



TITLE

**USE OF MASKS DURING COVID-19**

SCOPE

Provincial

DOCUMENT #

HCS-267

APPROVAL AUTHORITY

Emergency Coordination Centre

INITIAL EFFECTIVE DATE

July 15, 2020

SPONSOR

Personal Protective Equipment Task Force

REVISION EFFECTIVE DATE

September 23, 2022

PARENT DOCUMENT TITLE, TYPE, AND NUMBER

Not applicable

SCHEDULED REVIEW DATE

September 23, 2023

**NOTE:** The first appearance of terms in bold in the body of this document (except titles) are defined terms – please refer to the Definitions section.

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## OBJECTIVES

- To clarify and provide decision support for masking requirements in an **Alberta Health Services (AHS) facility** (e.g., hospitals, continuing care, urgent care) or **AHS setting** (including community settings and home care) for **AHS People**.
- To provide direction on the use of masking strategies that will help in preventing the transmission of COVID-19.
- To provide guidance to **patients, designated family/support persons**, and visitors who are required to wear a mask when entering or in AHS facilities to help prevent the spread of COVID-19.

## PRINCIPLES

Continuous masking can function either as source control (being worn to protect others) or part of **personal protective equipment (PPE)** (to protect the wearer) to prevent or control the spread of COVID-19 and other respiratory viruses. Working collaboratively, we shall ask all individuals to assist us in limiting the spread of COVID-19 and other viruses through the use of masks/respirators in AHS facilities.

AHS requires continuous masking by **health care providers** who work in AHS facilities or AHS settings. AHS promotes education (e.g., AHS [Information for Albertans](#)), prevention strategies, and public awareness to prevent the spread of COVID-19 to health care providers, patients, designated family/support persons, and visitors.

## APPLICABILITY

Compliance with this document is required by all Alberta Health Services employees, members of the medical and midwifery staffs, students, volunteers, and other persons acting on behalf of Alberta Health Services (including contracted service providers as necessary).

## ELEMENTS

### 1. Points of Emphasis for AHS People

- 1.1 AHS People are required to continuously mask in an AHS facility or AHS setting when they are in an area where they may come into direct contact with patients, patient belongings, patient care items, designated family/support persons, or visitors (e.g., patient care areas, elevator, common areas, gift shops) and where required, as per the AHS [Point of Care Risk Assessment \(PCRA\)](#).
  - a) Patient care items refers to any item (clean or soiled) that has been in contact with a patient or may come into contact with a patient.
- 1.2 AHS People who work in areas with no direct contact with patients or patient items (e.g., corporate settings, health records departments, laboratory services) are required to wear a mask continuously in all areas of their workplace unless they are at a work space separated by at least two (2) metres, separated by a physical barrier, or working alone in an individual office.
  - a) Only in an administrative setting (e.g., Southport Tower, Seventh Street Plaza) may AHS People choose to wear a non-procedure mask (e.g., their own clean cloth mask).
  - b) When acting in their capacity as AHS People outside of an AHS facility, AHS People shall follow the masking requirements at that location.
- 1.3 Where required by the AHS [Point of Care Risk Assessment \(PCRA\)](#), AHS People should always use the **N95** respirator model for which they were fit-tested. **KN95** respirators are available as an alternative to a procedure mask in some settings and do not require fit-testing. KN95 respirators should never replace a fit-tested N95 respirator where required as per the AHS [Point of Care Risk Assessment \(PCRA\)](#).
- 1.4 AHS People shall be trained in the correct use of any PPE (including masks) that is required for their role. Hand hygiene must be performed in accordance with the AHS [Hand Hygiene Policy](#) and [Procedure](#).
- 1.5 AHS people who are **unable to mask** shall inform their Manager, as per the AHS [Workplace Accommodation Policy](#).
- 1.6 AHS People shall follow the AHS [Interim IPC Recommendations during COVID-19](#), including hand hygiene and the use of additional PPE equipment when delivering patient care, in accordance with the AHS [Point of Care Risk Assessment \(PCRA\)](#).

## 2. Points of Emphasis for Patients, Designated Family/Support Persons, and Visitors

2.1 When entering an AHS facility, [patients, designated family/support persons, and visitors](#) shall be informed of the requirement for continuous masking, asked to perform hand hygiene, and provided with a procedure mask (if they do not have their own disposable, clean, and intact mask/respirator). This information may include but is not limited to:

- a) verbal instructions by AHS People;
- b) manufacturer's instructions;
- c) AHS websites;
- d) posters and QR codes; or
- e) AHS [COVID-19 Seal Checks for Disposable KN95 Respirators](#).

