional for HCWs working in all non-high-risk clinical settings or when indicated by PCRA.
- Facial Protection should be immediately changed and safely disposed of whenever it is damaged, soiled/wet, and after care for any patient on Isolation Precautions.
- HCWs must take care not to touch the front of their facial protection. If the front of the facial protection is touched or the facial protection adjusted, HCWs must immediately perform hand hygiene.
- Face masks should not be worn below the chin and eye protection should not be pulled up on top of the HCW's head. Wearing PPE improperly increases the risk for cross contamination
- HCWs will leave the patient's room if they need to remove any piece of their facial protection.
- HCWs will follow all Infection Prevention and Control protocols including hand hygiene and the use of additional PPE when delivering patient care according to the IPC PCRA.
- When taking a break or eating a meal, the HCW must remove their facial protection as per the instructions outlined under the [IPC Guidance for Donning and Doffing Medical Grade Face Mask and Eye Protection](#). If the mask is not damaged, soiled/wet or contaminated, it should be stored safely for reuse.
- Eye protection is to be changed or cleaned and disinfected every time a mask is changed and when contaminated, soiled or wet.
- Physical distancing must be maintained while the facial protection is removed.
- Facial protection is donned and doffed as per the instructions outlined under the [IPC Guidance for Donning and Doffing Medical Grade Face Mask and Eye Protection](#)
- Face masks cannot be stored for reuse after leaving the room of a patient who is under isolation or after providing sequential care.
- Eye Protection needs to be cleaned and disinfected when mask removed, after providing sequential care, when leaving the patient care area. Eye protection needs to be stored in a clean area.

NOTE: Facial protection (face mask/N95 respirator and eye protection) does not need to be changed when

providing sequential care to COVID-19 (+) patients on dedicated units except when it becomes damaged/soiled/wet or when indicated according to PCRA.

Non-Clinical Settings

- All HCWs who do not work in a clinical setting will wear a medical grade face mask at all times in all areas of their workplace, except when in individual offices or workstations.
- HCWs must take care not to touch the front of their mask. If the front of face mask is touched or the face mask adjusted the HCW must immediately perform hand hygiene.
- Face masks should not be worn below the chin. Wearing PPE improperly increases the risk for cross contamination
- When taking a break or eating a meal, the HCW must remove their face mask per the guidance for extended and reuse below. If the mask is not damaged, soiled/wet or contaminated, it should be stored safely for reuse.
- Physical distancing must be maintained while the face mask is removed.
- A face mask is donned and doffed as per the instructions outlined under the [IPC Guidance for Donning and Doffing Medical Grade Face Mask and Eye Protection](#), before the HCW returns to work.

Red Phase

Clinical Settings

- All HCWs working in high-risk clinical settings (i.e. COVID-19 units, ERs, All ICUs, ORs, and COVID-19 Assessment Centres) will wear facial protection (medical grade face mask and eye protection ([goggles/face shield](#))) continuously, at all times when providing patient care as well as when providing indirect patient care, while in patient room such as meal delivery and environmental services when a physical barrier (i.e., plexiglass) is not in place to prevent transmission of droplets.
- All HCWs will wear facial protection (medical grade face mask and eye protection ([goggles/face shield](#))) when providing care to suspect/confirmed COVID-19 patients.
- All HCWs working in non-high risk clinical settings will wear facial protection (medical grade face mask and eye protection (safety glasses) continuously, at all times when providing patient care as well as when providing indirect patient care, while in patient room such as meal delivery and environmental services when a physical barrier (i.e., plexiglass) is not in place to prevent transmission of droplets.
- Facial protection should be immediately changed and safely disposed of whenever it is damaged, soiled/wet, and after care for any patient on Isolation Precautions.
- HCWs must take care not to touch the front of their facial protection. If the front of the facial protection is touched or adjusted, HCWs must immediately perform hand hygiene.
- Face masks should not be worn below the chin and eye protection should not be pulled up on top of the HCW's head. Wearing PPE improperly increases the risk for cross contamination
- HCWs will leave the patient's room if they need to remove any piece of their facial protection.
- HCWs will follow all Infection Prevention and Control protocols including hand hygiene and the use of additional PPE when delivering patient care according to the IPC PCRA.
- When taking a break or eating a meal, the HCW must remove their facial protection as per the guidance for extended and reuse below. If the mask is not damaged, soiled/wet or contaminated, it should be stored safely for reuse.
- Eye protection is to be changed or cleaned and disinfected every time a mask is changed and when contaminated, soiled or wet.
- Physical distancing must be maintained while the facial protection is removed.
- Facial protection is donned and doffed as per the instructions outlined under the [IPC Guidance for Donning and Doffing Medical Grade Face Mask and Eye Protection](#), prior to the HCW returning to work.
- Face masks cannot be stored for reuse after leaving the room of a patient who is under isolation or after providing sequential care.
- Eye Protection needs to be cleaned and disinfected when mask is removed, after providing sequential care,

