Day Services - Personal Protective Equipment (PPE) and Facemasks and Face Coverings

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Applies to: Policy number: TEMP – CI9 Day Services - Personal Protective Equipment (PPE) and Facemasks and Face Coverings

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Face Masks and Coverings:

1. To slow the spread of COVID-19, program staff must wear a facemask or face covering while serving participants and interacting with caregivers/guardians and essential visitors. Program staff are required to a face mask or face covering whenever 6 feet of social distancing is not possible. Programs are encouraged to consider the use of transparent face coverings to allow for the reading of facial expressions. If program staff are assisting with activities of daily living or providing assistance that requires direct contact with participants, they will use cloth face coverings or, in available, disposable facemasks.

2. When possible, programs must ensure face masks or cloth face coverings are used by participants who can safely and appropriately wear, remove, and handle masks. Additional guidance on use of face coverings and masks by participants is as follows:
   • Facemasks and face coverings do not need to be worn while engaging in active outdoor activities, if participants are able to keep physical distance (at least 6 feet) from others.
   • Participants must be supervised when wearing a facemask or covering. If wearing the facemask or covering causes the participant to touch their face more frequently, staff must reconsider whether the mask is appropriate for the participant.

3. If using a disposable mask, follow CDC guidance on proper removal. Grasp bottom ties or elastics of the mask, then the ones at the top, and remove without touching the front. Discard in a waste container and wash hands or use an alcohol-based hand sanitizer immediately.

4. Programs must enforce the wearing of face masks or cloth face coverings by every person who is on the premises and during programming, as well as during pick-up and drop-off. Programs must regularly remind participants, staff and caregivers/guardians that all individuals should adhere to the CDC’s recommendations for wearing a mask or cloth face covering whenever going out in public and/or around other people.
5. Programs must teach and reinforce use of masks among all program staff and participants. Staff and participants must be frequently reminded not to touch the face covering and to wash their hands frequently. Information must be provided to all staff and participants on proper use, removal, and washing of cloth face coverings. Refer to the latest CDC and Massachusetts DPH guidance on PPE and face coverings, as guidance is update regularly.

**When to Use Gloves:**
Program staff must wear gloves at all times during certain activities. Programs should consult with a participant’s medical records and identify any allergies when determining type of gloves to use. Handwashing or use of an alcohol-based hand sanitizer before and after donning and doffing gloves for these procedures is always required. Gloves must be worn during:
- Assistance with Activities of Daily Living;
- Food preparation
- Any activity requiring physical contact with participants or others.

**Additional Guidance on Using Gloves:**
To reduce cross-contamination, disposable gloves should always be discarded after the following instances.
- After removing gloves for any reason, hand hygiene should be performed with alcohol-based hand sanitizer or soap and warm water.
- Visible soiling or contamination with blood, respiratory or nasal secretions, or other body fluids occurs.
- Any signs of damage (e.g., holes, rips, tearing) or degradation are observed.
- Previously removed gloves should not be put back on as the risk of tearing and contamination increases. Therefore, disposable glove “re-use” should not be performed.
- In addition, gloves should be removed following activities where glove usage is required during activities of daily living and activities requiring contact.

**Participants Requiring Additional ADL Support**
- Supporting Participants who require additional ADL support: Some participants will require unique supports in programs that may make it less possible to practice social distancing and will require ample staff support to carry out the necessary hygiene practices. Programs must ensure that the program is adequately staffed, and that staff are prepared and properly trained to accommodate participant’s needs.
- Staff must be prepared to provide hands-on assistance to participants who require additional support with activities of daily living such as feeding, toileting, and changing of clothes. To protect themselves, staff who care for participants requiring hands-on assistance for routine care activities, including toileting, feeding, washing, or dressing, and other direct contact activities must wear a long-sleeved, button down, oversized shirt over their clothing and wear long hair up or tied back during all activities requiring direct contact with a participant. Staff must change outer clothing if body fluids from the participant get on it. Staff must change the participant’s clothing if body fluids get on it. Soiled clothing must be placed in a plastic bag until it can be sent home with the participant to be washed.
- The programs nurse must be adequately trained and prepared to support participants with health care needs with the necessary provisions of health care such as administration of medication needed throughout the day, tube feedings, blood sugar
checks, and allergies to certain foods. For more invasive procedures, staff must protect themselves by wearing a gown or other body covering (e.g., an oversized button-down, long sleeved shirt, etc.), eye protection, and face mask.

- In the initial stages of reopening, a staff will be stationed at bathrooms to monitor handwashing and ensure proper hygiene protocols. The monitor will also ensure participants are going only to the bathroom and return to their room in a timely manner, this is to decrease any wondering throughout the building. Each room will have a designated bathroom that is clearly labeled. Staff will remind the participants every morning in morning meeting which bathroom is designated to their room. They will use that bathroom only throughout the day to help minimize the risk of infection and to help staff track a possible exposure to Covid-19 if someone tests positive in the program.

**Emergency Access to PPE:**
The Commonwealth of Massachusetts is acutely aware of rapidly expanding needs for personal protective equipment (PPE) for numerous organizations across the state – including masks, gowns, gloves, and eye protection. PPE resources are limited in the Commonwealth and we must conserve the use of PPE. Currently, DPH and the Massachusetts Emergency Management Agency (MEMA) are only able to serve as a bridge when an entity has a critically low supply. The Commonwealth is not able to supplant the normal supply chain for PPE.

Providers should make every available effort, in partnership with their respective organizations and associations, to obtain PPE through their supply chains. If a provider-operated congregate care program experiences emergency shortage of PPE, they should contact their regional MEMA office to request emergency supply. Providers should be prepared to describe PPE normally used (if applicable), quantity needed, and burn rate (how quickly supplies are exhausted).

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Providers should regularly check the Massachusetts DPH website for guidance regarding PPE: [https://www.mass.gov/info-details/personal-protective-equipment-ppe-during-covid-19](https://www.mass.gov/info-details/personal-protective-equipment-ppe-during-covid-19)