

Options and Adaptations for Healthcare Providers to Address Patient Communication Challenges in Acute Care, Ambulatory Care and Community Settings

Note: This information sheet does not apply to continuing care settings or to aerosol generating medical procedures (AGMP) where a fit-tested N95 respirator must be worn. **Patient*** includes the patient receiving care, as well as essential family care provider or support person required for the care of the patient. If you have any questions or comments contact IPC at ipsurvstdadmin@ahs.ca.

Best practice recommendations

- Refer to the latest PPE guidance documents on the [COVID-19 resource aggregator](#) for complete details on required PPE.
 - This information sheet provides options/adaptations for healthcare providers in acute care, ambulatory care and community settings to support communication with patients* when continuous masking interferes with the efficacy of intervention or significantly impairs the interaction, e.g., Significantly interferes with communication when caring for patients* with communication or cognitive challenges where visualization of the healthcare provider's mouth and face is essential to meet care needs.
- The information provided assumes that all other relevant recommendations are being followed, e.g., **Management of Ambulatory Care Patients (located on Insite)**, [physical distancing](#), [routine practices](#), e.g., [point of care risk assessment](#) (PCRA), [hand hygiene, cleaning and disinfection](#), and any [additional precautions](#).
- This information sheet does not cover staff issues with continuous masking or patient* masking, except as needed to accommodate adaptations.

1. Personal protective equipment adaptations

- 1.1. A transparent face shield which extends past the chin or a clear mask may be used in place of a procedure mask to help address communication challenges, refer to **Table 1** for details.
 - 1.1.1. If the patient has COVID-19 symptoms or other risk factors, maintain continuous masking and eye protection and do not consider adaptations for communication purposes.
 - 1.1.2. A transparent face shield without a procedure mask may be considered when the patient*:
 - does not have symptoms or risk factors of COVID-19, or on modified respiratory, droplet or contact and droplet precautions; and
 - requires adaptations for communication purposes.
 - 1.1.3. If possible, have the patient wear a mask or face shield.
- 1.2. Face shields available through AHS are a minimum 19cm, or 7 ½ inches long and provide adequate protection for eyes, nose, mouth and face.
 - Instructions on how to safely [reuse](#) eye protection including face shields are available.
- 1.3. Procedure masks that allow visualization of the mouth, lips and teeth and meet ASTM standards will be available by March 17, 2021 through Contracting, Procurement and Supply Management (CPSM). These masks:
 - May be worn in place of a procedure mask to address patient communication challenges.
 - Supply/volume available is not sufficient to support general usage for continuous masking requirements provincially.
 - Costs more than a regular procedure mask.
 - Can be ordered from CPSM through local warehouse.

For more information contact
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Table 1: Description of transparent face shields and masks

Product	Sample image	Description
Standard face shield		<ul style="list-style-type: none"> Fully inventoried All standard face shields supplied through CPSM inventory and to supply carts are a minimum 7 ½ inches, or 19cm, in length, and can be safely used. The brand of face shield may change based on available stock but all are approved for use For ordering a standard face shield contact your local site services staff. Ordering numbers will vary by zone/area
Contoured face shield		<ul style="list-style-type: none"> Limited supply Flexible and moves with user, anti-fog, and contoured to face Tried by speech language pathology at one location with successful results. See next page for ordering information
Mask Procedure with Window ASTM Level 2 MFTW-25-M2 MedSup Canada Medical Equipment Face Masks (medsupmedical.com) (medical grade version is not shown on website)		<ul style="list-style-type: none"> Available from inventory ASTM Level 1 rated for fluid but passes filtration rates of level 2/3 Tried by speech language and audiology departments at one sites with positive results For ordering, contact your local site services staff. Ordering numbers will vary by zone/area

2. Information for ordering contoured face shields from CPSM

2.1. AHS sites order the contoured face shield from CPSM

- This ordering information is for AHS sites only. Sites outside of AHS may order contoured face shields directly from the [vendor](#).
- AHS sites, complete the table below.
- Send the request via email with the subject line “Contour Shield Orders” to: Kerry Coroy (kerry.coroy@albertahealthservices.ca).