when leaving the patient care area and is stored in a clean area.

NOTE: Facial protection (face mask/N95 respirator and eye protection) does not need to be changed when providing sequential care to COVID-19 (+) patients on dedicated units except when it becomes damaged/soiled/wet or when indicated according to PCRA.

Non-Clinical Settings

- All HCWs who do not work in a clinical setting will wear a medical grade face mask at all times in all areas of their workplace, except when in individual offices or workstations.
- The continuous use of eye protection ([Safety Glasses](#)) is optional for HCWs working in non-clinical settings.
- HCWs must take care not to touch the front of their mask. If the front of face mask is touched or the face mask adjusted the HCW must immediately perform hand hygiene.
- Face masks should not be worn below the chin. Wearing PPE improperly increases the risk for cross contamination
- When taking a break or eating a meal, the HCW must remove their face mask per the guidance for extended and reuse below. If the mask is not damaged, soiled/wet or contaminated, it should be stored safely for reuse.
- Physical distancing must be maintained while the face mask is removed.
- A face mask is donned and doffed as per the instructions outlined under the [IPC Guidance for Donning and Doffing Medical Grade Face Mask and Eye Protection](#), before the HCW returns to work.

Outbreak Facility/Unit

Clinical and Non-Clinical Settings

- All HCWs working in high-risk clinical settings in an outbreak facility (i.e. COVID-19 units, ERs, All ICUs, ORs, and COVID-19 Assessment Centres) will wear facial protection (medical grade face mask and eye protection ([goggles/face shield](#)) continuously, at all times in all areas of their workplace when a physical barrier (i.e., plexiglass) is not in place to prevent transmission of droplets
- All HCWs working in outbreak unit will wear facial protection (medical grade face mask and eye protection ([goggles/face shield](#)) continuously, at all times in all areas of their workplace when a physical barrier (i.e., plexiglass) is not in place to prevent transmission of droplets
- All HCWs will wear facial protection (medical grade face mask and eye protection ([goggles/face shield](#)) when providing care to suspect/confirmed COVID-19 patients.
- All HCWs working in non-high risk clinical settings and non-clinical settings in an outbreak facility will wear facial protection (medical grade face mask and eye protection ([safety glasses](#)) continuously, at all times in all areas of their workplace when a physical barrier (i.e., plexiglass) is not in place to prevent transmission of droplets.
- Facial protection should be immediately changed and safely disposed of whenever it is damaged, soiled/wet, and after care for any patient on Isolation Precautions.
- HCWs must take care not to touch the front of their facial protection. If the front of the facial protection is touched or adjusted, HCWs must immediately perform hand hygiene.
- Face masks should not be worn below the chin and eye protection should not be pulled up on top of the HCW's head. Wearing PPE improperly increases the risk for cross contamination
- HCWs will leave the patient's room if they need to remove any piece of their facial protection.
- HCWs will follow all Infection Prevention and Control protocols including hand hygiene and the use of additional PPE when delivering patient care according to the IPC PCRA.
- When taking a break or eating a meal, the HCW must remove their facial protection as per the guidance for extended and reuse below. If the mask is not damaged, soiled/wet or contaminated, it should be stored safely for reuse.
- Eye protection is to be changed or cleaned and disinfected every time a mask is changed and when contaminated, soiled or wet.

