

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

Note: If you have any questions or comments contact IPC at ipcsurvstdadmin@ahs.ca.

Patient* includes the patient receiving care, as well as essential family care provider or support person required for the care of the patient.

Best practice recommendations

Medical mask is a broad term used to include surgical (with ties) and procedure (with ear loops) masks. The term surgical/procedure mask is used throughout this document.

For more details about standards, testing and rating levels of AHS medical/surgical/procedure masks, refer to [Personal Protective Equipment \(PPE Frequently Asked Questions\)](#), # 51 and #52. Refer to the latest PPE guidance documents on the [COVID-19 resource aggregator](#) for complete details.

Purpose

- This information sheet provides options for healthcare providers to support communication with patients* when continuous masking interferes with the efficacy of intervention or significantly impairs or 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 (Insite > Home > Tools > COVID-19), [physical distancing](#), [routine practices](#), e.g., [point-of-care risk assessment](#) (PCRA), [hand hygiene](#), [cleaning and disinfection](#), and any [additional precautions](#).




Application

The following adaptations may be considered to facilitate communication, if needed, especially in settings of serious discussions related to sensitive or complex health matters. 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

- 3.1 A transparent face shield which extends past the chin or a clear mask may be used in place of a surgical (with ties)/procedure mask (with ear loops) to facilitate communication, refer to **Table 1** for details.
 - A transparent face shield without a surgical/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.
 - If possible, have the patient wear a surgical/procedure mask or face shield.
- 3.1 Alternatively, surgical/procedure masks that allow visualization of the mouth, lips and teeth are available from Contracting, Procurement and Supply Management (CPSM). These masks:
 - may be worn in place of a surgical/procedure mask to address patient communication challenges;
 - supply available is not sufficient to support general usage for continuous masking requirements;
 - cost more than a regular surgical/procedure mask; and
 - can be ordered from CPSM through local warehouse.

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"> Can be ordered by direct purchase in iProcurement Oracle # 366139 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 This ordering information is for AHS sites only. Sites outside of AHS may order contoured face shields directly from the vendor.
Mask procedure with window		<ul style="list-style-type: none"> Available from inventory Tried by speech language and audiology departments at one site with positive results For ordering, contact your local site services staff. Ordering numbers will vary by zone/area

2. Other communication supports

3.1 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.
- 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.

3. No masking option for sensitive and complex health matters for patients not on modified respiratory, droplet or contact and droplet precautions

3.1 Consider a no masking option when it is required to facilitate communication in serious discussions related to sensitive or complex health matters such as goals of care. With agreement from both parties, the patient and the healthcare provider(s) may remove their surgical/procedure masks for short periods to facilitate communication for the duration of the discussion. Physical distancing should be maintained, if possible.

4. Sample scenarios to demonstrate how to apply recommendations

Questions	Answer
4.1 Can staff wear a face shield without a surgical/procedure mask and be within 2 meters of a patient cared for using routine practices , whether or not the patient is wearing a mask?	<p>Yes, staff may wear either a standard or contoured face shield without a surgical/procedure mask to support communication with a patient cared for using routine practices if:</p> <ul style="list-style-type: none"> relevant recommendations are followed, i.e., screening processes 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.
4.2 Can staff wear a face shield without a surgical/procedure mask and be within 2 meters of a patient on contact precautions , whether or not the patient is masked?	<p>Yes, staff may wear either a standard or contoured face shield without a surgical/procedure mask to support communication with a patient on contact precautions if:</p> <ul style="list-style-type: none"> 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.
4.3 Can staff wear a face shield without a surgical/procedure mask and be within 2 meters of a patient who is masked and who is on modified respiratory or droplet precautions ?	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.
4.4 Can staff wear eye protection, e.g., face shield, without a surgical/procedure mask when caring for a patient on modified respiratory , droplet or contact and droplet precautions ?	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.
4.5 Can staff remove their surgical/procedure mask for short periods but within 2 meters of distancing, with or without the patient wearing a mask to facilitate communication about sensitive or complex health issues, including but not limited to healthcare needs, difficult management decisions, and goals or care?	Yes, if point of care risk assessment is completed and the patient does not have symptoms or risk factors of COVID-19 and is not on modified respiratory, droplet, or contact and droplet precautions. Under these circumstances, with agreement from the patient, staff may remove their surgical/procedure masks for short periods to facilitate communication for the duration of the discussion. If the staff agree, the patient may remove their surgical/procedure mask also. Physical distancing should be maintained if possible.
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.	

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-novelcoronavirus-infection/guidance-documents/people-with-disabilities.html#a2>.
2. Text 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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