

# Guideline to Personal Protective Equipment and Exposure Control for COVID-19

Ministry of Corrections and Policing  
Ministry of Justice and Attorney General  
Integrated Justice Services

**Occupational Health and Safety Branch  
Integrated Justice Services**

Developed: March 2020

Revised: **February 11, 2021**

Next review: January 2023



# Contents

- 1. Introduction ..... 4
- 2. Purpose ..... 4
- 3. Informing Employees ..... 4
- 4. Roles and Responsibilities ..... 4
  - 4.1 Employers ..... 4
  - 4.2 Supervisors ..... 4
  - 4.3 Employee ..... 4
- 5. COVID-19 ..... 5
  - 5.1 Symptoms ..... 5
  - 5.2 Transmission ..... 5
  - 5.3 Precautions and Vaccines ..... 5
- 6. Early Recognition and Source Control ..... 6
  - 6.1 Universal Precautions ..... 6
  - 6.2 Risk Assessment – Symptom Screening ..... 6
- 7. Personal Protective Equipment ..... 7
  - 7.1 When to use Personal Protective Equipment ..... 7
  - 7.2 Disposable Gloves ..... 7
  - 7.3 Long Sleeved Gown ..... 8
  - 7.4 Facial Protection – Surgical/Procedural Mask ..... 8
  - 7.5 Eye Protection – Face Shield/Sealed Goggles ..... 8
  - 7.6 When to wear a N95 Respirator ..... 9
  - 7.7 Removal of PPE ..... 9
- 8. Procedures ..... 10
  - 8.1 Self-Monitoring and Exposure ..... 10
  - 8.2 Exposure Control ..... 10
  - 8.3 Hand Hygiene ..... 11
  - 8.4 Transporting Individuals ..... 11
  - 8.5 Handling of Deceased Bodies ..... 11
  - 8.6 Disposal of PPE and Garbage ..... 11

- 8.7 Cleaning and Disinfecting..... 11
- 8.8 Disinfecting Environments Suspected or Confirmed COVID-19..... 12
- 8.9 Disinfecting for Aerosol Generating Procedure ..... 12
- 8.10 Personal Belongings ..... 13
- 8.11 Linens ..... 13
- 8.12 Infection Control Measures and Limitations..... 13
- Additional Resources ..... 14
- 9. How to Don and Doff Personal Protective Equipment ..... 15
- 10. Hierarchy of Controls ..... 17
- 11. Appendices..... 18
  - 11.1 Table 1: Custody Services – Standard PPE ..... 18
  - 11.2 Table 1: Continuous Masking for Custody Services ..... 27
  - 11.3 Table 1: Poster - Aerosol Generating Medical Procedure in Progress..... 33
  - 11.3 Table 2: Poster - Aerosol Generating Medical Procedure ..... 34
  - 11.4 Table 1: Courts and Prisoner Transport - Standard PPE..... 35
  - 11.5 Table 1: Coroner’s Services - Standard PPE ..... 41

## 1. Introduction

This guideline has been developed following the COVID-19 recommendations for Personal Protective Equipment (PPE) and exposure control as outlined by the World Health Organization (WHO) and standard Public Health Measures as outlined by the Government of Saskatchewan and Chief Medical Officer. Key documents referenced are the *Rational Use of Personal Protective Equipment for Corona Disease (COVID19)*, and *The Preparedness, Prevention and Control of COVID-19 in Prisons*. This guideline is subject to change based on evidence and the progression of the pandemic and will be updated as required.

## 2. Purpose

The Ministry of Corrections and Policing, Integrated Justice Services and The Ministry of Justice and Attorney General are committed to ensuring workplace health, safety and wellness. Due to the incubation period of the virus, COVID-19, the potential exists for Ministry employees to encounter possible exposure(s) to COVID-19 in the performance of their daily tasks. The purpose of this guide is to provide standards for the assessment and proper controls to protect employees from a potential exposure and spread of COVID-19. Usage of Personal Protective Equipment (PPE) is based on the risk of exposure and specific to the environment.

## 3. Informing Employees

Employees shall be informed by their supervisor/manager about the potential exposure to an infectious material associated with their job tasks and what precautions will be taken.

## 4. Roles and Responsibilities

### 4.1 Employers

The Employer will ensure employees are informed about the risks associated with exposure to infectious materials and organisms and how to identify and correct factors that could lead to exposure injuries by developing an exposure control plan, according to *The Occupational Health and Safety Regulations, 1996* Section 85(2).

### 4.2 Supervisors

Supervisors perform a risk assessment to evaluate the likelihood of exposure, and follow the outlined PPE based on results. Refer to the Government of Saskatchewan, Guidelines for Hazard Identification and Risk Assessment in addition to the Saskatchewan COVID-19 Assessment Tool located on Saskatchewan.ca. Ensure exposure injury or hazardous situations are reported as per the Human Resource Manual section-818-OHS Incident Reporting and Investigation. Supervisors shall notify and educate employees of exposure symptoms and hazards, and the controls to protect themselves as outlined in this document. Supervisors ensure that employees receive training related to the use, limitations, care, sanitation, inspection and disposal of PPE. Supervisors are to ensure that PPE is used by the employee, as outlined, and removed from use or service when damaged.

### 4.3 Employee

Employees will use a risk assessment approach before and during each interaction to evaluate the likelihood of exposure, and follow the outlined PPE based on results. Employees are to participate in PPE training and use PPE in accordance to their training. PPE will be inspected before use to ensure it is not cracked, broken or damaged in any way, reporting damaged equipment to your supervisor. Employees are to follow safe work procedures and policies. Employees shall notify their supervisor of any potential risks that arise. In the event of a high-risk or infected individual, surface or work area, employees shall notify their supervisor as quickly as possible and cease all movement in the

immediate vicinity to reduce the possibility of further contamination. Employees are responsible for reporting exposure or potential exposure incidents to your immediate supervisor as per the Human Resource Manual section-818-OHS Incident Reporting and Investigation.

## 5. COVID-19

As defined by the Government of Canada, COVID-19 is an illness caused by a coronavirus. Human coronaviruses are common and are typically associated with mild illness, similar to the common cold. Coronaviruses are a large family of viruses. They can cause diseases from the common cold to more severe diseases as Severe Acute Respiratory Syndrome (SARS). Some cause illness in people, while others circulate among animals. Some Coronaviruses transmit easily from person to person while others do not.

COVID-19 is a new virus that has not been previously identified. At present it is causing mild to moderately severe symptoms and may cause death in rare cases.

### 5.1 Symptoms

Those who are infected with COVID-19 may have little to no symptoms. Symptoms, similar to a cold or flu, may take up to 14 days to appear after exposure to COVID-19. Symptoms include:

- new or worsening cough
- shortness of breath or difficulty breathing
- temperature equal to or over 38°C
- feeling feverish
- chills
- feeling very unwell
- fatigue or weakness
- muscle and/or joint aches
- new loss of smell or taste
- headache
- gastrointestinal symptoms (abdominal pain, diarrhea, vomiting)

Children have been more commonly reporting abdominal symptoms, and skin changes or rashes.<sup>1</sup>

### 5.2 Transmission

COVID-19 is transmitted via droplets and fomites during close unprotected contact between an infected person and an uninfected person. The droplets can also be spread by touching surfaces with the virus on it and then touching your mouth, nose or eyes before washing your hands. While it is not yet known exactly how long the virus lives on surfaces, preliminary evidence suggests it can live on objects and surfaces from a few hours to several days. Therefore, isolation at home or hospital is important to prevent transmission.

While the primary driver of COVID-19 transmission is by people who are symptomatic, there is evidence that some COVID-19 infected people who never develop symptoms or are not yet sick are able to transmit the virus. Sometimes the symptoms are so mild that people don't pay attention to them. It is recommended to maintain a physical distance of two metres whenever possible. Public Health Orders must be adhered to.

