



THE QUEEN ELIZABETH HOSPITAL

COVID-19 FACE MASK POLICY AND PROCEDURE

TABLE OF CONTENTS

1.	RATIONALE TO COVID-19 FACE MASK POLICY AND PROCEDURE.....	4
2.	APPLICATION	4
3.	CLASSIFICATION OF MASKS	5
3.2	MASKS WITH EXHALATION VALVES OR VENTS	6
4.	DEFINITIONS.....	8
5.	ORGANISATIONAL RESPONSIBILITIES	8
5.3	SECURITY OFFICERS	9
5.4	SAFETY WARDENS.....	9
6.	DISTRIBUTION OF MASKS – MEDICAL AND NON-MEDICAL	9
7.	PROCEDURES.....	10
7.2	EMPLOYEES IN DIRECT PATIENT CONTACT OR WORKING WITH ITEMS USED BY PATIENTS	10
7.3	EMPLOYEES IN NON-CLINICAL /ADMINISTRATIVE SETTINGS.....	11
7.4	NON-MEDICAL (CLOTH) MASK CONSIDERATIONS	12
7.5	FACE SHIELDS.....	12
7.6	USE OF MASKS DURING BREAK/ LUNCH	12
7.7	EXEMPTIONS FROM USE OF MASKS	13
8.	MEDICAL EXEMPTIONS/ACCOMODATIONS.....	13
9.	NON-COMPLIANCE.....	13
10.	AUTHORITY	14
11.	REVISIONS.....	14
12.	MONITORING AND REVIEW.....	14

THE QUEEN ELIZABETH HOSPITAL

THE QUEEN ELIZABETH HOSPITAL	
SUBJECT: COVID-19 Face Mask Policy and Procedure	REFERENCE: HR/ER/Jan2021
DEPARTMENT: Human Resources	EFFECTIVE: January 2021
APPROVED BY: Board of Management	REVISED:
DATE APPROVED:	AUDITED:

1. RATIONALE TO COVID-19 FACE MASK POLICY AND PROCEDURE

1.1.1 Transmission of COVID-19 is primarily via droplets which come in contact with mucus membranes. Masks are recommended as they serve as a barrier from direct entry into the respiratory system of these potentially infectious droplets.

1.1.2 Employees and visitors with no symptoms of COVID-19 who are in the incubation period could inadvertently infect patients and/or employees prior to developing symptoms.

1.1.3 Implementation of this policy may reduce the number of persons required to be quarantined or isolated in the event of exposure to COVID-19.

2. APPLICATION

2.1.1 This document applies to all visitors (contractors, service providers, vendors etc) to the hospital and all staff employed by the Queen Elizabeth Hospital Board including:

- i. Clinical and non-clinical staff
- ii. Contract staff
- iii. Students
- iv. Volunteers

2.1.2 All visitors and employees are required to wear a face mask when at any of the Queen Elizabeth Hospital's facilities.

2.1.3 All established Infection, Prevention and Control policies and procedures must continue to be followed.

3. CLASSIFICATION OF MASKS

	Classification of Mask	Usage	Effectiveness
1.	Washable, Cloth Face Coverings and Disposable (Non-Medical) Coverings	General Use – Must be worn in public and may be worn at work in the presence of others, even if physically distanced and when in common spaces to prevent surface contamination from droplets.	Prevents the wearer from spreading large respiratory droplets to others, and to their surroundings.
2.	Medical Grade Face Masks e.g. Surgical or Procedure Masks	Medical Procedures – Reserved for healthcare staff and patients and for those who perform specific work tasks requiring this level of protection.	Reduces the risk of COVID-19 transmission during healthcare interactions.
3.	Respirator Masks e.g. N95 Masks	High-Risk Work Procedures – Reserved for situations that pose a risk due to high concentration of infected respiratory droplets. This pertains to some types of medical examinations or procedures that might result in aerosolization of respiratory droplets.	Reduces the risk of COVID-19 transmission during healthcare interactions.

