Non-Traditional PPE Guidelines & FAQs

Updated May 8, 2020

Colleague and provider safety is our top priority. In the midst of this current pandemic we are pursuing contingencies to preserve the supply of medical grade, disposable masks and respirators for colleagues and clinicians when caring for patients under investigation (PUI) and those with confirmed COVID-19 – similar to prior, recent pandemics.¹

We understand colleagues wish to protect themselves from exposure to COVID-19 in ways which go beyond CDC guidelines. To help colleagues feel safe and protected, see the following guidelines which allow for use of non-commercially/non-factory manufactured cotton masks in situations where exposure risk is low when not involved in direct care of patients.

All health care personnel providing care for COVID-19 PUIs, COVID-19 positive patients or any isolated patient must continue to follow CDC and MercyOne guidelines for Personal Protective Equipment (PPE) using factory-made, traditional PPE.

Non-commercially made PPE

Per CDC guidelines, MercyOne strongly encourages all colleagues to wear cotton masks while working. Care locations experiencing high-levels of COVID-19 patients or PUIs may require the use of cloth masks for colleagues and visitors at the discretion of their Incident Commander.

Nontraditional cloth masks, made of cotton, are not as protective as medical grade, disposable procedure or surgical masks and are not to be used for direct patient care except as described below.

The following is guidance on use of nontraditional, cloth masks by colleagues and clinicians:

- Do not use nontraditional cloth mask when caring for any PUI or patient with confirmed COVID-19. Instead follow requirements for appropriate personal protective equipment (PPE) based on CDC recommendations.
- Only wear nontraditional cloth mask when outside of a direct, clinical patient care area, e.g. leaving unit for breaks, transporting equipment, products, etc. through main, public corridors, colleagues who work in areas like registration and reception.
- Colleagues in non-acute care settings like Home Care and Senior Communities are strongly encouraged to wear cloth masks while working but need to remove the cloth mask and put on a disposable, medical grade mask for situations where transmission-based and standard precautions require use of a mask, e.g. if splashes or sprays of blood or body fluid are anticipated, resident is on Droplet Precautions for influenza, etc.
- Cloth masks used by colleagues outside of direct patient care can be kept by the colleague or clinician and laundered at home.
  - For home laundering, use hot water cycle and add liquid bleach according to instructions for the washing machine in use at their home.
- Cotton face masks should be created using the specs available here. You can also reference this video for instructions: https://youtu.be/mgCEprj1_Os
**Accepting Donations of Traditional PPE**
We continue to accept community donations of traditional PPE/equipment. Guidelines for accepting donations:

- It must be in its original, unopened packaging
- Must be approved by the local Incident Command Logistics Chief who will:
  - Inspect packaging for integrity and appropriate certification
  - Determine usability (consult with Clinical Operations and Planning Section Chiefs for Efficacy and Risk concerns)

**MercyOne Continues to Secure Supplies**
MercyOne’s supply chain and procurement teams continue to work to find new suppliers and manufacturers to supply needed PPE. Additionally, we are finding creative ways to produce PPE that meets the standards necessary to protect our colleagues.

- Each day we are leveraging our national supply chain to secure additional PPE for each hospital
- We are working out the means for allocation among our locations, and continuing to find other sources for production, in line with CDC guidelines, to address some of the global supply challenges for hospitals.
Cloth Mask Frequently Asked Questions
Nontraditional cloth masks, made of cotton, do not offer the same protection as medical grade, disposable procedure or surgical masks and are not to be used for care processes and procedures in which traditional PPE is required. The FAQs below are a companion to the guide on nontraditional PPE.