2.2 Designated family/support persons and visitors in AHS facilities must wear a procedure mask or their own disposable, clean, and intact mask/respirator at all times in all areas of the building, unless exempt as per Section 3 below.

2.3 Patients, designated family/support persons, and visitors should be provided education or resources on:

- a) the use of masks;
- b) hand hygiene;
- c) donning and doffing masks (e.g., when to remove, change, or discard); and
- d) if the mask becomes damp, soiled, or damaged, the mask must be immediately discarded in a garbage container.
  - (i) A new mask shall be provided by the appropriate program or site.
  - (ii) Hand hygiene must be performed immediately [before donning, and before and after doffing a mask](#) as per Infection Prevention and Control (IPC) recommendations.

2.4 Refer to Section 8 below for masking requirements for designated family/support persons and visitors.

## 3. Masking Exemptions

3.1 Patients, designated family/support persons, and visitors are considered unable to mask if they:

- a) are under two (2) years old; or

- b) are unable to place, use, or remove a mask without assistance.
- 3.2 Patients, designated family/support persons, and visitors are not required to mask when:
- a) providing or receiving care or assistance where a mask would hinder that care or assistance;
  - b) outdoors, and separated from others by two (2) metres; or
  - c) there is a need to temporarily remove their mask for the purposes of:
    - (i) receiving a service that requires the removal of their mask;
    - (ii) an emergency or medical procedure;
    - (iii) to verify identity;
    - (iv) consuming food or drink while remaining seated; or
    - (v) providing entertainment (e.g., singing group or band) and remaining separated by two (2) metres.

#### 4. Masking Requirements for Health Care Providers

- 4.1 Health care providers who are required to mask as per Section 1.1 above shall follow routine practices, hand hygiene, and wear a mask continuously as per the AHS [Guidelines for Continuous Masking](#). Additional PPE may be required based on the AHS [Point of Care Risk Assessment \(PCRA\)](#) and [Joint Statement: COVID-19 and Personal Protective Equipment](#).
- 4.2 Additional PPE guidance is provided to health care providers working in areas assessing and triaging individuals with asymptomatic or suspected/confirmed COVID-19 and for outbreak settings. Refer to the AHS [Personal Protective Equipment \(PPE\) COVID-19](#) web page.
- 4.3 For health care providers working in home care or congregate care settings, the practice of continuous masking and using appropriate PPE is required, as per the AHS [Guidelines for Continuous Mask and Eye Protection Use in Home Care and Congregate Living Settings](#).

#### 5. Masking Requirements for Adult Inpatients

- 5.1 Adult inpatients do not require continuous masking in their bed space.
- a) Upon their request, inpatients shall be supplied with a procedure mask.
  - b) Health care providers should offer the inpatient a procedure mask to use while the inpatient is receiving care, if the mask will not hinder that care.

- 5.2 Adult inpatients, when leaving their bed space or moving within other areas of the AHS facility (e.g., inpatients leaving their room for a procedure or accessing common areas), shall continuously mask.
- a) If adult inpatients are unable to mask or **refuse to mask**, the health care team should work collaboratively with them to find the most appropriate and safest solution for the situation, as per the AHS [How to Support Mask Wearing COVID-19 Worker Supports](#).
  - b) Adult patients in congregate care settings are not required to mask within these settings. Refer to the AHS [Guidelines for Continuous Mask and Eye Protection Use in Home Care and Congregate Living Settings](#) for additional information.
- 5.3 All adult inpatients (asymptomatic and symptomatic) should be provided with education by a health care provider on appropriate masking within their care setting and in consideration of their medical condition.

## 6. Masking Requirements for Adult Outpatients

- 6.1 All [adult outpatients](#), when entering an AHS facility, shall be asked to perform hand hygiene, will be provided with a procedure mask (if they do not have their own disposable, clean, and intact mask/respirator), and informed of the requirement to wear a mask. Adult outpatients may be referred to or provided additional information and resources as outlined in Section 2.1 of this Directive.
- a) The mask shall be worn for the duration of their visit unless instructed to remove by the health care provider for the purposes of services or treatment.
  - b) Patients receiving home care services in a home setting may be asked to mask. If the patient chooses not to wear a mask the patient shall not be denied care and the health care provider should review their PCRA and adjust PPE accordingly.
- 6.2 Procedure masks may be provided at a screening point or by the specific program or site if there is no screening area.
- 6.3 If an adult outpatient requires or is awaiting non-urgent/non-emergent care and is unable or refuses to mask, they may be, at the discretion of the **most responsible health practitioner (MRHP)**:
- a) offered access to virtual care if available; or
  - b) receive care on-site using best efforts to keep AHS People and other patients/visitors safe (e.g., offering a face shield and escorting the individual directly to a private examination room).
- 6.4 In exceptional circumstances where an adult outpatient who is presenting for non-urgent/non-emergent care refuses to mask, they may be asked to leave an

AHS facility. This decision should be made by the MRHP and must be balanced with ensuring the safety of the patient and the acuity of the patient's needs.