- Physical distancing must be maintained while the facial protection is removed.
- Facial protection is donned and doffed as per the instructions outlined under the [IPC Guidance for Donning and Doffing Medical Grade Face Mask and Eye Protection](#), prior to the HCW returning to work.
- Face masks cannot be stored for reuse after leaving the room of a patient who is under isolation or after providing sequential care.
- Eye Protection needs to be cleaned and disinfected when mask is removed, after providing sequential care, when leaving the patient care area and is stored in a clean area.

NOTE: Facial protection (face mask/N95 respirator and eye protection) does not need to be changed when providing sequential care to COVID-19 (+) patients on dedicated units except when it becomes damaged/soiled/wet or when indicated according to PCRA.

While this initiative will increase the use of PPE, in other jurisdictions, a consistent policy of continuous mask use has led to reductions in overall PPE usage. PPE conservation is critical, and a sustainable approach is required. Supplies are being monitored closely and guidance has been developed for emergency prioritization of PPE should a shortage occur. **It is recommended that HCWs minimize their mask use to two masks per shift where possible.**

Eye Protection (Safety Glasses/Goggles/Face Shields):

- Goggles provide the most reliable eye protection from splashes, sprays, respiratory droplets and aerosols and are recommended for use in high risk clinical settings.
- Face shields may be used as eye protection as an alternative to goggles.
- Face shields may be added to goggles for additional protection when there is a high risk of splash/spray i.e. high risk AGMP, such as intubation.
- Safety glasses may be worn as eye protection in non-high-risk clinical settings and non-clinical settings.
- When prescription safety glasses are worn in high risk areas a face shield must be worn as well.

Accessing Eye Protection

- Face Shields - Hospital provided only. Are available through local Area Central Stores/Logistics Departments
- Safety Glasses – Hospital provided or self sourced. Hospital provided are available through local Area Central Stores/Logistics Departments. Self sourced safety glasses can be obtained at the discretion of the HCW/Physician at their own expense.
- Goggles – Hospital provided or self sourced. Hospital provided are available through local Area Central Stores/Logistics Departments. Self sourced goggles can be obtained at the discretion of the HCW/Physician at their own expense.

NOTE: If self sourced, safety glasses and goggles must meet specifications established by Horizon in alignment with healthcare standards and the New Brunswick Occupational Health Safety Act. All Employees and Physicians requesting to self source safety glasses/goggles will be responsible to contact their Manager/Department Head to inform them of the plan to purchase their own eye protection. The Manager/Department Head as the “employer” [Appendix B](#) will be responsible to advise and provide the Employee/Physician with the specifications for safety glasses and/or goggles – [Appendix C](#).

IPC Guidance for Donning and Doffing Medical Grade Face Mask and Eye Protection

Donning & Doffing Medical Grade Face mask

Guidance for Donning Medical Grade Face Mask – Initial Use

- Clean hands.
- Put on medical grade face mask. Secure ties around head or loops around ears so that the mask stays in place.
- Fit the moldable band to the bridge of nose and ensure the mask fits snugly to face and below chin.

Guidance for Donning – Subsequent Use of Medical Grade Face Mask

- Clean hands.
- Slowly open your mask storage bag.
- Grasp the mask by the elastic ear loops/ties to remove it from the bag, ensure the outside then look to see of the mask is away from your face.
- Use the ear loops and ties to put it on and tuck it under your chin.
- Secure it to your face at the bridge of your nose.
- Clean hands.

