

## Update on Face Coverings in Healthcare: FAQs Updated 24 July 2020

Additional guidance has been provided by the Scottish Government. We have included this guidance at the beginning of this FAQ for ease of reference; we would encourage you to read this document in full and if you have further questions please speak to your line manager.

### **Can I remove my mask to take a drink?**

Yes. It is important to keep hydrated throughout your shift, particularly as it can become hot and uncomfortable wearing masks over a long period of time. Staff should wash their hands prior to removing their mask and taking a drink.

Hands should be washed after taking a drink and putting a new mask on. We would also encourage employers to plan breaks for staff not to wear a mask, at an appropriate time, and in a staggered, sensible way

### **Why does this change only apply in hospital and care home settings? I work in a GP practice or in the community – do I have to wear a mask?**

The greatest risk of outbreaks and staff to staff transmission has so far been observed in hospital and care home settings. Therefore the extended use of face masks has been targeted to these care settings at present.

The existing UK guidance on use of PPE still applies in GP practice and community settings, and in practice this means that any clinical staff treating patients should wear a face mask (and gloves, apron and eye protection if appropriate to the task) and follow good hand hygiene practices.

However, the UK-wide infection prevention and control guidance is being reviewed, and potential changes may impact on the wider use of masks for certain settings, such as primary and community care. The Scottish Government is keeping this under review and will update the guidance, if required.

### **There are out of hours and primary care services who work out of hospital outpatient departments do these staff have to wear a mask?**

All patients, visitors and other staff using these departments will be advised to

wear masks. Therefore we are asking all clinical staff who work from a hospital base to follow the guidance and wear masks as outlined above.

In general, there are higher numbers of staff and patients in hospital settings than in GP or other community premises, so there is a greater opportunity for spread of infection in this context. Different practices in the same building are also likely to lead to confusion and concern for patients, visitors and staff.

**Do the receptionists and clinicians have to wear masks at all times in the outpatient departments or is it just the clinicians when seeing patients?**

Receptionists should also wear a mask at all times when working in a ward, clinic or other department where patients are present and 2m physical distancing is not possible or if barriers are not in place, i.e. screens, to separate staff.

**Can I choose to wear a mask if I want to/am worried?**

Yes. All other PPE should be selected and worn to provide adequate protection against the risks associated with the task or procedure being undertaken. Staff should continue to adhere to the COVID19 IPC guidance when providing direct patient care.

**Do I have to wear a mask in the corridor or if moving from my office across a ward or department where there are patients present?**

You are encouraged to wear a mask or face covering in corridors and other public spaces in hospitals and care homes where it is not always possible to observe physical distancing measures.

**Will my health board provide masks for me to wear if I travel to work on public transport?**

No. Individuals can choose which type of face covering they wish to wear outside of work. This does not have to be a surgical face mask. Masks are also provided by some transport providers. However, it is mandatory to wear a face

covering, at this time

**Is 'extended' use of a mask different to 'sessional use' of a mask?**

Yes. Extended use of masks relates to the specific guidance that clinical staff should wear a mask at all times for the duration of their shift in a clinical environment.

During this time, staff should change their mask regularly in line with existing PPE guidance – and that a mask can continue to be worn on a sessional basis for up to 4 hours, and between patient care episodes or tasks where the mask is intact, comfortable, dry and free from any visible contamination.

**Do I have to wear a mask if I am able to physically distance from others?**

Yes, if you are in a ward or clinical area. No, if you are in a non-clinical or public space, however you may wish to wear a face covering.

**Do I need to wear a mask if I am face fit testing?**

Yes. All testers should wear a mask when carrying out face fit testing as this role will prevent you from physical distancing.

**I have communication challenges, that requires me to lip read, can I ask for the mask to be removed?**

Yes, if it is safe to do so. The person wearing a face covering or face mask needs to understand the risk of doing so. If they choose to do so, then the person should wash their hands, physically distance and remove their mask. If physical distancing is not possible, then the person should keep the mask on, and alternative communications methods used – such as writing information down or text to speech software.

If a staff member needs to lip read then, it is acceptable that only the staff member wear a Fluid Resistant Surgical Mask (which has protective and source control properties).

The advice is not to use visors on their own as an alternative to face masks.

Face visors are designed to reduce the risk of splashes from bloods and bodily

fluids and are usually worn with facemasks in a healthcare setting. In addition, it is important to note that employers are responsible for ensuring that staff wear the correct PPE for the tasks they need to undertake.

The Scottish Government is working with businesses on the supply of transparent masks for health and care settings – however, transparent masks are not classed as PPE at this time. Work is underway to get transparent face masks upgraded and fit for purpose. There is no exact timescale for this work to be complete.

Visitors to hospitals and care homes can use transparent face masks as a face covering. However, these are more expensive, and visitors should not be forced to wear them.