### 5.3 Precautions and Vaccines

In the absence of effective treatments or vaccines, infection prevention and control (IPC) strategies to prevent or limit transmission of COVID-19 include:

- prompt identification
- appropriate risk assessment by screening
- management and placement of probable and confirmed cases

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<sup>1</sup>Government of Canada, Coronavirus disease (COVID-19): Symptoms and Treatment; 2020 (Access date: March and October 2020)  
<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/symptoms.html>

- investigation and follow up of close contacts

In December 2020, COVID-19 vaccines became available in Canada. The vaccine protects against COVID-19 by teaching cells how to make protein that will trigger an immune response without using the live virus that caused COVID-19. Once triggered, the body then makes antibodies that help fight the infection, if the real virus enters the body.

A National Advisory Committee on Immunization provided federal and provincial health agencies with recommendations on key populations for early COVID-19 immunizations. More information on vaccine delivery phases, can be found on [Taskroom](#) and [Saskatchewan.ca](#).

Currently, two different vaccines have been approved for use in Canada:

- Pfizer BioNTech Vaccine- Information, guidance and fact sheets on the COVID-19 Vaccine from Pfizer BioNTech is located on [Saskatchewan.ca](#)
- Moderna Vaccine– Information and guidance and fact sheets on the COVID-19 Vaccine from Moderna is located on [Saskatchewan.ca](#)

## 6. Early Recognition and Source Control

The key to exposure control is to have a multi-faceted plan that limits the spread of the virus and limits the number of employees who could be exposed to the virus. Signage will be posted, including at client and visitors point of entry, to instruct symptomatic individuals to alert ministry employees, thus prompt screening and isolation, where possible.<sup>2</sup>

### 6.1 Universal Precautions

The most important first steps for protection are:

- performing hand hygiene and avoid touching your face, mouth, nose and eyes
- regular sanitizing of common surfaces
- where possible, maintain physical distancing of 2 metres
- physical barriers in areas where initial assessment occurs is preferred
- early recognition of individuals with respiratory illness
- rapidly isolating anyone suspected of having COVID-19 and having the individual wear a surgical/procedural mask, if tolerated
- self-monitoring of personal health for signs and symptoms
- donning the appropriate PPE based on the risk of exposure and specific environment

Measures such as these are critical to reducing the likelihood of exposure of employees to the virus.<sup>3</sup> (Refer to the symptoms listed above.)

### 6.2 Risk Assessment – Symptom Screening

The application of universal precautions and additional precautions is based on a symptom screening risk assessment. All employees will use a risk assessment approach before and during each

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<sup>2</sup> Government of Canada, Infection prevention and control for coronavirus disease (COVID-19): Interim guidance for acute healthcare setting; 2020 (Access date: March 2020) <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/interim-guidance-acute-healthcare-settings.html#a4.1>

<sup>3</sup> World Health Organization, The Preparedness, Prevention and Control of COVID-19 in Prisons. March 15, 2020; Regional Office website (Accessed March 2020) <http://www.euro.who.int/en/health-topics/health-determinants/prisons-and-health/publications/2020/preparedness,-prevention-and-control-of-covid-19-in-prisons-and-other-places-of-detention-2020>

interaction to evaluate the likelihood of exposure, and follow the outlined controls based on results.<sup>4</sup> The Public Service Commission (PSC) has developed *Guidelines for Hazard Identification and Risk Assessment* to assist with the identification of the tasks with potential exposure hazard, the risk rating and controls required using the hierarchy of hazard controls. (Appendix 10)

## 7. Personal Protective Equipment

PPE will always be considered as the last line of defense, and elimination, substitution, engineered controls followed by administrative controls and safe work procedures are to be considered prior to PPE. Where PPE is used, it will be selected based on the results of a risk assessment and used in conjunction with other controls to provide the most effective protection against identified hazards. PPE will be inspected before use to ensure it is not cracked, broken or damaged in any way. Report damaged equipment to your supervisor.

Wearing PPE does not negate the importance and use of universal precautions. Whenever possible, employees need to continue the use of protective barriers, social distancing and diligently practice hand hygiene, and cough etiquette.

### 7.1 When to use Personal Protective Equipment

When an individual is displaying symptoms or is confirmed to have COVID-19, if a barrier is not present or you cannot maintain physical distancing (2 metres), follow droplet/contact PLUS\*precautions based on the risk assessment results. This includes the appropriate selection and use of personal protective equipment (PPE) based on the task being completed, including cleaning and disinfecting of effected unit/areas. (See PPE Appendices for additional information on the appropriate use of PPE by task.)<sup>5 6 7 8</sup>

### 7.2 Disposable Gloves

Medical grade nitrile disposable gloves, class II are appropriate for the care of clients with or suspected to have COVID-19. When providing direct hands-on care of an individual displaying symptoms/confirmed to have COVID-19 follow universal precautions by wearing medical grade, class II gloves.<sup>9</sup> If unable to maintain physical distance (2 metres) from an individual displaying symptoms/confirmed to have COVID-19, and a barrier is not present, follow

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<sup>4</sup> Government of Canada, Infection prevention and control for coronavirus disease (COVID-19): Interim guidance for acute healthcare setting; 2020 (Access date: March-October 2020) <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/interim-guidance-acute-healthcare-settings.html#a4.1>

<sup>5 9</sup> World Health Organization, The Preparedness, Prevention and Control of COVID-19 in Prisons. March 15, 2020; Regional Office website (Access date: March-October 2020) <http://www.euro.who.int/en/health-topics/health-determinants/prisons-and-health/publications/2020/preparedness,-prevention-and-control-of-covid-19-in-prisons-and-other-places-of-detention-2020>

<sup>6</sup> Saskatchewan Health Authority, NOVEL CORONAVIRUS (COVID-19): Interim Infection Prevention and Control Guidance for Primary Health Care Settings (Access date: March-October 2020) <https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/information-for-health-care-providers/ppe-infection-prevention-and-control#infection-prevention-and-control>

<sup>7</sup> Government of Saskatchewan, COVID-19 Appropriate Use of Personal Protection Equipment (PPE) April 2020; (Access date: April–October 2020) <https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/information-for-health-care-providers/ppe-infection-prevention-and-control>

<sup>8</sup> Saskatchewan Health Authority, COVID-19 PPE Bulletin, April 2020; (Access date: April –October 2020) <https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/information-for-health-care-providers/ppe-infection-prevention-and-control>

universal precautions by wearing medical grade, class II gloves.<sup>10</sup> All employees will at minimum wear nitrile disposable gloves, or as directed by the product's Safety Data Sheet, to protect hands while cleaning and disinfecting. See donning and doffing of PPE for additional information. Hand hygiene will be performed prior to donning and after doffing disposable gloves.

### 7.3 Long Sleeved Gown

Gowns will be worn based on the specific job task and the environment. Gowns are to be worn to reduce skin exposure to bodily fluids or chemical products and as a droplet precaution based on the risk assessment results. (See the Appendices for additional information on the appropriate use of PPE by task.) See donning and doffing of PPE for additional information.<sup>11</sup> Uniforms or clothing that have become contaminated (e.g. physical contact, or contaminated with respiratory droplets from an individual displaying symptoms/confirmed to have COVID-19,) require laundering in hot water and placed in a hot dryer until completely dried.

### 7.4 Facial Protection – Surgical/Procedural Mask

Surgical/procedural masks are medical grade masks used to protect both the client and employees. Surgical/procedural masks must meet Level 1 classifications under ASTM International Standards.<sup>12</sup> When an individual displaying symptoms/confirmed to have COVID-19 and a barrier is not present or if physical distancing (2 metres) cannot be maintained, a surgical/procedural mask should be donned based on the risk assessment results. Clients use of masks can be used to limit the spread of respiratory diseases, such as COVID-19. Employees entering or cleaning the effected unit/area are required to wear a surgical/procedural mask.<sup>13</sup> Change surgical/procedural mask when it becomes moist, damaged or soiled.

Proper wearing of masks requires a snug fit over the nose and under the chin. See donning and insufficient to provide an adequate level of protection and other equally relevant measures will also be adopted as outlined below.