Guidance for Doffing Medical Grade Face Mask with Loops for Continuous Use

- Clean hands.
- Remove the face mask by holding the ear loops.
- The front is contaminated, so remove slowly and carefully.
- After removing the mask, visually inspect it to determine if the mask has been damaged or is soiled/wet or contaminated. If damaged, soiled/wet or contaminated, the mask must be discarded.
- If the face mask is NOT damaged, soiled/wet or contaminated, it should be stored for re-use.
- Fold the mask in half (lengthwise or widthwise), so the outside surfaces are touching each other, carefully store in a paper bag labelled with your name and date. This will avoid destroying the shape of the mask and will prevent contamination.
- Clean hands.
- A disposable face mask can be worn for several hours if not damaged, soiled/wet or contaminated.

Guidance for Doffing Medical Grade Face Mask with Ties for Continuous Use

- Clean hands.
- Remove the face mask by untying the bottom ties and then the top ties. (If the ties cannot be undone without tearing the ties, the mask will be discarded).
- The front is contaminated, so remove slowly and carefully.
- After removing facemask, visually inspect to determine if the mask has been damaged or is soiled/wet or contaminated. If damaged, soiled/wet or contaminated the mask must be discarded.
- If the face mask is NOT damaged, soiled/wet or contaminated, it should be stored for re-use.
- Fold the mask in half (lengthwise or widthwise), so the outside surfaces are touching each other, carefully store in a paper bag labelled with your name and date. This will avoid destroying the shape of the mask and to prevent contamination.
- Clean hands.
- A disposable face mask can be worn for several hours if not damaged, soiled/wet or contaminated.

Donning & Doffing Eye Protection

Guidance for Donning Eye Protection (Goggles/Face Shield) - Initial Use

- Clean hands.
- Place eye protection over eyes and face and adjust to fit.

Guidance for Donning – Subsequent Use of Eye Protection

- Perform hand hygiene
- Don clean gloves
- Slowly open your Eye Protection storage container. If re-using goggles remove goggles by earpieces. If re-using face shield remove shield by grasping the head strap.
- Clean and disinfect the eye protection prior to re-use as per [IPC Cleaning and Disinfection Instructions for Eye Protection and Ordering Information](#).
- Place over eyes and face and adjust to fit.
- Remove gloves and clean hands.
- Perform hand hygiene when re-donning eye protection.
- Discard eye protection if signs of deterioration are found (straps compromised, difficult to see through, or visibly damaged).

Guidance for Doffing Face Shield:

- **Face Shield (Single Use)** – Single use full face shields are dedicated to individual HCW as surfaces of the shield, such as the foam piece and elastic/Velcro head band, cannot be adequately cleaned and disinfected between HCWs. Single use eye protection should be discarded after use unless following protocols for extended use or reuse.

Extended Use or Reuse – Reprocessing and reusing single use face shields for one HCW to use with multiple patients with COVID-19 for a limited time-period (multiple shifts).

- **Do not touch front of face shield.**
- Change mask and face shield as a unit of facial protection.
- Remove the face shield by tilting your head slightly forward, grabbing the rear strap and pulling it over your head, gently allowing the face shield to fall forward.
- Place face shield on designated table or surface.
- Cleans hands.
- Clean and disinfect the face shield when visibly soiled, when it is removed, such as when leaving an isolation room and prior to re-use as per [IPC Cleaning and Disinfection Instructions for Eye Protection and Ordering Information](#).
- Store face shield in a safe storage area to prevent accidental sharing between HCWs.

Note: The number of times a disposable face shield can be reprocessed is unknown; therefore, face shields should be closely examined prior to each reuse to ensure the integrity of the foam pad, elastic strap, and clarity of the visor.

- **Guidance for Doffing Safety Glasses/Goggles (Reusable)**
 - **Do not touch the front of the safety glasses/goggles**
 - Change mask and safety glasses/goggles as a unit of facial protection.
 - Reusable safety glasses/goggles must be cleaned and disinfected according to the manufacturer's reprocessing instructions before re-use.
 - Remove reusable safety glasses by earpieces and goggles grabbing the rear strap and pulling them gently over your head
 - Place safety glasses/goggles on designated table or surface.
 - Clean hands.
 - Clean and disinfect goggles when visibly soiled, when removed, such as when leaving an isolation room, and prior to re-use as per [IPC Cleaning and Disinfection Instructions for Eye Protection and Ordering Information](#).
 - Store safety glasses/goggles in a safe storage area.
 - Clean hands.
 - If not shared with other team members, label eye protection with your name and patient care area.
 - Eye protection can be worn by multiple HCWs after cleaning and disinfection but as a safe guard, must be cleaned and disinfected prior to re-use.