- 6.5 Adult outpatients who screen positive by answering yes to any question on the COVID-19 screening for [COVID-19 symptom criteria](#) shall be provided direction by the health care provider on appropriate masking and in consideration of their medical condition.

## 7. Masking Requirements for Pediatric Patients

- 7.1 As a general principle, [patients from three \(3\) to 18 years of age](#) are expected to wear masks to appointments at AHS facilities (including emergency departments, urgent care centres, and outpatient clinics) or when visiting others at risk.
- a) Wearing a mask may not be appropriate or tolerated for a small percentage of children. The health care team should work collaboratively with the parent/guardian to find the most appropriate and safest solution for the situation.
- b) For those children over three (3) years of age who can tolerate a procedure mask, provide a child-appropriate procedure mask or an adult procedure mask adjusted to fit the child. As child-sized masks will be limited in availability, adult-size masks should be used for older/larger children and 'solutions' such as in this [video](#) can be used to adjust adult masks to fit a child.
- 7.2 For infants and toddlers who are two (2) years of age and under, masks are not recommended. For these children, consider alternative strategies to keep them calm, safe (e.g., in a stroller, infant carrier, parent's/guardian's arms), and faced towards the parent/guardian to minimize droplet spread.
- 7.3 Families should maintain two (2) metres of physical distance from others and try to prevent children from wandering.

## 8. Masking Requirements for Designated Family/Support Persons and Visitors

- 8.1 All [designated family/support persons](#) and visitors entering an AHS facility shall be asked to perform hand hygiene, will be provided with a mask, and informed of the requirement for continuous masking in all areas of the building. Designated family/support persons and visitors may wear their own disposable, clean, and intact mask/respirator when entering an AHS facility.
- a) Designated family/support persons and visitors must be provided with equivalent PPE used by AHS People appropriate for the care area in an AHS facility.
- (i) Designated family/support persons and visitors who are supporting or visiting with a patient having, or suspected to have, [COVID-19](#) must be provided with an AHS-issued KN95 or N95 respirator if they do not have their own.

- For instructions on how designated family/support persons and visitors should assess if the AHS-issued KN95 or N95 respirator is well-fitted, AHS People should refer them to the AHS [COVID-19 Seal Checks for Disposable KN95 Respirators](#) and manufacturer's instructions.
- (ii) Designated family/support persons and visitors must comply with PPE requirements as directed by AHS People, at all times.
- b) For guidance on how to seal-check their own KN95 or N95 respirator, refer designated family/support persons and visitors to the AHS [COVID-19 Seal Checks for Disposable KN95 Respirators](#). Additional information can be found in the manufacturer's instructions.
- 8.2 Designated family/support persons and visitors shall continuously wear their mask for the duration of their visit in an AHS facility.
- 8.3 All designated family/support persons and visitors shall follow the direction on the [Provincial Designated Family/Support Person and Visitor Screening Questionnaire for all AHS Sites](#).
- 8.4 Patients requiring health care shall not be refused care if their designated family/support person or visitor is unable or refuses to mask.
- a) For those designated family/support persons or visitors who are unable to mask, the health care team should work collaboratively with them to find the most appropriate and safest solution for the situation, as per the AHS [How to Support Mask Wearing COVID-19 Worker Supports](#).
- b) Designated family/support persons and visitors who refuse to mask shall not be allowed access to the AHS facility.
- (i) In exceptional circumstances and on a case-by-case basis, the health care team may work collaboratively with the patient and the designated family/support person to find the most appropriate and safest solution for the situation, as per the AHS [How to Support Mask Wearing COVID-19 Worker Supports](#), when the designated family/support person is required to support the patient in their care (e.g., parent accompanying a young child).
- (ii) If designated family/support persons or visitors refuse to comply with masking requirements in an AHS facility, site processes should be followed, which may include notification to Protective Services (if on-site) or to local Police (if appropriate), at the discretion of the Site Leader or designate.
- 8.5 Designated family/support persons and visitors who are supporting or visiting a patient in a congregate care setting with communication challenges (e.g., hearing

concerns, dementia) where continuous masking inhibits communication, may remove the mask while in a private space in the AHS facility if:

- a) the patient is not confirmed or suspected to have COVID-19;
- b) the patient consents; and
- c) a distance of two (2) metres can be maintained from the patient, other patients, health care providers, and visitors in the room.

8.6 Health care professionals shall provide information and education to the designated family/support persons and visitors about potential risks to other patients, health care professionals, and visitors if they remove their mask while supporting or visiting a patient.