3.2 MASKS WITH EXHALATION VALVES OR VENTS

3.2.1 The World Health Organisation (WHO) **does not recommend** the use of masks with exhalation valves or vents.

3.2.2 Masks with exhalation valves or vents may not prevent the spread of COVID-19 from the wearer to others. The hole in the material may allow respiratory droplets to escape and reach others.

IMAGES OF FACE MASKS



Medical mask



N95 mask



Cloth mask

4. DEFINITIONS

4.1.2 “Direct patient contact” may be defined as all routinely anticipated face-to-face contact with patients, such as when:

- a. speaking with a patient in person
- b. entering a patient’s room
- c. transporting a patient throughout facility
- d. handing out medications
- e. performing a procedure on a patient
- f. participating in group patient activities
- g. serving food to patients

5. ORGANISATIONAL RESPONSIBILITIES

5.1 HEADS OF DEPARTMENT

5.1.1 It is the responsibility of all HODs to ensure their staff are conforming to the mask wearing policy where appropriate, while in the course of their duties.

5.2 ALL EMPLOYEES

5.2.1 In order to reduce the number of COVID-19 infections it is imperative that the Board of Management acquires support from **ALL** employees.

ALL employees are required to:

- a. Ensure meticulous adherence to hand hygiene.
- b. Ensure proper mask use and hygiene including wearing the mask as directed to cover the mouth and nose and not below the chin.
- c. Exercise strict avoidance of manipulation/touching of the mask to reduce the risk of contamination.
- d. Practise principles of physical distancing.

5.3 SECURITY OFFICERS

5.3.1 Security officers stationed at various locations of the QEH's facilities are responsible for ensuring that persons entering the compound are adhering to the stipulations of this policy as it relates to the wearing of face masks.

5.3.2 Employees who refuse to heed the advice of the security officers as it relates to the wearing of face mask will be reported to the relevant Executive Director for further management.

5.4 SAFETY WARDENS

5.4.1 Safety Wardens have been designated to assist with ensuring compliance with the Covid-19 Face Mask Policy and Procedure.

5.4.2 Safety Wardens are required to ensure that employees are correctly wearing their face mask when traversing the QEH's compound.

5.4.3 Employees who refuse to heed the advice of the Warden as it relates to the wearing of face mask will be reported to the relevant Executive Director.

6. DISTRIBUTION OF MASKS – MEDICAL AND NON-MEDICAL

6.1 The Procurement Department will ensure that medical face masks are distributed to Clinical Departments during the hours of 8:15 a.m. and 4:30 p.m. Monday to Friday.

- 6.2 After 4:30 p.m. and on weekends medical face masks will be distributed by the Nursing Services Department.
- 6.3 Non-medical (cloth) masks will be distributed by the Human Resources Department to those employees working in non-medical areas.
- 6.4 A maximum of two (2) non-medical (cloth) masks will be issued to each employee. Replacements may be issued as circumstances dictate.
- 6.5 Only procedural /surgical mask should be worn in the clinical setting.

7. PROCEDURES

7.1 ENTERING THE COMPOUND

- 7.1.1 All employees and visitors are required to wear a mask on entering the Hospital's compound through all authorized staff entrances.

7.2 EMPLOYEES IN DIRECT PATIENT CONTACT OR WORKING WITH ITEMS USED BY PATIENTS

- 7.2.1 Employees must wear a mask (non-medical) while on route to collect their surgical/procedural mask from their clinical location.
- 7.2.2 A maximum of two (2) procedural/surgical masks will be issued at the start of each shift.
- 7.2.3 Once the mask has been collected it must be worn at all times in the clinical area.

7.2.4 Masks must be worn correctly, covering the mouth and nose and should not be worn below the chin.

7.2.5 N95 mask should be worn when engaging in medical examinations or procedures that might result in aerosolization of respiratory droplets.

7.2.7 In the event that the mask becomes visibly soiled, saturated (wet) or damaged a new mask must be obtained from the relevant supervisory personnel.