- **Face Shield (Reusable)**
 - **Do not touch front of face shield**
 - Change mask and face shield as a unit of facial protection.
 - Reusable Face Shield must be cleaned and disinfected according to the manufacturer's reprocessing instructions before re-use.
 - Remove the face shield by tilting your head slightly forward, grabbing the rear strap and pulling it over your head, gently allowing the face shield to fall forward.
 - Place face shield on designated table or surface.
 - Clean hands.
 - Clean and disinfect the face shield when visibly soiled, when it is removed, such as when leaving an isolation room and prior to re-use as per [IPC Cleaning and Disinfection Instructions for Eye Protection and Ordering Information](#).
 - Store Face Shield in a safe storage area.
 - Clean hands.
 - If not shared with other team members, label eye protection with your name and patient care area.
 - Eye protection can be worn by multiple HCWs after cleaning and disinfection but as a safe guard, must be cleaned and disinfected prior to re-use.

NOTE: Perform hand hygiene between steps if hands become contaminated and immediately after removing all PPE.

References

Mask Wearing 101: How to Use & Re-Use a Face Mask. Sarasota Memorial Healthcare System
<https://www.smh.com/blog/mask-wearing-101-how-to-use-re-use-a-face-mask>

Nebraska Medicine COVID-19 PPE Guidance. Extended Use and Limited Reuse of Disposable Facemasks, Respirators and Protective Eyewear
<https://www.nebraskamed.com/sites/default/files/documents/covid-19/COVID-Extended-Use-Reuse-of-PPE- and-N95.pdf?date=03182020>

Alberta Health Services: Guidelines for Continuous Masking in Healthcare Settings
<https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-ppe-continuous-use-guidance-masking.pdf>

Nova Scotia Health Authority: Healthcare Worker Masking Guidelines during COVID-19 Pandemic Frequently Asked Questions (FAQ)
http://policy.nshealth.ca/Site_Published/covid19/document_render.aspx?documentRender.IdType=6&documentRender.GenericField=&documentRender.Id=77988

CDC: Strategies for Optimizing the Supply of Facemasks
<https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/face-masks.html>

Alberta Health Services Continuous Use of Eye Protection (COVID-19); Frequently Asked Questions: December 24, 2020 <https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-ppe-faq.pdf>

Spectrum Health: [Eye Protection Guidelines & FAQ 10.22.20 1700](#)

Centers for Disease Control: Strategies for Optimizing The Supply of Eye Protection
<https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/eye-protection.html>

*Eye Protection Required During COVID-19 Pandemic

Ensure eye protection and respirator or medical mask compatibility so that there is no interference with the proper positioning of the eye protection or with the fit or seal of the respirator or mask.