Q: If I am caring for COVID-19 patients, PUIs, and patients who are not suspect or confirmed, how would I manage the transition between a cloth mask and the traditional disposable medical grade mask?
A: A mask is required for all colleagues who enter our facilities. Colleagues in non-patient facing roles may wear a cloth mask. All patient facing colleagues are to wear a surgical or procedural mask. N95s are to be worn during aerosol generating procedures on COVID-19 positive patients or PUIs. As a reminder, all healthcare personnel providing care for the following populations or procedures must continue to follow Systemwide guidance based on CDC recommendations using appropriate Personal Protective Equipment (PPE) and existing applicable hospital policies. Examples of this appropriate use include:
- Care of PUIs or COVID-19 positive patients based on CDC’s recommendations that have been incorporated into System Office guidance
- Caring for patients in areas/units that receive a high volume of people with symptoms of fever and upper respiratory infection, e.g. Emergency Department
- Any patient requiring transmission-based isolation precautions

Q: If I am already wearing a cloth mask, can I put a surgical mask over it? Will it provide me with more protection?
A: No. Cloth masks do not provide the same protection as traditional, disposable medical grade masks. There is no additional benefit from wearing a cloth mask under a disposable one – just use the traditional, disposable mask and eye protection for the situation in which it is needed, e.g. entering room of a PUI or COVID-19 patient. Cloth masks are not considered PPE, since their capability to protect healthcare professionals is less than that of a traditional mask. Placing a surgical mask over a cloth mask will not increase your protection and could cause you to have difficulty breathing and communicating with the patient through the two masks.

Q: If I'm am entering a confirmed COVID-19 patient room, and I have a cloth mask on, can I put a face shield on over the cloth mask and forego the surgical mask? Won't the face shield keep my face protected?
A: No. The respiratory protection from a cloth mask is far less than a surgical mask, a face shield and cloth mask will not protect you from inhaling fine droplets if you are within six feet of the patient, particularly should the patient cough or sneeze.

Q: I work in a non-patient care area. Do I need a cloth mask?
A: Updated CDC guidelines require all colleagues to wear a mask. Colleagues in non-patient care areas are to wear cloth masks.

Q: I feel safer wearing a mask because I don’t know if I will be in contact with someone who has been exposed. Is this a best practice?
A: In light of new data about how COVID-19 spreads, along with evidence of widespread COVID-19 illness in communities across the country, CDC recommends that people wear a cloth face covering to cover their nose and mouth in the community setting. This is an additional public health measure people should take to reduce the spread of COVID-19 in addition to (not instead of) social distancing, frequent hand cleaning and other everyday preventive actions. A cloth face covering is not intended to protect the wearer, but may prevent the spread of virus from the wearer to others. This would be especially important in the event that someone is infected but does not have symptoms. A cloth face covering should be worn whenever people must go into public settings (grocery stores, for example). Colleagues are to wear masks correctly. Medical masks and N-95 respirators are reserved for healthcare workers and other first responders, as recommended by current CDC guidance. The most important ways to protect yourself against COVID19 are to clean your hands, disinfectant your work area, maintain social distancing protocols and remind those not wearing masks to do so.

Q: How can I obtain a cloth mask if I can’t make one at home?
A: Cloth masks have been ordered for our hospitals and are in production from textile manufacturers. The point at which these will be available vary so check with your supervisor for any updates on their availability at your workplace. Many hospitals have received offers by people in the community to make cloth masks. These are acceptable to use as well but each ministry that receives these donations will arrange to launder them before making them available. Discuss the potential availability of a cloth mask with your immediate supervisor.

Q: Can I wear the same cloth mask all shift?
A: When worn all day, masks will likely become damp and soiled. Should you notice your mask is soiled, becoming damp, or it is difficult to breathe through, you should replace the mask with a clean one.

Q: Should I wash my cloth mask at the end of each shift?
A: When worn all day, masks will retain expired respiratory moisture and become soiled. We recommend that you carefully remove your mask and launder it in hot water and laundry soap, adding bleach to the load. Because these masks are not worn during patient care, they can safely be transported home and washed when soiled or damp.

Q: I don’t work in acute care, I work in a community-based setting. Won’t a cloth mask do?
A: Colleagues in non-acute care settings like Home Care and Senior Communities can wear cloth masks between patients but need to remove the cloth mask and put on a procedural mask for all patient care.

Q: I accidently failed to mask with a regular surgical mask entering a PUI room. Should I report this?
A: You should notify your immediate supervisor right away and complete an incident report. Your supervisor will provide you with instructions.