### 7.5 Eye Protection – Face Shield/Sealed Goggles

When an individual is displaying symptoms/confirmed to have COVID-19, if a barrier is not present or you cannot maintain physical distancing (2 metres), eye protection is required. Face shields or appropriately fitted, Class 2B non-vented or indirectly vented sealed goggle, are the provincial standard used for Droplet/Contact Plus Precautions with suspected or confirmed COVID-19 cases. Employees cleaning effected unit/area are required to wear eye protection based on the risk assessment results and as directed by the Safety Data Sheet for the products used. (Prescription

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<sup>10</sup> <sup>11</sup> World Health Organization, The Preparedness, Prevention and Control of COVID-19 in Prisons. March 15, 2020; Regional Office website (Access date: March-October 2020) <http://www.euro.who.int/en/health-topics/health-determinants/prisons-and-health/publications/2020/preparedness,-prevention-and-control-of-covid-19-in-prisons-and-other-places-of-detention-2020>

<sup>12</sup> Government of Canada, COVID-19 medical masks and respirators: Information for health professionals. (Access date November 2, 2020) <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/medical-devices/personal-protective-equipment/medical-masks-respirators/health-professionals.html>

glasses do not meet the OH&S regulations for eye protection.)<sup>14</sup> Follow the manufactures guidelines for proper use and sanitation.

### 7.6 When to wear a N95 Respirator

When an individual is showing symptoms or has been confirmed to have COVID-19 a N95 respirator is required during an Aerosol Generating Medical Procedure (AGMP), such as a nebulizer, Continuous Positive Airway Pressure therapy (CPAP), Emergency Medical Services (EMS) interventions including intubation, Bag Valve Mask. All employees require gloves, gown, facial/eye protection and a fit-tested N95 respirator. The following steps will be followed:

- limit the employees in the room during this procedure
- hang “AGMP in Progress! Do Not Enter “poster on the closed door. (Poster is located in Appendix 11.3 Table 1)
- ensure employee have been fit tested and are trained to use a N95 respirator
- the N95 respirator and eye/facial protection will be removed immediately after leaving the room. Where the AGMP was performed will remain vacant or a N95 respirator will continue to be worn until the air clearance time has elapsed. If specific settle time is not identified, use 2 hours.<sup>15</sup>
- following the completion of the AGMP, complete and post the poster in Appendix 11.3 Table 2. “AGMP completed at \_\_\_\_\_”, “Settle time: \_\_\_\_\_” (If specific settle time not identified, use 2 hours.) Fill in “Safe to Enter Room at: \_\_\_\_\_”. Once the safe to enter time has lapsed, employees no longer require a N95
- see disinfecting procedures for AGMP below for additional details

Tight-fitting respirators must seal to the wearer’s face in order to provide the expected protection. Therefore, fit testing by a competent person is required as per Section 88 of The Occupational Health and Safety Regulations, 1996.

### 7.7 Removal of PPE

Before leaving an effected unit/area, gloves, gown and eye protection will be removed and disposed of to minimize the potential for cross contamination.<sup>16 17</sup> Refer to donning and doffing posters below for details on the careful removal of all PPE.<sup>18</sup>

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<sup>16</sup> Government of Saskatchewan, COVID-19 Appropriate Use of Personal Protection Equipment (PPE) April 2020; (Access date: April-October 2020) <https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/information-for-health-care-providers/ppe-infection-prevention-and-control>

<sup>17</sup> World Health Organization, The Preparedness, Prevention and Control of COVID-19 in Prisons. March 15, 2020; Regional Office website (Access date: March-October 2020) <http://www.euro.who.int/en/health-topics/health-determinants/prisons-and-health/publications/2020/preparedness-prevention-and-control-of-covid-19-in-prisons-and-other-places-of-detention-2020>

<sup>18</sup> Alberta Health Services, Infection Prevention & Control, Putting on (Donning) Personal Protective Equipment (PPE) & Taking off (Doffing) Personal Protective Equipment (PPE)

\*Note: If continuous masking applies, please following the direction in section 11.2 Table 1: Continuous Masking for Custody Workers.

## 8. Procedures

### 8.1 Self-Monitoring and Exposure

Self-monitoring means watching closely for symptoms in yourself or your dependents. You should avoid crowded public spaces, if possible. The [Saskatchewan COVID-19 Self-Assessment Tool](#) can be used as a self-assessment to determine whether you should be tested for COVID-19 symptoms. Speak to your supervisor on how to quickly self-isolate if you develop fever, cough or difficulty breathing or any other symptoms when at work. When there are no symptoms, continue with your daily activities. If you have been exposed without proper PPE, or at the first sign of symptoms, such as increase in body temperature or development of a cough, sore throat or shortness of breath, you should self-isolate and call the Public HealthLine 811 for assessment and direction. For workplace exposure without proper PPE, notify your supervisor and follow the Human Resource Manual section-818-OHS Incident Reporting and Investigation. (Form 101) Whether you're self-isolating or self-monitoring, make sure you maintain proper physical distancing. (2 metres)

### 8.2 Exposure Control

All first point of contact employees will complete a risk assessment by way of a symptom screening on individuals being admitted, or prior to services provided. All incoming transport clients with symptoms or confirmed COVID-19, will don a non-medical mask and perform hand hygiene prior to entering custody. The surgical/procedural mask shall remain on until an assessment has been completed.

If an individual presents with symptoms of influenza-like illness, and within 14 days before the onset of illness has travelled outside of Canada, has been in close contact with a probable or confirmed case of COVID-19 or someone who has travelled outside of Canada:

- where possible, reschedule the service
- place the individual in a designated separate area, where possible
- encourage the individual with signs and symptoms of an acute respiratory infection to perform respiratory hygiene/cough etiquette, and provide tissues, and a waste receptacle
- limit contact/visitors to only those who are essential
- do **not** cohort with other individual (unless necessary, in which case cohort only with individual with similar screening symptoms to COVID-19)
- disinfect the contaminated area as outlined in this guideline
- practice universal precautions, wash your hands with soap and water or alcohol-based hand sanitizer

Reference Taskroom for the COVID-19 Workplace Contact Notification Toolkit process for positive cases in the workplace.

### 8.3 Hand Hygiene

Hand hygiene is essential to reduce cross-contamination and will be performed often. Hand hygiene consists of either washing hands thoroughly with soap and water for at least 20 seconds and drying with a single use towel or by using alcohol hand sanitizer containing at least 60% alcohol. Hand sanitizers provide a convenient option for hand hygiene where soap and water are not available.

### 8.4 Transporting Individuals

All incoming transports to correctional facilities with symptoms or confirmed COVID-19, will don a surgical/procedural mask prior to entering custody. The surgical/procedural mask shall remain on until an assessment has been completed. All outbound transports of individual with symptoms, or confirmed COVID-19 will be reviewed and completed based on the results of the risk assessment. Transport vehicles are to be sanitized if suspected or confirmed COVID-19 exposure has occurred.

### 8.5 Handling of Deceased Bodies

Universal precautions will be used properly and consistently when handling deceased bodies or preparing bodies for autopsy or transfer to mortuary services. Provincial and territorial specified communicable disease regulations will be followed.<sup>19</sup>

### 8.6 Disposal of PPE and Garbage

Single-use disposable equipment and PPE will be discarded into a no-touch garbage receptacle after use.<sup>20</sup> No special precautions are recommended; universal precautions are sufficient.

### 8.7 Cleaning and Disinfecting

Cleaning and disinfecting are two different processes: cleaning removes dirt and debris from a surface while disinfecting kills bacteria, mold, and viruses on the surface. For common workplace settings, cleaning can be accomplished with water, detergent and scrubbing. Disinfecting requires the infected surface to be in contact with an approved disinfecting product for a minimum amount of time, as recommended by the manufacturer's guidelines.

