MASK WEARING FOR ALFRED HEALTH STAFF, PATIENTS, AND VISITORS (COVID-19) GUIDELINE

AlfredHealth

Target audience

All Alfred Health staff, patients and visitors.

Purpose

This guideline outlines the locations and circumstances in which a mask is required to be worn by Alfred Health staff, patients or visitors.

This guideline applies to all Alfred Health sites and includes community-based care.

Summary

	Location	Patients	Visitors	Staff
COVID-19 precautions	**COVID-19 wards, or when caring for COVID-19 Confirmed, Suspected or At Risk patients**	N95 mask* (see Placement and Cohorting of Patients with Suspected, at Risk of and Confirmed COVID-19 Guideline	N95 mask (see Safe and Essential Hospital Visiting – COVID-19 Guideline)	Refer to PPE matrix (applies to all staff when in clinical areas and patient care roles)
High-risk clinical areas	**High risk inpatient wards** (7E, 5E, 4WA, 3E, ICU, Caulfield wards) and **prolonged contact with, and during AGPs/AGBs**	N95 mask* when leaving room	N95 mask*	
	Emergency Department	N95 mask*		
	Outpatient high-risk settings (HOC, Haemodialysis, gyms, Haem/Onc, Transplant clinics, Lung Function Clinic)			
Other clinical areas	**Inpatient wards (all other)**	Mask required (N95 or surgical)	Mask required (N95 or surgical)	
	Outpatient (other) and centre-based care areas	Mask required (N95 or surgical)		
	Community-based care	Mask strongly encouraged (N95 or surgical)	Mask strongly encouraged (N95 or surgical)	
Non-clinical areas	**Public areas of hospital** including lifts, corridors, retail precinct	Mask optional	Mask optional	Mask optional
	Non-public and non-clinical spaces	Not Applicable		Mask optional
	Staff meetings or education **Note:** External participants and presenters, for the purpose of this guideline, fall within the 'Staff' category	Not Applicable		Mask optional Surgical mask recommended if meeting >4 hrs or in clinical area and/or physical distancing not possible

* Surgical mask appropriate only if N95 mask cannot be tolerated

Important notes:

- Staff following a COVID-19 pathway must continue to wear N95 respirators.
- Masks should be changed after 4 hours of wear, and earlier if they become soiled, wet or damaged.

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1. Background

Wearing of face masks may prevent transmission of respiratory infections including COVID-19. The Victorian Pandemic Orders state a face mask must be worn in indoor publicly accessible areas of healthcare premises.

In this guideline, "N95 masks" refer to N95/P2 respirators. For staff, specific types of respirators are available based on fit testing (refer to information on Connect). For other members of the public, respirators are still likely to provide a higher degree of protection (for the wearer, as well as for source control), even in the absence of fit testing and training in their use.

2. Exceptions to staff mask wearing requirement

Exceptions to staff wearing masks may include:

- Medical conditions (problems with breathing; a condition affecting the face; disability or mental health conditions including anxiety; allergy to masks);
- Communication impairment, or need for enhanced communication e.g. educators/presenters
- While consuming food, drink or medication;
- During emergencies

Staff working in clinical areas who are unable to wear the required PPE must refer to advice in the COVID-19: Infection Prevention Guidance for Clinical Staff.

Staff in non-clinical areas who are required to wear a mask for their role but are unable to (as per exceptions listed above) must discuss their exposure risk, and possible solutions, with their line manager. Options for managers to consider will depend on the staff member's role and may include the staff member wearing a personal mask, working in an office alone or working from home. Managers should consult their HR Business Partner for additional support if required.

3.   Patient carers

Patient carers attending in support of any patient should adhere to the same mask wearing requirements as Staff.

4.   Exceptions to patient mask wearing requirement

Exceptions to patient mask wearing include:

- Where an Alfred Health clinician treating the patient deems it unsuitable or unsafe for the patient to wear a mask;
- The patient has a medical condition such as obstructed breathing, serious facial skin condition, intellectual disability, or a mental health condition including anxiety;
- Children under 8 years of age;
- The patient is engaged in strenuous physical exercise;
- Communication impairments (see Section 5 below).

Outpatients presenting to Entry Point Screening with a mask wearing exemption (evidence is not required to be sighted) should be provided with a face shield.

Where the patient refuses to wear a mask or a face shield **and** the exceptions above are not met, access will be denied by Entry Point Screening. This must be escalated to the relevant Clinical Service Director or Director/Deputy Director of Operations in-hours; and COM/After Hours Coordinator after-hours.

5.   Exceptions to visitor mask wearing requirement

Exceptions to visitor mask wearing include:

- The visitor has a relevant medical condition (obstructed breathing, serious facial skin condition, intellectual disability, or mental health conditions including anxiety);
- Children under 8 years of age;
- The visitor, or patient they are visiting, has a communication impairment for which a mask would prohibit overcoming such an impairment (e.g. lip reading).

Visitors who cannot wear a mask (as per exceptions above) or refuse to wear a mask will not be permitted entry, unless end of life or special considerations apply. Please refer to the Safe and Essential Hospital Visiting – COVID-19 Guideline.

6.   Communication impairments

Face masks present significant challenges for general communication, particularly for people who have a hearing impairment or deafness.

Staff should consider the following when communicating with patients or visitors with communication impairments:

- Speak slowly and clearly (do not shout);
- Write down key points;
- Use technology such as Live Captioning on telehealth or transcription apps for calls;
- Act out instructions;
- Check for understanding;
- Encourage questions.

If communication challenges are still present, use of a face shield (by the staff member, patient, and/or visitor) may be considered for the period of communication. Physical distancing of 1.5m should be maintained where possible.

Key related documents

Key aligned policy
- Alfred Health Preventing and Controlling Healthcare Associated Infections Policy

Key legislation, acts & standards:
- Charter of Human Rights and Responsibilities Act 2006 (Vic)[1]
- Pandemic (Public Safety) Order 2022 (No.5)

Other relevant documents:
- COVID-19: Infection Prevention Guidance for Clinical Staff
- COVID-19 Entry Point Screening at Alfred Health Sites Guideline
- Safe and Essential Hospital Visiting – COVID-19 Guideline
- COVID 19: Guidance for Clinical Staff - Community
- Onsite Care for Non-Admitted Patients during COVID-19 Guideline

PowerPlans/IPOCS/QRGs
- N/A

References

Victorian Department of Health. COVID-19 information for the health sector.
https://www.health.vic.gov.au/covid-19/coronavirus-covid-19

Victorian Department of Health. Public Safety Order 2022. https://www.health.vic.gov.au/covid-19/public-safety-order-2022

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[1] REMINDER: Charter of Human Rights and Responsibilities Act 2006 – All those involved in decisions based on this guideline have an obligation to ensure that all decisions and actions are compatible with relevant human rights.

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