	Safety Glasses	Goggles	Face Shields
		Goggles provide the most reliable practical eye protection from splashes, sprays, and respiratory droplets	Face shields are commonly used as an alternative to goggles. As opposed to goggles, a face shield can also provide protection to other facial areas
Pros	<ul style="list-style-type: none"> • Light weight • Comfortable to wear 	<ul style="list-style-type: none"> • Fit snugly particularly from the corners of the eye across the brow • Accommodate prescription glasses with minimal gaps 	<ul style="list-style-type: none"> • Covers majority of the face • Fits everyone
Cons	<ul style="list-style-type: none"> • Gaps around the eyes • Does not cover the rest of the face • May slide away from the face when bending forward (fit dependent) 	<ul style="list-style-type: none"> • Limits peripheral vision • Heavy and less comfortable • Does not cover the rest of the face 	<ul style="list-style-type: none"> • Gets warm • Gap below
When Worn	<ul style="list-style-type: none"> • Facility Outbreak/Local Area Lockdown - Mandatory <ul style="list-style-type: none"> ○ Continuously in all non-high risk COVID-19 clinical settings and non-clinical settings • Red Phase – Mandatory <ul style="list-style-type: none"> ○ Continuously in all non-high risk COVID-19 clinical settings ○ Optional in non-clinical settings • Orange Phase <ul style="list-style-type: none"> ○ When indicated by Point of Care Risk Assessment (PCRA) ○ Continuous wear optional in all non-high risk COVID -19 clinical settings and non-clinical settings • Yellow Phase <ul style="list-style-type: none"> ○ When indicated by PCRA ○ Continuous wear optional in all clinical settings 	<ul style="list-style-type: none"> • Facility Outbreak/Local Area Lockdown - Mandatory <ul style="list-style-type: none"> ○ When providing care to suspect/confirmed COVID-19 patients ○ Continuously in all high-risk clinical settings (i.e., COVID-19 Units, ERs, ICUs ORs, and COVID-19 Assessment Centers) • Red and Orange Phase- Mandatory <ul style="list-style-type: none"> ○ When providing care to suspect/confirmed COVID-19 patients ○ Continuously in all high-risk clinical settings (i.e., COVID-19 Units, ERs, ICUs ORs, and COVID-19 Assessment Centers) • Yellow Phase <ul style="list-style-type: none"> ○ When providing care to suspect/confirmed COVID-19 patients ○ When indicated by PCRA ○ Continuous wear optional 	

* Eye protection (Safety glasses, goggles and face shields) will be accessible to all HCWs

**Employer Definition and Responsibilities
WorksafeNB and the New Brunswick Occupational Health Safety Act**

New Brunswick Occupational Health Safety (OHS) Act; the Definition of an Employer is the following

- a) a person who employs one or more employees,
- b) a manager, superintendent, supervisor or any person having authority over another, or
- c) an agent of any person referred to in (a) or (b).

Employer responsibilities under the OHS Act:

1. Take every reasonable precaution to ensure the health and safety of your employees.
2. Comply with the OHS Act and regulations, and any order made in accordance with them.
3. Ensure that your employees comply with the Act and regulations, and any order made in accordance with them.

WorksafeNB:

Section 39 of General Regulation 91-191 states:

Eye, face, ears or neck protection

39. Where an employee is exposed to a hazard that may irritate or injure the eyes, face, ears or front of the neck, the employee shall use protective equipment that is appropriate to the hazard and that conforms to CSA standard CSA Z94.3-15, "Eye and face protectors" or a standard offering equivalent protection.

The safety eyewear must have the CSA number stamped on them (or part of the paperwork/packaging) accompanying the eyewear. WorksafeNB will accept an ANSI standard rating in lieu.

Horizon is responsible to ensure that any work carried out on their premises is done safely. Ultimately, if Employees/ Physicians are purchasing their own eye protection, the employer is responsible to ensure that it meets the criteria under OHS Legislation. HCWs and Physician's have the responsibility to do likewise.

Specifications for Self Sourced Goggles/Safety Glasses

Goggles

- Must cover HCWs eyes, fitting snugly particularly from the corners of the eye across the brow
- Accommodate prescription glasses with minimal gaps
- Must be indirectly vented with a manufacturer's anti-fog coating and scratch resistant
- Must have an adjustable band that can be firmly secured and does not become loose during clinical activity
- May be disposable or reusable (must have manufacturer's instructions for cleaning and disinfection and a process must be established)
- Cleaning and disinfection procedures must not physically compromise the goggles in any way, such as deformation or cracking

Safety Glasses

- Must cover HCWs eyes, extending the corners of the eye across the brow
- Accommodate prescription glasses with minimal gaps
- CSA-certified lenses with side shields
- Cleaning and disinfection procedures must not physically compromise the safety glasses in any way, such as deformation or cracking