Increased frequency of general precautionary cleaning and disinfecting of high-touch surfaces and shared equipment (e.g. telephones, keyboards, photocopier, fax machine) is significant in controlling the spread of microorganisms during a respiratory infection outbreak. Shared common areas, counter tops, sinks, desktops, file cabinets, door handles kitchen areas, sinks and taps will be cleaned and disinfected at least at the beginning and

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<sup>19</sup> Government of Canada, Infection prevention and control for coronavirus disease (COVID-19): Interim guidance for acute healthcare setting; (Access date: March–October 2020) (<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/interim-guidance-acute-healthcare-settings.html#a4.1>)

<sup>20</sup> Saskatchewan Health Authority, NOVEL CORONAVIRUS (COVID-19): Interim Infection Prevention and Control Guidance for Acute Health Care Settings (Access date: March–October 2020)

the end of each shift with documentation.<sup>21</sup> Dishes will be cleaned as per normal food sanitation guidelines.<sup>22</sup>

Chemical product labels are required and to be visible on cleaning solutions. An employer who acquires a hazardous product for use, storage or handling at the workplace shall obtain a supplier safety data sheet. If a hazardous product that is used in a workplace is three years old, the employer shall, if possible, obtain from the supplier an up-to-date supplier safety data sheet with respect to the hazardous product at that time. A copy of a safety data sheet must be made readily available to employees who may be exposed to the hazardous product and the occupational health committee / worker representative(s).

### 8.8 Disinfecting Environments Suspected or Confirmed COVID-19

In Government- occupied workspaces, to facilitate a quick response when a deep clean and disinfection is required (for example, if an individual with a presumptive or confirmed case of COVID-19 has been in one of our work places), reach out to the Building Manager. Reference [Taskroom](#) for additional documented processes.

Environmental cleaning of premises and areas that may have been contaminated with COVID-19 due to proximity of individuals displaying symptoms/confirmed to have COVID-19 requires cleaners to don a surgical/procedural mask, eye protection, gloves, gown and boots or closed work shoes. According to Health Canada, a disinfecting solution can be made by mixing one part of bleach into 50 parts of water. For example, 1 teaspoon (5 mL) bleach into 1 cup (250 mL) water. These directions are based on bleach that is 5% sodium hypochlorite<sup>23</sup>. Where other disinfecting products are used in place of a bleach and water solution, ensure that the product is approved as a disinfectant for COVID-19 (e.g. Health Canada approved disinfectants will contain an 8-digit DIN number on the product label). Follow PPE requirements listed on the Safety Data Sheet (SDS).

### 8.9 Disinfecting for Aerosol Generating Procedure

Where possible, wait for aerosolize settle time prior to environmental cleaning **after an aerosol generating medical procedure (AGMP)**. If an area cannot be secured and requires immediate cleaning, cleaners will don a N95 respirator, eye protection, gloves, gown and boots or closed work shoes. Post settle time of 2 hours, a N95 respirator is not required and can be replaced with a surgical/procedural mask. According to Health Canada, a disinfecting solution can be made by mixing one part of bleach into 50 parts of water. For example, 1 teaspoon (5 mL) bleach into 1 cup (250 mL) water. These directions are based on bleach that is 5% sodium

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<sup>21 22</sup> Government of Saskatchewan, COVID-19 Cleaning and Disinfection for Public Facilities, 2020; (Access date: April-October 2020) <https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/public-health-measures/guidance-for-health-care-facilities/cleaning-and-disinfecting-public-facilities>

<sup>23</sup> Saskatchewan.ca, COVID-19 Cleaning and Disinfecting for Public Facilities (Access date April-October 2020) <https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/public-health-measures/guidance-for-health-care-facilities/cleaning-and-disinfecting-public-facilities>

hypochlorite.<sup>24</sup> Where other disinfecting products are used in place of a bleach and water solution, ensure that the product is approved as a disinfectant for COVID-19 (e.g. Health Canada approved disinfectants will contain an 8-digit DIN number on the product label). Follow PPE requirements listed on the Safety Data Sheet (SDS).

### 8.10 Personal Belongings

All reusable equipment and supplies, electronics, personal belongings, etc. should be dedicated to the use of the individuals with signs and symptoms and exposure criteria consistent with COVID-19. If use with other individuals is necessary, the equipment and supplies will be cleaned and low-level disinfected before reuse. Items that cannot be appropriately cleaned and disinfected will be discarded upon individuals transfer or discharge. Practice good hand hygiene, do not touch your face, eyes or nose.

### 8.11 Linens

All individuals dealing with soiled bedding, towels and clothes from or infected by **individuals with COVID-19 will:**

1. Wear appropriate personal protective equipment, which includes gloves, surgical/procedural mask, eye face shield, long-sleeved gown, (if gown is not fluid resistant), and don boots before touching any soiled linen.
2. Never carry soiled linen against body; place soiled linen in a clearly labeled, leak-proof container.
3. If there is any solid excrement on the linen, such as feces or vomit, scrape it off carefully with a flat, firm object and put it in the designated toilet before putting linen in the designated container.
4. Wash and disinfect linen: washing by machine with hot water and laundry detergent is recommended for cleaning and disinfection of linens.<sup>25</sup>

### 8.12 Infection Control Measures and Limitations

- **Vaccination:** when available to the public, employees will be able to choose to be vaccinated.
  - Limitations: a sufficient percentage of the population will need to be vaccinated to reduce cases; vaccinations may not be effective for new strains of COVID, research is still underway.
- **Engineering controls:** designs or modifications to reduce the source of exposure, such as dividers/baffles/shields and Plexiglas barriers.
  - Limitations: employees and clients may not follow procedure and may interact in areas without barriers; engineering controls can give a false sense of security resulting in physical distancing and masking not being complied with.

<sup>24</sup> Saskatchewan.ca, COVID-19 Cleaning and Disinfecting for Public Facilities (Access date April-October 2020)

<https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/public-health-measures/guidance-for-health-care-facilities/cleaning-and-disinfecting-public-facilities>

<sup>25</sup> World Health Organization, Q &A on infectious prevention and control for health care workers caring for patients suspected or confirmed 2019-nCoV (Access date March 2020) <https://www.who.int/news-room/q-a-detail/q-a-on-infection-prevention-and-control-for-health-care-workers-caring-for-patients-with-suspected-or-confirmed-2019-ncov>

- **Personal protective equipment:** Personal protective equipment is prescribed and provided where required. Non-medical masks are used for all other scenarios.
  - Limitations: incorrect donning and doffing, using contaminated PPE for long durations. PPE can give a false sense of security resulting in physical distancing not being complied with.
- **Safe work practices and procedures:** developed as necessary by divisions.
  - Limitations: employees may be unaware of, or not follow, safe work practices and procedures.
- **Standard practices that incorporate universal precautions:** continue to be incorporated on an ongoing basis, following direction from [saskatchewan.ca](https://www.saskatchewan.ca) including limits on in-person gathering, using technology and virtual meetings rather than in-person meetings, cleaning and disinfecting, hand hygiene, physical distancing, masking etc.

### Additional Resources

- Exposure Control Plan, Integrated Justice Services
- Guideline for Hazard Identification and Risk Assessment, Government of Saskatchewan
- Section 818-Occupational Health and Safety- Incident Reporting and Investigation (IRI), Government of Saskatchewan
- Saskatchewan.ca

## 9. How to Don and Doff Personal Protective Equipment



Infection Prevention and Control

### Putting on (Donning) Personal Protective Equipment (PPE)

#### 1 HAND HYGIENE



- A** Using an alcohol-based hand rub is the preferred way to **clean your hands**.
- B** If your hands look or feel dirty, soap and water must be used to wash your hands.

#### 2 Gown



- A** Make sure the gown covers from neck to knees to wrist.
- B** Tie at the back of neck and waist.

#### 3a Procedure/Surgical Mask



- ♦ Secure the ties or elastic around your head so the mask stays in place.
- ♦ Fit the moldable band to the nose bridge. Fit snugly to your face and below chin.

#### 3b N95 Respirator

There are different styles of N95 respirators (pictured below). They include: a) molded cup, b) duckbill, c) flat-fold and d) v-fold



All styles have the same basic steps for donning; molded cup and duckbill are pictured below. Refer to the manufacturer for specific donning instructions.