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Table 2: Contoured face shield ordering instructions

Order Form		
Contact name		
Contact number		
Department functional center		
Full mailing address		
Item(s) Requested		
Item Number and Description	Quantity Requested	Sample
Oracle # 366139 shield face full foam bettershield (Full contoured face shield)	____ box of 10 Cost: \$32.00/box	

3. Cleanable transparent physical barriers, e.g., Plexiglas

- Barriers have been used in settings where the type of care provision and/or the infrastructure of the areas support the construction of a cleanable barrier to be used between the care provider and patient* to reduce droplet exposure. This includes settings where patient care is not provided or where healthcare providers do not have direct patient contact. They may also be used in patient care environments when it is determined that the healthcare provider can deliver therapeutic intervention that meets the patient's needs from behind a transparent physical barrier. Continuous masking and eye protection directives still apply.

3.1. When using the [transparent physical barrier](#) consider the following:

- Consult with operational leadership before purchase and installation of barriers to align with AHS goals to minimize infrastructure changes.
- Choose a barrier with dimensions, e.g., width and length to provide a physical barrier between the tallest healthcare provider using the barrier and the patient*, i.e., provide a barrier that covers nose and mouth area of the healthcare provider.
- Portable barriers are less preferred; however, they may be used if they've already been purchased. Considerations include accessibility, frequency of use, dimensions as described above, cleanability, ease of handling and transport, weight and stability, and storage.
 - If there are safety concerns do not use the portable barrier.
 - Refer staff questions about the safety of using a portable barrier to WHS.

3.2. Clean the transparent barrier daily and when visibly soiled with AHS provided products intended for that purpose, e.g., [ready-to-use disinfectant wipes](#).

4. Other communication supports

4.1. Suggestions to enhance communication may include use of pen and paper, [pocket talkers](#), [hearing loop systems](#), and other electronic communication supports such as apps that convert speech to text.

- Handle communication supports with clean hands.

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- Clean communication supports such as communication books, hearing devices, **Cleaning and disinfecting the iPad Patient-Family Virtual Visitation (see Insite)** and electronic devices after use.

Note: The Canadian Hard of Hearing Association offers resources and supports and can be contacted by email at info@chha-ed.com or by phone at 780-428-6622.

5. Sample scenarios to demonstrate how to apply recommendations

Note: These scenarios only apply when healthcare providers require options/adaptations to support communication with patients when continuous masking interferes with the efficacy of intervention or significantly impairs the interaction.

5.1. Can staff wear a face shield without a procedure mask and be within 2 meters of a patient cared for using [routine practices](#), whether or not the patient is wearing a mask?

Answer: Yes, staff may wear either a standard or contoured face shield without a procedure mask to support communication with a patient cared for using routine practices if:

- Relevant recommendations are followed, i.e., screening protocols are in place and the patient is not COVID-19 positive, have a test pending, or have risk factors.
- Staff perform a point of care risk assessment (PCRA) before each patient contact/encounter and determine facial protection is not required and no risk of exposure to blood and body is identified.
- If possible, have the patient wear a mask or face shield.

5.2. Can staff wear a face shield without a procedure mask and be within 2 meters of a patient on [contact precautions](#), whether or not the patient is masked?

Answer: Yes, staff may wear either a standard or contoured face shield without a procedure mask to support communication with a patient on contact precautions if:

- Relevant recommendations are followed, i.e., screening protocols are in place and the patient is not COVID-19 positive, have a test pending, or risk factors for COVID-19.
- Staff perform a point of care risk assessment (PCRA) before each patient contact/encounter and determine facial protection is not required and no risk of blood and body fluid exposure is identified.
- If possible, have the patient wear a mask or face shield.

5.3. Can staff wear a face shield without a procedure mask and be within 2 meters of a patient who is masked and who is on [modified respiratory](#) or [droplet](#) precautions?

Answer: No, staff require N95 respirator and eye protection, e.g., face shield, when caring for a patient on [modified respiratory](#), [droplet](#) or [contact and droplet](#) precautions.

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References

1. Public Health Agency of Canada (PHAC). COVID-19 and people with disabilities in Canada. Date modified: 2020-05-07. Retrieved from <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/guidance-documents/people-with-disabilities.html#a2>.
2. World Health Organization. June 5, 2020. Interim Guidance. Advice on the use of masks in the context of COVID-19. Retrieved from [https://www.who.int/publications/i/item/advice-on-the-use-of-masks-in-the-community-during-home-care-and-in-healthcare-settings-in-the-context-of-the-novel-coronavirus-\(2019-ncov\)-outbreak](https://www.who.int/publications/i/item/advice-on-the-use-of-masks-in-the-community-during-home-care-and-in-healthcare-settings-in-the-context-of-the-novel-coronavirus-(2019-ncov)-outbreak).



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