

Provincial Requirements for COVID-19 Personal Protective Equipment (PPE)

On April 1, 2020, Manitoba's COVID-19 Incident Command approved the implementation of universal personal protective equipment (PPE) for the province's health care workers during all instances involving the provision of direct patient care.

The changes described below are being made as part of Manitoba's escalating response to COVID-19 following evidence of community transmission within the province. In addition, staff within facilities are being screened for symptoms prior to the start of a shift and all staff are directed to self-monitor for symptoms as per provincial guidelines.

Implementation

It is understood that implementation of these changes will occur as facilities, settings and providers are able to establish appropriate stock and re-ordering processes for required PPE. Manitoba's COVID-19 Central Supply Chain Management is preparing to meet supply and distribution demands to enable an implementation across all settings and areas of the province **the week of April 13, 2020.**

These enhanced precautions are being implemented now in anticipation of further community spread. It is acknowledged that changes of this nature take time to implement, so we are starting the process now so that changes will be in place by the week of April 13, 2020.

Until universal PPE is in place, settings should continue to follow current Infection, Prevention and Control protocols.

PLEASE NOTE: The following change is to be implemented immediately:

- Gowns are to be used as per routine practices (e.g. MRSA) AND/OR with COVID positive patients AND/OR with patients with respiratory symptoms.
- Where possible DISINFECT eye protection at the end of the shift for re-use to preserve our supply, otherwise discard

PLEASE NOTE: The following change will be implemented in Acute Care settings as soon as operationally possible:

- In light of emerging research on the sterilization of N95 respirators, housekeeping will begin to collect gently used N95 respirators from all clinical areas. Acute Care settings will identify a process for the collection of gently used N95 respirators in the doffing areas on your unit.
- Soiled, wet, damp, or stained N95 masks may not be placed in the bin or bag, and should be discarded as per current practice.

Provincial Requirements for COVID-19 PPE

PPE requirements for specific settings and specific providers are outlined in the PPE slides available at <https://sharedhealthmb.ca/covid19/providers/> subsection - **Personal Protective Equipment**.

These guidelines supersede all previous direction and are to be applied consistently across the province by all organizations and all providers, by the week of April 13, 2020, with the exception of those specific settings, specific activities and specific providers where additional PPE is necessary as outlined.

All PPE requirements have been developed with the safety of staff as the top priority.

Manitoba's requirements are consistent with national and international standards and have been approved by Provincial COVID-19 Infection Prevention and Control (IP&C) and Occupational and Environmental Safety and Health (OESH).

This is an evolving situation and guidelines will be updated as necessary and clearly communicated.

Questions related to the PPE requirements may be directed to your manager or supervisor. If your manager or supervisor are not able to resolve your question, they will consult with the appropriate infection, prevention and control practitioner.

Regional health authorities and Service Delivery Organizations remain responsible for any required education and are responsible for implementation, monitoring and re-order.

Universal PPE Guidelines

- The following guidelines apply across all regions of the province and should be followed consistently (unless specific instructions state otherwise) in the following settings:
 - Acute Care
 - Long-Term Care – applies to settings such as:
 - Personal Care Homes
 - Supportive Housing
 - Residential Care
 - Group Homes
 - Health Centres
 - Outpatient Settings/Community Clinics – applies to settings such as:
 - Primary Care Clinics
 - Nursing Stations
 - Outpatient Departments
 - Community IV Program
 - Addictions Services
 - In Home Care/Services – applies to settings such as:
 - Home Care
 - Public Health
 - Families First

- Community Mental Health
- Family Services

Administrative Tasks (No Direct Contact with Patients or the Public)

- Staff performing administrative tasks that do not involve contact with patients or the public DO NOT require PPE. Staff shall use physical distancing (6 feet/2 meters) and perform regular hand hygiene including upon entry to the facility and before/after each contact with health care workers or health care environments.

Health Care Workers who Work Across Administrative and Clinical Settings

- Health care workers in areas like security, clinical education, information and communications technology and facilities management shall following the appropriate PPE for the setting and area in which they are present.

Direct Patient, Client and Resident Interactions (Across all Settings)

- Procedure masks, eye protection and gloves shall be used for all direct patient, client and resident interactions unless otherwise stated in specific instructions.
- Any item of PPE that is doffed **MUST** be replaced by a clean item.
- Extended use of the same procedure masks and eye protection is recommended and shall be used with multiple patients, clients or residents during a single shift. *Specific exceptions exist for N95 respirators used for AGMPs.
 - Mask should be changed if it becomes wet, damaged or soiled
 - Eye protection should be changed if it becomes wet, damaged or soiled
 - Eye protection should be disinfected and can be re-used or discarded if unable to disinfect at the end of shift
 - For health care workers providing in home care, eye protection shall be removed while driving. Specific instructions are provided.
- Gloves shall be changed with each new patient, client or resident encounter.
 - **NOTE:** Gloves are not required in reception areas. Hand hygiene shall be performed and disinfectant wipes used to keep the environment clean.
 - **NOTE:** Gloves are NOT required for staff or visitor screening. Proper hand hygiene should be performed.
- Hand hygiene shall be performed before and after donning and doffing gloves as well as before and after contact with a patient, client or resident or contact with a patient, client or resident environment without gloves.

- Gown shall be used according to “routine practices” **AND** for COVID-19 positive patients, clients or residents **AND** for patients, clients or residents with respiratory symptoms.
 - Gown should be changed if it becomes wet, damaged or soiled
 - Gown shall be changed between patients, clients or residents **EXCEPT** on units or wards dedicated to COVID-19 patients.
 - **NOTE:** An exception is made for staff who are directly involved in screening visitors, screening staff prior to entry **AND** for staff performing NP Swabs at COVID-19 designated testing locations. For these settings, extended use of the same gown is recommended and shall be used with multiple patients during a single shift. Gown shall be changed if it becomes wet, damaged or soiled.
 - On COVID-19 wards or units, the same gown shall be worn at all times. **DO NOT** remove while on the unit unless wet, soiled or damaged. Remove gown prior to leaving the unit.

Aerosol Generating Medical Procedures (AGMPs)

- N95 respirators shall be used for [Aerosol Generating Medical Procedures \(AGMPs\)](#) only. (List of AGMPs may be revised based on future emerging evidence and in consultation with Shared Health and Infection Prevention and Control). Follow [Provincial Guidance](#). Minimize the number of people in the room.
 - After an AGMP, the PPE **DOES NOT** have to be changed if the health care worker is providing care to multiple COVID-19 patients on the same COVID-19 unit.
 - The PPE **MUST** be changed when moving to a different unit.
- Any item of PPE that is doffed **MUST** be replaced by a clean item.

PPE Instructional Resources

Instructional materials for [donning](#) and [doffing](#) are available. Videos on [donning](#) and [doffing](#) are also available.

A list of [aerosol generating medical procedures \(AGMPs\)](#) is available and will be updated as required.

Instructional materials for AGMPs are also available. This video shows the procedure for donning and doffing PPE required for an AGMP (including N95 respirator).

<https://www.youtube.com/watch?v=syh5UnC6G2k>

Note: the video differs in one key point, where this isn't an anteroom, health care workers **MUST** doff the face protection and respirator outside the room. This is outlined here (page 13):

<https://sharedhealthmb.ca/files/infection-prevention-and-control-learning-booklet.pdf>