- A** Pre-stretch both top and bottom straps before placing the respirator on your face.
- B** Cup the N95 respirator in your hand.
- C** Position the N95 respirator under your chin with the nose piece up. Secure the elastic band around your head so the N95 respirator stays in place.
- D** Use both hands to mold the metal band of the N95 respirator around the bridge of your nose.
- E** Fit check the N95 respirator.

#### 4 Eye Protection or Face Shields



- ♦ Place over the eyes (or face).
- ♦ Adjust to fit.

#### 5 Gloves



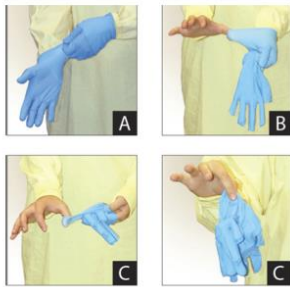
- ♦ Pull the cuffs of the gloves over the cuffs of the gown.

Updated on March 2020  
Some Photos Used from Alberta Health Services

For more information contact [infectioncontrol@saskhealthauthority.ca](mailto:infectioncontrol@saskhealthauthority.ca)

## Taking off (Doffing) Personal Protective Equipment (PPE)

### 1 Gloves



**A** Grasp the outside edge of the glove near the wrist and peel away from the hand, turning the glove inside-out.

- ♦ Hold the glove in the opposite gloved hand.
- B** Slide an ungloved finger or thumb under the wrist of the remaining glove.
- C** Peel the glove off and over the first glove, making a bag for both gloves.
- ♦ Put the gloves in the garbage.

### 2 HAND HYGIENE



- A** Using an alcohol-based hand rub is the preferred way to **clean your hands**.
- B** If your hands look or feel dirty, soap and water must be used to wash your hands.

### 3 Gown



- A** Carefully unfasten ties.
- B** Grasp the outside of the gown at the back of the shoulders and pull the gown down over the arms.
- C** Turn the gown inside out during removal.
- ♦ Put in hamper or, if disposable, put in garbage.

### 4 HAND HYGIENE



- ♦ **Clean your hands.** (See No. 2)
- ♦ Exit the patient room, close the door and **clean your hands** again.

### 5 Eye Protection or Face Shield



- ♦ Handle only by headband or ear pieces.
- ♦ Carefully pull away from face.
- ♦ Put reusable items in appropriate area for cleaning.
- ♦ Put disposable items into garbage.

### 6 Mask or N95 Respirator



- ♦ Bend forward slightly and carefully remove the mask from your face by touching only the ties or elastic bands.
- ♦ Start with the bottom tie, then remove the top tie.
- ♦ Throw the mask in the garbage.

There are different styles of N95 respirators but all styles have the same basic steps for doffing.

### 7 HAND HYGIENE

- ♦ **Clean your hands.** (See No. 2)

Updated on March 2020

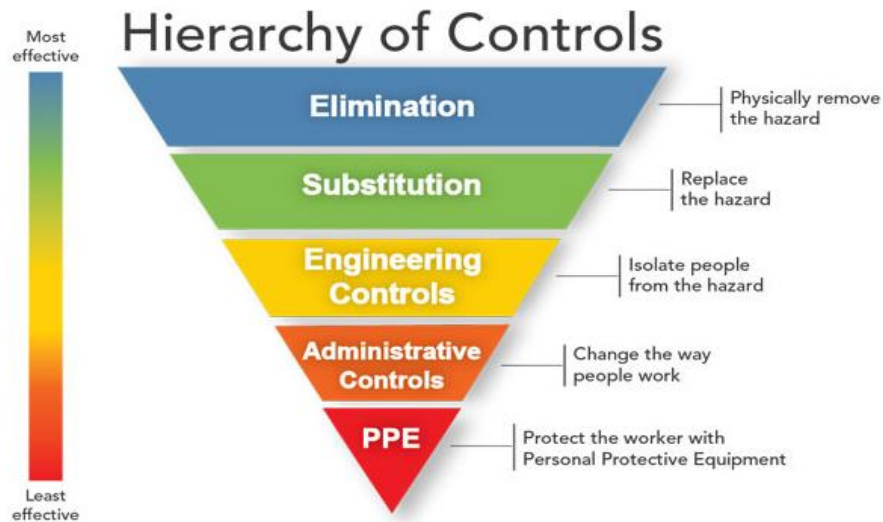
Some Photos Used from Alberta Health Services

For more information contact [infectioncontrol@saskhealthauthority.ca](mailto:infectioncontrol@saskhealthauthority.ca)

## 10. Hierarchy of Controls

### How to Apply in a COVID-19 Environment:

PPE is an effective way to control hazards within a work environment. The Hierarchy of Controls is a system used to deploy effective controls within an organization, workplace, or community to identify the most effective ways to control a hazard. Depicted within the inverted pyramid below, the more effective controls are on the large, top side of the pyramid.



### Examples of How to Apply in the Workplace:

When applying the Hierarchy of Controls in a COVID-19 environment, start at the top with the more effective controls and work your way down.

**Elimination** – Removing the risk entirely (ex: working from home and not permitting entry of those who are symptomatic)

**Substitution** – Although no controls around substitution have been identified for COVID-19, an example of this would be substituting technical grade ethanol with medical grade ethanol in hand sanitizer.

**Engineering controls** – Using physical or mechanical means to separate the person from the hazard (ex: physical barriers / partitions with plexiglass)

**Administrative controls** – Use policies, procedures, signage to guide behaviors (i.e.) hand hygiene, physical distancing, masking, limit gatherings.

**PPE** – Will be considered after careful consideration of the previous control measures (ex: use a risk assessment to determine the level of PPE needed)

## 11. Appendices

### 11.1 Table 1: Custody Services – Standard PPE

Table 1. Recommended PPE to control potential exposure hazards during the outbreak of COVID-19, according to the setting, personnel, and type of activity<sup>a</sup>. For the purpose of this table, Youth Facility Workers and Correctional Workers will be referred to as Custody Workers. Health Care workers will be referred to as Nurses.

**Note:** Continuous masking is implemented on a directed basis, and supplements the controls laid out in Table 11.1.

Setting	Target personnel or clients	Activity	Type of PPE or procedure
<b>ADULT / YOUTH / REDUCED CUSTODY FACILITIES</b>			
<b>Custody Facilities</b>			
<b>All areas non-designated as Isolation, Quarantine, 14-Day Assessment, and Admitting</b>	Nurses  Custody workers	Providing <u>direct hands-on care</u>	No COVID-19 specific PPE required – Standard Universal Precautions  *Perform hand hygiene frequently, before entering and after exiting the unit. Avoid touching face with unwashed hands
		Aerosol-generating medical procedures (AGMP) performed on any client	Respirator N95 or equivalent Gown Disposable Gloves Face shield/sealed goggles
	Cleaners	Entering to clean and disinfect the room	Disposable gloves  Additional PPE as outlined by the Safety Data Sheet (SDS) for the products used
Other areas of movement/access through the facility (e.g. Video Court/ common areas/ program/ work areas/ corridors)	All clients not known or not suspected to have COVID-19	Other areas of movement/access through the facility (e.g. Video Court/ common areas/ program/ work areas/ corridors)	Clients <u>must</u> don a non-medical mask whenever out of their cell. (Exception for hygiene and eating.)  This would include when on exercise together.
	Custody Worker	Escort out of the non-designated units	No COVID-19 specific PPE required – Standard Universal Precautions

<b>Medical Units Within Custody Facilities</b>			
<b>Treatment room</b>	Nurses	Physical examination of all clients	Surgical/Procedural mask Gown Disposable Gloves Face shield/sealed goggles  *Gloves and gown will be changed between each client
	Clients	Any	Clients <u>must</u> don a non-medical mask during entire admission process and movement until placed in cell
	Cleaners	Cleaning and disinfecting after and between clients with respiratory symptoms (not AGMPs)	Surgical/ Procedural mask Gown Gloves as outlined in Safety Data Sheet for product (as a minimum requirement, disposable gloves)  Face shield/sealed goggles  Boots or closed work Shoes as per SDS sheet
	Custody Worker	When required to be in the treatment room	Required to don the PPE that corresponds with the unit the client came from
<b>Waiting area</b>	Clients with respiratory symptoms or from Quarantine / Isolation/ 14-Day Assessment and Admission unit	Any	Clients <u>must</u> don a non-medical mask during entire admission process and movement until placed in cell  Immediately move the client to an isolation room or separate area away from others; if this is not feasible, ensure spatial distance of at least 2 metres from other clients
<b>Medical Administration</b>	Clerical support	Does not provide direct contact with clients and can maintain 2 metres	PPE dependent on infrastructure and interaction / tasks associated with clients