7.2.8 Stock will be securely stored in each clinical setting.

7.3 EMPLOYEES IN NON-CLINICAL /ADMINISTRATIVE SETTINGS

7.3.1 Employees who work in non-clinical/administrative settings with no direct patient contact or patient items are required to wear a mask (non-medical) at all times.

7.3.2 Non-medical (cloth) masks should be immediately changed if the mask becomes soiled or damp or if there is a risk that the mask has become contaminated.

7.3.3 Mask must be worn correctly, covering the mouth and nose should not be worn below the chin.

7.3.4 Employees who are required to enter the clinical areas will be issued with procedural/surgical mask prior to entry to the location.

7.4 NON-MEDICAL (CLOTH) MASK CONSIDERATIONS

7.4.1 For non-medical (cloth) mask, a triple layer mask offers the best protection.

7.4.2 Employees should travel with more than one non-medical (cloth) mask so that it can be changed should it become wet, soiled or contaminated.

7.5 FACE SHIELDS

7.5.1 A face shield is not an adequate alternative to a mask. Employees must wear a mask to cover their nose and mouth.

7.5.2 An employee may wear a face shield in addition to a mask. The face shield provides helpful protection, such as for the eyes, but it does not fit closely over the nose and mouth to contain the spread of respiratory droplets.

7.6 USE OF MASKS DURING BREAK/ LUNCH

7.6.1 When taking a break or eating a meal the wearer should:

- a. Perform hand hygiene with soap and water or an alcohol-based hand rub.
- b. Remove the mask and place it on a clean surface such a paper towel or paper bag.
- c. After removing mask, visually inspect for contamination, distortion in shape/form. If soiled, saturated or damaged the mask should be discarded.
- d. Perform hand hygiene with soap and water or an alcohol-based hand rub after removing face mask and before eating.

- e. After finishing eating or drinking, replace the mask taking care to avoid touching the face or eyes.
- f. Perform hand hygiene with soap or water or an alcohol-based hand rub.

7.7 EXEMPTIONS FROM USE OF MASKS

- 7.7.1 Employees are exempted from wearing masks when working alone in individual offices.
- 7.7.2 Face mask must be worn, when leaving the office, meeting with other or walking the corridors.

8. MEDICAL EXEMPTIONS/ACCOMODATIONS

- 8.1 Employees who require medical accommodations with regard to the requirements of this policy should contact the Director of Human Resources.
- 8.2 Occupation Health and Safety through the Staff and Wellness Clinic will conduct the necessary investigations and/consultations and provide the relevant advice to the Director of Human Resources.

9. NON-COMPLIANCE

- 9.1 Given the severity of the COVID-19 pandemic non-compliance with the provisions of this policy will be addressed in accordance with the Terms and Conditions of Service and the Safety and Health at Work Act, 2005.
- 9.2 Supervisors/ Heads of Departments /Executive Directors are responsible for ensuring that employees comply with this policy.

- 9.3 Should an employee not have a medical reason to exempt them from complying with this policy, the Supervisor/Heads of Departments /Executive Directors shall:
- 9.3.1 Convene a meeting with the employee to discuss and understand why the employee is not adhering to the policy and ensure that the employee understands the policy.
 - 9.3.2 Reinforce that compliance is required.
 - 9.3.2 Issue a written warning for the offence.
- 9.4 The commission of a second breach of this policy may result in the officer being suspended without pay for a period of two (2) weeks.

10. AUTHORITY

- 10.1 The Human Resources Committee shall have the authority to approve any amendments to this policy as recommended by the Safety and Health Committee.

11. REVISIONS

- 11.1 The Board of Management has the sole right to renew and update this policy as the nature of the COVID-19 pandemic changes.

12. MONITORING AND REVIEW

- 12.1 The effectiveness of this policy shall be monitored by the Board of Management and the Safety and Health Committee.
- 12.2 This policy shall be reviewed as often as may be appropriate.