Required Masking of All VUMC Personnel (in Clinical, Non-Clinical, Research and Public Areas)

Rationale for Universal Masking Guidance

Our knowledge regarding COVID-19 is rapidly expanding. This allows us the opportunity to update PPE policies to incorporate the best evidence about issues like masking. Given what we have learned about COVID-19, universal masking, in addition to social distancing and frequent hand hygiene, will help prevent spread secondary to pre-symptomatic or asymptomatic infection.

To be successful, this approach will require support from all of us across the enterprise and will require the following:

- Strict adherence to extended use/reuse of masks
- Meticulous adherence to hand hygiene (including before and after touching or removing masks)
- Proper mask use and hygiene including wearing the mask as directed to cover the mouth and nose
- Strict avoidance of manipulation/touching the mask to reduce the risk of contamination

Where is Masking Required?

Masking is required in <u>all areas of VUMC (including all clinical, non-clinical, research and public areas</u>). This includes common public areas such as cafeteria/food courts, break rooms, research labs, conference rooms, bathrooms, elevators, and waiting rooms.

Masks should be worn while walking outdoors to and from VUMC buildings from parking areas, from the time of entering or exiting one's car. Masks may be removed ONLY if a person is sitting in their assigned workspace (e.g. office, cubicle, lab bench desk) AND can maintain at least 6 feet distance from all others.

What Type of Mask Should be Worn?

- In non-clinical, research, and public areas: Wear a paper mask or cloth face covering
- In clinical areas where one enters a patient room or has prolonged (>5 mins), direct patient contact: Wear a surgical/procedural mask and eye protection (see Eye Protection & Surgical Mask)
- In all other clinical areas/situations: Wear a surgical/procedural mask.

As our current N95 respirator supply must be reserved for approved high-risk procedures, N95 respirators should NOT be worn in general clinical areas or for non-approved indications. <u>N95 Reminders</u>

DO:

- Wear masks in all VUMC areas as noted
- Follow guidance on reuse, donning and doffing
- Conserve masks
- Wear and store masks correctly

DO NOT:

- Wear N95 respirators unless performing an approved high-risk procedure
- Wear or store masks incorrectly



08/11/2020, v.8

Department of Infection Prevention – Resource

Required Masking of All VUMC Personnel (in Clinical, Non-Clinical, Research and Public Areas)

Process to Obtain Masks

Supply Chain will provide clinical areas with the appropriate masks. Masks will be issued by the clinical manager. Stock will be securely stored in each clinical setting. Should you need a replacement mask, you must request one from supervisory personnel in your clinical area. All personnel should make every effort to help preserve the supply of PPE and reduce the need for replacement masks whenever possible. Masks should not be diverted to persons outside VUMC.

Mask Reuse

In order to conserve masks, procedure/surgical masks **should be used throughout the shift/day and should be reused each day.** Surgical masks should be replaced once they become visibly soiled, damp or damaged. <u>Cloth</u> <u>masks should be laundered each night at home</u> and replaced when damaged or torn.

Guidance on Procedure/Surgical and Cloth Mask Use and Reuse

To remove mask:

- 1. Perform hand hygiene
- 2. Remove mask
 - Ear-Loop Mask Style: Remove mask by holding the ear loops. The front is contaminated, so remove slowly and carefully.
 - Tie Back Mask Style: Remove mask by untying lower tie FIRST. Untie upper tie last. The front is contaminated, so remove slowly and carefully. Ensure ties do not fall into clean interior side of mask.
 - Behind the Head Elastic Strap Style: Grasp both elastic straps at side of head. Pull mask away from face, then pull straps from back of head. The front is contaminated, so remove slowly and carefully. Ensure bands do not fall into clean interior side of mask.
- **3.** After removing mask, **visually inspect** for contamination, distortion in shape/form. If soiled, torn, or saturated, procedure/surgical masks should be discarded. If torn or damaged, cloth masks should be discarded.
- **4.** If the mask is to be reused, **carefully store in a bag**, by folding the mask in half (clean interior sides together) and place in a bag labelled with your name.
- 5. Perform hand hygiene.

To re-apply a used mask (that has not been laundered):

- 1. Perform hand hygiene
- 2. Grasp mask
 - Pinch mask at the ear loops or grasp upper ties
- 3. Place over face
 - For ear-loop style mask: Secure ear loops behind the ears. Secure mask.
 - For tie back style mask: Secure upper ties first, behind head. End by securing lower ties behind head.
 - For full head elastic band style: Stretch elastic bands at side of mask, secure both elastic bands to back of head, then guide mask onto face.
- 4. Perform hand hygiene

VANDERBILT 💱 UNIVERSITY

MEDICAL CENTER

08/11/2020, v.8

Department of Infection Prevention – Resource

Required Masking of All VUMC Personnel (in Clinical, Non-Clinical, Research and Public Areas)

Frequently Asked Questions

Why are we recommending a procedure/surgical or cloth mask and not an N95 respirator?

Similar to influenza and other respiratory viruses, COVID-19 appears to be transmitted primarily through large respiratory droplets. Procedure masks provide protection against respiratory droplet spread. In contrast, N95 respirators provide a higher level of filtration and are important in clinical situations where infectious particles could become aerosolized. This primarily occurs in specific clinical situations such as when a patient is intubated or undergoes bronchoscopy. N95 respirators are also difficult to wear for long periods of time. As the N95 respirator supply must be reserved for approved high-risk procedures, N95 respirators should NOT be worn in general clinical areas or for non-approved indications.

Does this guidance apply to every member of the workforce?

Yes, this guidance applies to everyone at VUMC.

How can I eat/drink when I am supposed to wear a mask?

Perform hand hygiene, remove the mask, eat or drink in an approved location, and then replace your mask. Please follow the guidelines on appropriate doffing and maintain social distancing (e.g. space out in break rooms, at dining tables).

What if I feel like I cannot wear a mask?

You can request a medical accommodation through Employee Relations at <u>employeerelations.vumc@vumc.org</u> or you can call 615-343-4759 if you have questions. The following link provides information about the accommodation process <u>https://hr.vumc.org/Employee-Relations/Accommodations</u>.

Can masks or N95 respirators that have an external valve or vent (see picture) be used as part of universal masking at VUMC?

No. These types of masks do not protect others if the wearer has COVID-19 infection, and they are not permitted by <u>CDC guidelines</u>. The external valves/vents are designed to release unfiltered air and do not effectively remove the virus from exhaled breath in the event the wearer has COVID-19 infection. This vent does not impair the device's filtration of inhaled air when worn as personal protective equipment to protect the wearer. For VUMC:



- A face mask with an external valve/vent should not be used. If any workforce member, patient, or visitor does not have a mask without a valve/vent, one will be provided to them.
- A VUMC provided N95 respirator with an external valve/vent should only be used if no other N95s are available, and, if used, a surgical mask should be worn over the vented N95.

What if I experience a burning sensation or skin irritation while wearing an N95 mask?

If you notice this type of discomfort from any PPE use, remove yourself from patient care, take off the PPE, fill out a VERITAS Report, and call Occupational Health for further instructions.



Department of Infection Prevention – Resource