Quarantine Unit			
Quarantine Unit	Nurses Custody Workers	Providing <u>direct hands-on care or contact</u>	Disposable gloves Surgical/Procedural mask Face shield/sealed goggles Gown
	Custody workers	Working the Quarantine unit	Surgical/Procedural mask Face shield/sealed goggles  *Perform hand hygiene frequently, before entering and after exiting the unit. Avoid touching face with unwashed hands
	Cleaners	Entering to clean and disinfect the room of <b>suspected/confirmed COVID-19 clients</b>	Surgical/Procedural mask Gown Gloves as outlined in Safety Data Sheet for product (as a minimum requirement, disposable gloves)  Face shield/sealed goggles  Boots or closed work shoes as per SDS sheet  *If an AGMP was performed, a N95 mask is to be used if cleaning is required before the settle time of 2 hours
<b>Other areas of movement/ access through the facility (e.g. Video Court/common areas/ program / work areas/ corridors)</b>	Clients	Other areas of movement/access through the facility (e.g. Video Court/ common areas/ program/ work areas /corridors)	Clients <u>must</u> don a non-medical mask whenever out of their cell. (Exception for hygiene and eating.)  If a quarantined unit happens to be a dorm, the clients <u>must</u> don a non-medical mask at all times. (exception for hygiene, eating and sleeping)  Clients must don a non-medical mask on all external escorts.

<b>Other areas of movement (Continued)</b>	Custody workers	Escort out of the Quarantine unit	Surgical/Procedural mask Face shield/sealed goggles
<b>Isolation Unit</b>			
<b>Isolation Unit</b>	Custody workers	Working the Isolation unit, suspected/ confirmed COVID-19 client unit that <u>does not involve direct hands-on care and can maintain 2 metres from client</u>	Surgical/ Procedural mask at all times Face shield/sealed goggles  *Perform hand hygiene frequently, before entering and after exiting the unit. Avoid touching face with unwashed hands
	Nurses & Custody Workers	Providing <u>direct hands-on care</u> to suspected/confirmed COVID-19 clients	Surgical/Procedural mask Gown Disposable gloves Face shield/sealed goggles
	Cleaners	Cleaning Isolation area	Surgical/Procedural mask Gown Gloves as outlined in Safety Data Sheet for product (as a minimum requirement, disposable gloves)  Face shield/sealed goggles  Boots or closed work shoes as per SDS sheet  *If an AGMP was performed, an N95 mask is to be used if cleaning is required before the settle time of 2 hours
<b>Other areas of movement/access through the facility (e.g. Video Court/ common areas/ program/work areas/corridors)</b>	Clients with or without respiratory symptoms	Other areas of movement/access through the facility (e.g. Video Court/ common areas/ program/ work areas/corridors)	Clients <u>must</u> don a non-medical mask whenever out of their cell. (Exception for hygiene and eating.)  If a quarantined unit happens to be a dorm, the clients <u>must</u> don a non-medical mask at all times (exception for hygiene, eating and sleeping)

<b>Other areas of movement</b> <b>Other areas of movement/access through the facility (Continued)</b>	Clients with or without respiratory symptoms (Continued)	Other areas of movement (Continued)	Clients must don a non-medical mask on all external escorts.
	Custody workers	Escort out of the Isolation unit	Surgical/Procedural mask Face shield/sealed goggles Gown Disposable gloves
<b>14-Day Admission / Assessment Unit</b>			
<b>14-Day Admission/ Assessment Unit</b>	Custody workers	Working on the 14-Day Admission/ Assessment unit	Surgical/Procedural mask Face Shield/sealed goggles  *Perform hand hygiene frequently, before entering and after exiting the unit. Avoid touching face with unwashed hands
	Nurses Custody Workers	Providing <u>direct hands-on care</u>	Surgical/Procedural mask Face Shield/sealed goggles Disposable gloves
	Cleaners	Cleaning assessment area	Surgical/Procedural mask Gown Gloves as outlined in Safety Data Sheet for product (as a minimum requirement, disposable gloves)  Face shield/sealed goggles (if risk of splash from organic material or chemicals)  Boots or closed work shoes as per SDS sheet  *If an AGMP was performed, an N95 mask is to be used if cleaning is required before the settle time of 2 hours

<b>Other areas of movement/access through the facility (e.g. Video Court/ common areas/ program/ work areas/ corridors)</b>	Clients	Other areas of movement/access through the facility (e.g. Video Court/ common areas/ program/ work areas/corridors)	Clients <u>must</u> don a non-medical mask whenever out of their cell. (Exception for hygiene and eating.)  If a quarantined unit happens to be a dorm, the clients <u>must</u> don a non-medical mask at all times (exception for hygiene, eating and sleeping)  Clients must don a non-medical mask on all external escorts.
	Custody workers	Escort out of the 14-day Admission/ Assessment unit	Surgical/Procedural mask Face Shield/sealed goggles
<b>Administrative Areas and Admitting</b>			
<b>Administrative areas</b>	All employees	Any activity that does not involve contact with suspected/ confirmed COVID-19 Clients	No COVID-19 specific PPE required – Standard Universal Precautions
<b>Admitting</b>	Nurses	Screening Providing <u>direct hands-on care</u>	Surgical/ Procedural mask Gown Disposable gloves Face shield/sealed goggles
	Custody Worker	Working the admission process, that <u>does not involve direct contact to suspected/confirmed COVID-19 clients and can maintain 2 metres from client</u>	No COVID-19 specific PPE required – Standard Universal Precautions  *Perform hand hygiene frequently, before entering and after exiting the unit.
	Custody workers	Working the admission process, that <u>does involve direct hands-on care and cannot maintain 2 metres from client</u>	Surgical/ Procedural mask Gown Disposable gloves Face shield/sealed goggles

<b>Admitting (Continued)</b>	Clients	New clients entering the facility and transporting to the 14-Day Assessment Unit	Clients <u>must</u> don a non-medical mask during entire admission process and movement until placed in cell.  *Perform hand hygiene frequently, before entering and after exiting the unit
	Cleaners	Cleaning the area	Surgical/Procedural mask Gown Face shield/sealed goggles Gloves as outlined in Safety Data Sheet for product (as a minimum requirement, disposable gloves)  Boots or closed work shoes as per SDS sheet  *If an AGMP was performed, a N95 mask is to be used if cleaning is required before the settle time of 2 hours
<b>Transport</b>			
<b>EMS transport</b>	Custody workers	Transporting suspected/confirmed COVID-19 clients to the referral health care facility	Surgical/Procedural mask Disposable gloves Face shield/sealed goggles *If an AGMP is performed – Custody Worker is not to be present unless they have been fit tested and have donned a N95 Respirator
	Custody workers	Transporting client <u>without</u> suspected/confirmed COVID-19 to the referral health care facility	No COVID-19 specific PPE required – Standard Universal Precautions
	Client with suspected COVID-19	Transport to the referral health care facility	Clients must don a non-medical mask on all external escorts.
	Client <u>without</u> suspected COVID-19	Transport to the referral health care facility	Clients must don a non-medical mask on all external escorts.

