MEMO

Date: January 6, 2021
To: All Staff
From: Health Service Delivery Organization CEOs (Shared Health, Winnipeg Regional Health Authority, Southern Health–Santé Sud, Prairie Mountain Health, Northern Health Region, Interlake-Eastern Regional Health Authority, CancerCare Manitoba, Addictions Foundation of Manitoba)
Re: Personal Protective Equipment (PPE) Requirements - UPDATED

This memo applies to all health system operators (including Shared Health, regional health authorities, CancerCare Manitoba, and Addictions Foundation of Manitoba, as well as any affiliate or non-devolved facilities) across acute, long term care, community/in-home care and public health.

While conservation of personal protective equipment remains a necessary component of Manitoba’s approach to ensuring the protection of health care workers for the duration of the pandemic, access to PPE supplies has improved in recent months and stockpiles have stabilized. At the same time, local transmission of COVID-19 throughout Manitoba has increased.

Within the context of high community transmission of COVID-19, ongoing discussions with Manitoba’s health care unions have identified settings and situations where employers will be required to provide an N95 respirator to health care workers providing direct care to someone who has, or who is suspected of having, the virus.

Updated PPE Requirements require all health system operators to provide a fit tested N95 respirator to health care workers providing care in the following situations:

- Direct care of Red Zone (COVID-positive) and/or Orange Zone (COVID-suspect) individuals across all settings;
- Labour and delivery, with the exception of those staff caring for patients who have received a negative COVID-19 test result on the day of labour/delivery or the day prior;
- Emergency Department and urgent care centres, with the exception of staff working in designated low acuity areas where Green Zone patients are directed following screening at triage;
- Direct care of undifferentiated patients/residents/clients (e.g. unable to provide history, unreliable history, unconscious, etc.); and
- Performance of nasopharyngeal swabs at COVID-19 testing locations.

A point of care risk assessment (PCRA) for COVID-19 is **not required** in the above situations in order for health care workers to be provided a N95. Accessing an N95 in these situations is a matter of a health care worker’s independent exercise of professional judgment.
Operators are responsible for ensuring the education and auditing of appropriate use and conservation of PPE as well as to support accelerated fit-testing initiatives underway. Operators must ensure N95s are provided to health care workers in the above situations and must implement practices to ensure simplified access, including when a manager is not available.

In the above settings/situations, physicians and staff may, based on independently exercised professional judgment, choose to wear a procedure mask rather than an N95 respirator as long as an aerosol-generating medical procedure (AGMP) is not being performed. Those that exercise their professional judgment to wear a procedure mask instead must first complete a PCRA to determine there is no/low risk of an AGMP. The PCRA should include consideration of the patient’s volume of respiratory secretions as well as their ability to control secretions; the environment in which care is being provided; and the patient's ability to comply with Infection Prevention and Control practices.

For any non-AGMP situation, staff wearing a procedure mask will not be considered exposed and will not be considered in breach of PPE requirements.

Physicians and staff present during AGMPs are required to wear an N95 respirator or equivalent and eye protection, regardless of the zone (Red, Orange or Green) and the duration of the individual patient/resident/client length of stay or admission.

In situations not outlined above, e.g. non-AGMP, direct care of Green Zone patients/residents/clients, a PCRA continues to be necessary in advance of an N95 respirator being requested.

In these circumstances, the nurse or health care worker should be prepared to indicate the specific circumstances identified in their PCRA, such as:

- Does the patient have new or sudden onset of any symptom associated with COVID-19?
- Has the patient revealed new or previously undisclosed history or exposure to COVID-19?
- Is an AGMP planned, in progress or anticipated?

Manitoba’s health system operators are confident our health workforce has the necessary skills, knowledge and experience to select the appropriate PPE for each encounter while remaining mindful of the importance of preserving these vital supplies for the duration of the pandemic.

Additional educational resources have been developed to support this change and are available by referring to: sharedhealthmb.ca/covidppe.

In the event of a risk of critical supply levels in one or more categories of PPE, allocation of PPE and criteria for use may be modified.