## 9. Documentation

9.1 The health care provider should document discussions and the provision of alternate patient services (if applicable) on the patient's **health record**, as appropriate.

- a) Documentation should include any concerns or noteworthy circumstances regarding the patient and visitation, including the designated family/support person, as applicable.

## DEFINITIONS

**AHS People** means anyone who provides care or services, or who acts on behalf of AHS, which may include AHS board members, AHS employees, AHS Medical Staff members (physicians, dentists, oral and maxillofacial surgeons, and podiatrists), AHS midwifery staff members, other Allied Health professionals with an AHS appointment and privileges, students, volunteers, researchers working with AHS or studying AHS staff or patients.

**Alberta Health Services (AHS) facility** means any facility, property, or ground owned, operated, leased, or funded by AHS.

**Alberta Health Services (AHS) setting** means any environment where treatment/procedures and other health services are delivered by, on behalf of or in conjunction with, Alberta Health Services.

**Designated family/support person** means the individual(s) identified by the patient that they want involved in their health planning and decisions. They can be a relative, legal guardian, close friend, and/or informal caregiver (see *Designated Family/Support Person and Visitation Guidance* for details regarding this role).

**Health care professional** means an individual who is a member of a regulated health discipline, as defined by the *Health Professions Act* (Alberta), and who practises within scope and role.



**Health care provider** means any person who provides goods or services to a patient, inclusive of health care professionals, staff, students, volunteers and other persons acting on behalf of or in conjunction with Alberta Health Services.

**Health record** means the collection of all records documenting individually identifying health information in relation to a single person.

**KN95** means a respirator that is expected to filter at least 95% of airborne particulars. KN95 respirators are imported from China, Korea, or Europe and may not have been tested and certified by the US National Institute for Occupational Safety and Health (NIOSH).

**Most responsible health practitioner (MRHP)** means the health practitioner who has responsibility and accountability for the specific treatment/procedure(s) provided to a patient and who is authorized by AHS to perform the duties required to fulfill the delivery of such a treatment/procedure(s) within the scope of their practice.

**N95** means a respirator that has been evaluated, tested and certified by the US National Institute for Occupational Safety and Health (NIOSH). A N95 respirator filters at least 95% of airborne particulars and is not resistant to oil.

**Patient** means an adult or child who receives or has requested health care or services from Alberta Health Services and its health care providers or individuals authorized to act on behalf of Alberta Health Services. This term is inclusive of residents, clients and outpatients.

**Personal protective equipment (PPE)** means any specialized clothing or safety items worn by individuals prior to contact with potential or identified hazards, such as from a direct exposure to blood, tissue, and/or body fluids.

**Refuse to mask** means individuals not wearing a mask in an AHS facility who do not meet the exceptions to the masking requirement as outlined in this Directive.

**Unable to mask** means individuals who meet the exceptions to the masking requirement as outlined in this Directive.

## REFERENCES

- Alberta Health Services Governance Documents:
  - [Family Presence: Designated Family/Support Person and Visitor Access Policy \(#HCS-199\)](#)
  - [Hand Hygiene Policy \(#PS-02\)](#)
  - [Hand Hygiene Procedure \(#PS-02-01\)](#)
  - [Workplace Accommodation Policy \(#1121\)](#)
- Alberta Health Services Resources:
  - [COVID-19 Relaunch Playbook](#)
  - [COVID-19 Seal Checks for Disposable KN95 Respirators](#)
  - [Family/Designated Support Persons & Visitors of Patients](#)
  - [Fit for Work](#)
  - [Guidance to Help Make Continuous Masking Work for You](#)

- [Guidelines for Continuous Mask and Eye Protection Use in Home Care and Congregate Living Settings](#)
- [Guidelines for Continuous Masking](#)
- [How to Support Mask Wearing COVID-19 Worker Supports](#)
- [Information for Albertans](#)
- [Interim IPC Recommendations during COVID-19](#)
- [IPC Resources for Ambulatory Care Clinics \(including Lab Collection sites\) during COVID-19 Pandemic](#)
- [Personal Protective Equipment \(PPE\) COVID-19](#)
- [Point of Care Risk Assessment \(PCRA\)](#)
- [PPE 13 min video – Donning and Doffing](#)
- [PPE Taskforce Guidance - Continuous Masking and Patient Care \(January 22, 2022\)](#)
- [Provincial Designated Family/Support Person and Visitor Screening Questionnaire for all AHS Sites](#)
- Non-Alberta Health Services Documents:
  - [Children mask? How to fit adult mask to kids](#)
  - [COVID-19 Self-Assessment for Albertans](#)
  - [COVID-19 Symptoms and Testing](#)

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