<b>Staff Transport</b>	Custody workers	Transporting suspected/ confirmed COVID-19 clients to the referral health care facility	Surgical/Procedural mask Disposable gloves Face shield/sealed goggles
		Transporting client <u>without</u> suspected/ confirmed COVID-19 to the referral health care facility	No COVID-19 specific PPE required – Standard Universal Precautions
	Client with suspected COVID-19	Transport to the health care facility	Clients must don a non-medical mask on all external escorts.
	Client <u>without</u> suspected COVID-19	Transport to the health care facility	Clients must don a non-medical mask on all external escorts.
	Cleaners	Cleaning after and between transport of clients	Surgical/Procedural mask Gown Gloves as outlined in Safety Data Sheet for product (as a minimum requirement, disposable gloves) Face shield/sealed goggles Boots or closed work Shoes as per SDS sheet
<b>Special Consideration for Rapid-Response Teams (RRT) or Emergency Response (ERT) Physically Responding and Handling of Client Disturbance or Code Response<sup>D</sup></b>			
<b>Isolation, Quarantine, Admission/ 14 Day Assessment unit/cell</b>	Responders	Responding to any code	Surgical/Procedural mask Disposable gloves Face shield/sealed goggles
	Client(s) involved in disturbance	Post-restraint, client(s) should be supplied shower	Non-medical mask Spit hood as per protocol
<b>All areas not designated as Isolation, Quarantine, 14 Day Assessment, and Admitting</b>	Responders	Responding to a code ( <u>other than</u> <u>CODE BLUE</u> )	No COVID-19 specific PPE required - Standard Universal Precautions

<b>All Code Blue Responses</b>	Custody Health care worker  Custody worker	Responding to <u>CODE BLUE</u>  CPR with compressions only (pending EMS arrival) if not an AGMP and does not require an N95 – see <b>Corrections COVID-19 CPR Policy</b>	Surgical/Procedural Mask Disposable gloves Face shield/sealed goggles Gown (N95 if in area within 2 hours of EMS performing AGMP)  Surgical/Procedural mask on client
	Cleaners	Cleaning area after <u>CODE BLUE response</u>	Surgical/Procedural mask Gown Gloves as outlined in Safety Data Sheet for product (as a minimum requirement, disposable gloves)  Face shield/sealed goggles  Boots or closed work Shoes as per SDS sheet  (N95 if in area within 2 hours of EMS performing AGMP)

**a** In addition to using the appropriate PPE, frequent hand hygiene and respiratory hygiene should always be performed. PPE should be discarded in an appropriate waste container after use, and hand hygiene should be performed before putting on and after taking off PPE.

**b** Not Applicable.

**c** Not Applicable

**d** All rapid-response team members must be trained in performing hand hygiene and how to put on and remove PPE to avoid self-contamination. For PPE specifications, refer to WHO’s [disease commodity package](#).<sup>27 28 29</sup>

<sup>27</sup> Saskatchewan Health Authority, Summary of PPE Recommendations for Patients Suspected or Confirmed to have COVID-19 in Primary Care March 2020; (Access date: April-October 2020) <https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/information-for-health-care-providers/ppe-infection-prevention-and-control>

<sup>28</sup> World Health Organization, Rational Use of Personal Protective Equipment for Corona Disease (COVID19) March 19, 2020; (Access date: March-October 2020) <https://apps.who.int/iris/handle/10665/331498>

<sup>29</sup> Saskatchewan Health Authority, Summary of PPE Recommendations for Patients Suspected or Confirmed to have COVID-19 in Acute Care, 2020; (Access date: April-October 2020) <https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/information-for-health-care-providers/ppe-infection-prevention-and-control>

## 11.2 Table 1: Continuous Masking for Custody Services

Adopted from the Saskatchewan Health Authorities Continuous Masking Talking Points and FAQ's and Continuous Masking Principals and Guidelines

**Note:** In every decision that is made, the top priority is the safety of all employees, clients and visitors. Continuous masking will be implemented on a directed basis to supplement the controls laid out in Table 11.1. Dependent on circumstances and advice from Health Officials, Custody Services could transition back and forth between the requirements laid out in Table 11.1 and Table 11.2.

### Introduction

After careful consideration, evaluation of risk assessments, to align with the Saskatchewan Health Authority (SHA) and Public Health recommendations, Custody Services will adopt and implement the SHA's continuous masking principals and guideline strategy in an effort to protect the health and safety of employees, clients and visitors. All employees will don a surgical/procedure mask as per Appendices 11.2 - Table 1 of this guideline. This requires employees to wear a surgical/procedure mask in common spaces (lobbies, hallways, elevators, etc.) and in the secure envelope as outlined below. Surgical/procedure masks can be used for multiple client interactions as outlined below.<sup>30</sup>

**Note:** If SHA changes direction on continuous masking, Custody Services would review current practices and adjust based on the results of the risk assessment and consultation of SHA and Public Health.

These enhanced measures, in combination with existing infection prevention and control measures (i.e. physical distancing, risk assessments, hand hygiene, environmental cleaning/disinfection, etc.) are guided by the following principles:

- As the Province re-opens, employees are at a higher level of exposure in the community. This information was evaluated during the risk assessment and considered when implementing suitable control measures, in addition to the consultation from SHA and Public Health.
- Prevention of transmission from employees who may be asymptomatic or mildly symptomatic carriers of the virus to our most vulnerable population.
- Prevention of transmission from clients or visitors who may be asymptomatic or mildly symptomatic carriers of the virus to employees.
- It is important that we continue to conserve PPE and use it responsibly and equitably to maintain a safe environment for our employees, clients and visitors.

### Guidelines for Continuous Masking

The process for employees to receive surgical/procedural mask(s) will be determined per facility, speak to your supervisor for site specific distribution.

1. All employees will continue to perform hand hygiene when they enter the building, frequently throughout their shift, and where indicated.
2. Employees who self-identify as working in the secure envelope of the facility and/or have interaction with clients or visitors, will be provided with a surgical/procedure mask at the start of their shift. Managers/supervisors or another designated point person at the facility will have access

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<sup>30</sup> Saskatchewan.ca, Saskatchewan Health Authority, Continuous Mask Guideline Talking Points and FAQs (Access Date June 1, 2020) <https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/information-for-health-care-providers/ppe-infection-prevention-and-control#continuous-mask-use>

to a supply of surgical/procedural masks to provide to employees, when new surgical/procedural masks are necessary. (See below for exceptions)

3. The surgical/procedural mask must be discarded and replaced after eating, going on a scheduled break, when it becomes wet/ moist, damaged or soiled and discarded at the end of your shift. <sup>31</sup>
4. Employees who supervise outside work are to follow the continuous masking principals and wear a surgical/procedural mask.
5. A surgical/procedural mask is required while travelling through all public/commons areas or while working in shared spaces. Examples include, going to the washroom, or photocopier. When employees are in private workspace for prolonged periods of time, without employee/clients/visitor contact, surgical/procedural masks can be doffed. When employees are required to leave the private workspace, or have interaction with employees/clients/visitors, they would then don a surgical/procedural mask. (Private workspace can be defined as an office or cubical where an employee can continuously maintain at least 2 metres from other employees/clients or visitors.)
6. When employees anticipate working in or travelling through the secure envelope, and/or have interaction with clients or visitors, they will don a surgical/procedural mask.
7. The re-use of surgical/procedural masks is NOT encouraged at this time due to the risk of self-contamination if the process of safely doffing, storing, and re-donning is not followed carefully. Should this change, appropriate training materials for surgical/procedural mask re-use will be provided.

Questions related to personal protective equipment (PPE) requirements may be directed to manager/supervisors. If your manager/supervisors are not able to resolve your question, they will consult with the Occupational Health and Safety Branch, Integrated Justice Services.

### Exceptions for Continuous Masking in the Secure Envelope

#### **Exercise Post and Perimeter Vehicles:**

Employees will wear a surgical/procedural mask while walking in the secure envelope, to the exercise post or perimeter vehicle. In locations where employees are working prolonged periods of time without client or employee interaction, surgical/procedural masks could be doffed and disposed of, once employees have reached the exercise post or perimeter vehicle. When required to return to the area where employees and clients would access, employees will don a surgical/procedural mask. A standardized sanitation process will be implemented for these areas.

#### **Private Offices, Within the Secure Envelope:**

Employees that work in an office located in the secure envelope, would be required to wear surgical/procedural mask while in the common spaces where client and employee contact is relevant. When employees are in private offices for prolonged periods of time without client or employee contact, they can doff and dispose of the surgical/procedural mask. When employees are required to leave the office, or have interaction with employees or clients, they would don a surgical/procedural mask. For intermittent users (i.e. those moving between the secure envelope of the facility and/or have interaction with clients, efforts will be made to organize activities to limit repeated exposures on the units/facility in an

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<sup>31</sup> Saskatchewan.ca, Saskatchewan Health Authority, Continuous Masking Principals and guidelines (Access Date June 1, 2020) <https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/information-for-health-care-providers/ppe-infection-prevention-and-control#continuous-mask-use>

effort to conserve PPE.)

### Guidelines for Source Control Masking – Clients and Visitors

The facilities will set up a one for one supervised daily non-medical mask exchange, ensuring that all parties have their hands sanitized prior to the exchange process. If the non-medical mask become soiled, damaged or wet it may be exchanged sooner.

#### 1. **Mandatory Client Masking Secure Facilities (14-Day Assessment Unit, Isolation Unit, or on a Quarantined Unit):**

- Clients must don a non-medical mask during entire admission process and movement until placed in cell.
- Clients must don a non-medical mask whenever out of their cell. (Exception for hygiene and eating.)
- If a quarantined unit happens to be a dorm, the clients must don a non-medical mask at all times (exception for hygiene, eating and sleeping)
- Clients must don a non-medical mask on all external escorts.

#### 2. **Mandatory Client Masking Secure Facilities (Non-Designated):**

- Clients must don a non-medical mask whenever out of their cell. (Exception for hygiene and eating.) This would include when on exercise together.
- Clients must don a non-medical mask on all external escorts.

#### 3. **Mandatory Client Masking Reduced and Open Custody Facilities:**

- Clients that are leaving the facility, for any reason, must don a non-medical mask prior to leaving and replace it with a clean non-medical mask once they have returned.
- Clients must don a non-medical mask whenever out of their cell/room or in dorm area. (Exception for hygiene, eating and sleeping).
- Open Custody Facilities will limit community outings to activities that ensure youth/employees avoid contact with members of the broader community. Youth must don a non-medical mask prior to leaving the facility, and replace it with a clean non-medical mask once they have returned.

#### 4. **Mandatory Client Masking Work Placements, Programs, Internal Movement for “Non-Designated” Clients in Secure Facilities:**

- All clients leaving the home non-designated unit for work detail, programming, or other internal facility movement must don a non-medical mask for duration of the activity.
- Clients must don a non-medical mask whenever out of their cell/room. (Exception for hygiene and eating.)

#### 5. **Mandatory Client Masking Individuals Entering Custody Services buildings:**

- Visitors walking through or working in the facility, will follow the continuous masking principals and don a non-medical mask. (i.e. Central Services, contractors, Doctors, Elders or visitors)

### Appropriate Surgical/Procedural Mask Use

- Ensure the colored side of the surgical/procedural mask is facing out
- Fit the moldable band to the nose bridge. Fit snugly to your face and below chin

- Secure the elastics around your ears
- If using ear protectors, follow the proper guidelines by ensuring they are disinfected or laundered at the end of each shift and that they are positioned properly
- Appropriate use and positioning of ear protectors:



- Do not touch surgical/procedural mask once in position
- If the surgical/procedural mask becomes soiled or damp, replace with a new one
- Surgical/procedural masks can be worn from one unit to another, including the designated Isolation/14-Day Assessment and the Quarantine units. Proper hand hygiene is imperative, wash hands prior to exiting and entering units. Employees can continue to wear the same surgical/procedural mask and eye protection between clients. Gowns and gloves will be removed and changed between clients. Eye protection can be disinfected/discarded after all interactions with clients suspected/confirmed to have COVID-19 are completed.<sup>32</sup>
- Where possible, employees should plan their tasks so that they would transition from non COVID-19 related units, to COVID-19 suspected/confirmed designated units. (Ideally this would line up with a break, the surgical/procedural mask would be doffed for the duration of the break and a fresh surgical/procedural mask would be donned when returning to client facing area)
- For intermittent users (i.e. those moving between the secure envelope of the facility and/or have interaction with clients), efforts will be made to organize activities to limit repeated exposures on the units/facility in an effort to conserve PPE. (i.e. change only when wet, damaged or soiled, when going on a scheduled break and at end of shift)
- It is important to stay hydrated. Efforts should be made to take hydration breaks during regularly scheduled breaks in efforts to conserve PPE use, as surgical/procedural masks must be discarded and replace once removed.

### What to Know About Wearing Surgical/Procedural Masks for Extended Periods of Time:

- **Avoid touching the surgical/procedural mask while wearing it**
- Remove the surgical/procedural mask using the appropriate technique; do not touch the front of the mask
- After removal or whenever a used surgical/procedural mask is inadvertently touched, clean hands using an alcohol- based hand rub or soap and water if hands are visibly dirty
- Do not pull the surgical/procedural mask off and put around your chin, neck or forehead, as this will increase the risk of self-contamination

<sup>32</sup> Saskatchewan.ca, Saskatchewan Health Authority, Continuous Mask Guideline Talking Points and FAQs (Access Date June-October 2020)  
<https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/information-for-health-care-providers/ppe-infection-prevention-and-control#continuous-mask-use>

- Make sure the surgical/procedural mask is covering both your mouth and your nose<sup>33</sup>

Entering the cell of a client suspected/confirmed to have COVID-19:

- Employees will NOT remove their surgical/procedural mask prior to entering the unit/cell
- Additional PPE will be put on (as outlined above) prior to entering
- When leaving the room,
  - gown and gloves will be removed;
  - Keep surgical/procedural mask on (unless wet, damaged or soiled);
  - Keep eye protection on if employee will be entering rooms of additional clients suspected/confirmed to have COVID-19; and
  - Disinfect/discard eye protection and perform hand hygiene after all suspected/confirmed to have COVID-19 client interactions have been completed

Entering the cell of a client suspected/confirmed to have COVID-19 where Aerosol-Generating Medical Procedure (AGMP) is being/has been performed:

- Employees will remove and discard their surgical/procedural mask prior to entering the room to put on the required personal protective equipment (N95 respirator, gown, gloves, eye protection)
- When leaving the room/cell, the gown and gloves will be removed
- If the employees will be entering cells of additional clients suspected/confirmed to have COVID-19 where AGMP is being/has been performed prior to leaving the clinical area, the N95 respirator and eye protection will be left on
- The N95 respirator and eye protection will be discarded and hand hygiene performed only after all interactions with clients requiring an AGMP have been completed

### Incorrect Surgical/Procedural Mask Use

- Do not tuck the surgical/procedural mask under your chin, place on top of your head, or hang it by one ear
- Do not let your nose stick out of the top of the surgical/procedural mask
- Do not reuse single-use surgical/procedural masks
- Incorrect use and position of ear protectors:



### Review of Proper Donning and Doffing

Proper donning and doffing is critical to prevent possible cross contamination.

To **don (put on)** a surgical/procedural mask:

<sup>33</sup> Saskatchewan.ca, Saskatchewan Health Authority, Continuous Mask Guideline Talking Points and FAQs (Access Date June-October 2020)  
<https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/information-for-health-care-providers/ppe-infection-prevention-and-control#continuous-mask-use>

- Wash hands thoroughly with soap and water, or use hand sanitizer where water is not available.
- Holding only the ear loops or straps, place a loop around each ear or tie straps. (Where pleated, pleats are pointed down toward chin.)
- To eliminate significant gaping, pull the top of the surgical/procedural mask over your nose and the bottom over your mouth and chin.
- Once the surgical/procedural mask is adjusted, try and avoid touching the surgical/procedural mask or face.
- Perform hand hygiene.

To **doff (remove)** surgical/procedural mask:

- Move to an assigned area for doffing, where an open top garbage bin is present.
- Wash hands thoroughly with soap and water, or use hand sanitizer where water is not available.
- Use both of the ear loops or straps and gently lift/untie and remove the surgical/procedural mask. Immediately place the surgical/procedural mask in open top garbage bin.
- Perform hand hygiene.