## **1. Why is this additional guidance needed?**

The Chief Medical Officer and Chief Nursing Officer are responding to new information which suggests additional measures may be useful in containing the spread of coronavirus in hospitals and care homes. It is recognised that within healthcare facilities it is sometimes difficult to comply with the 2 metre distancing rules e.g. in some corridors, public areas, waiting areas etc. In these instances, wearing a mask/face covering may help reduce spread from those with COVID-19. Staff and visitors may be symptomatic, presymptomatic or asymptomatic and as such NHS Grampian is ensuring we can respond to this guidance by offering facemasks for use by staff and those accessing any of our buildings within hospital sites and care facilities, including visitors as restrictions are lifted.

It continues to be required that staff working in clinical areas of an acute adult, mental health/learning disability and community hospital or care home for the elderly wear a Type 11R fluid resistant mask at all times within the clinical setting. Please note in office areas it is expected that the 2 metre physical distancing measures apply, and masks should only be used in exceptional circumstances where 2 metre distancing has proved to be impossible to achieve.

This guidance is specific to public areas in buildings within NHS Grampian hospital sites and all care homes (now collectively referred to as 'designated sites') and is not applicable to GP Practice premises or other clinical settings not located on a hospital site.

**2. Are all staff and visitors to wear a face covering or a provided mask when they enter the public areas of designated sites?**

Yes. (But see Q 17&18 below) The new guidance requires staff and any members of the public who are permitted to enter these sites to wear some kind of face covering in public areas of designated sites. These face coverings may be either a fabric face covering or an IIR surgical face. Staff or members of the public who choose to wear an IIR surgical face mask can collect these at the mask collection points located in main entrances of all designated sites. All staff and members of the public are encouraged to adhere to the 2 metre social distancing rules even while wearing masks. Staff may also access masks from their work area mask collection points prior to re-entering public areas where this guidance applies. [This poster](#) is available for posting at mask collection points to instruct on the correct procedures for donning the provided masks.

**3. Q. How do I obtain Type 11R Fluid Repellent Surgical Masks, hand sanitiser, or waste bins for my area?**

Type 11R Fluid Repellent Surgical Masks can be ordered through PECOS using SKU 249824. To request a supply of 500ml bottles of hand sanitiser and lidded waste bins please email your request to:

[gram-uhb.covid19supplies@nhs.net](mailto:gram-uhb.covid19supplies@nhs.net)

**4. What can I do if I'm having trouble getting the provided masks to fit comfortably?**

[Additional guidance](#) is available to assist staff to try different ways of donning the mask and achieve a comfortable fit.

**5. Can staff choose to wear their own face covering?**

All staff in public areas of the designated site may choose to wear their own face covering, however any staff who enter a clinical area, and who are

providing clinical care, or who have difficulty in maintaining 2 metre physical distancing must use the IIR masks provided. It is important that these are worn and disposed of correctly. Staff use of personally acquired masks or face coverings is not permitted in these clinical areas.

**6. Can staff take provided masks home with them to use while outside of NHS Grampian facilities?**

No. The provided masks are for use only within designated sites and should not be removed from the premises for personal use. The provided masks are single use and should not be reused under any circumstances.

**7. What do staff do if they develop irritation or sensitivity to the provided masks?**

Please speak to your line manager or a Responsible Person, as per the guidance contained in the Protocol on Managing Skin Care at Work. Please note this is an Intranet link and will not work on non-network devices. It is very important to address skin problems early and if necessary, your manager will make an OHS referral by emailing the skin health surveillance questionnaire directly to OHS at [grampianohs@nhs.net](mailto:grampianohs@nhs.net).

**8. Can visitors choose to wear their own face covering?**

Yes, visitors can choose to wear their own face covering if that is their preference. Visitors are encouraged to perform hand hygiene when entering the facilities and if they touch their own face covering. Visitors are welcome to replace their own face covering with an NHS mask if their face covering for any reason needs to be changed.

**9. Should the mask be taken off if going into a shop?**

No. If visitors are wearing a mask or a face covering it should ideally stay on until exiting the building.

Staff should only remove the provided face masks or their own face covering when exiting the building, in rest areas (while maintaining physical distancing), or returning to their normal work area following appropriate doffing procedures. If their normal work area is in a clinical setting, they should don a new mask when entering or exiting their own clinical area.

Shops are considered public spaces, not rest areas.

If a mask becomes dislodged or damp through use, it should be disposed of correctly into the appropriate waste stream as per the guidance below.

**10. Where can I safely dispose of a Type 11R mask after use?**

All staff who have been working in clinical areas should dispose of the mask in the designated orange waste bags on location. Visitors or staff not directly involved in treating patients can dispose of their surgical face mask after use in the lidded orange bag waste bins on leaving the healthcare premises.

Where IIR surgical face masks need to be disposed of in a non-clinical area they may be disposed of in a lidded black bag waste bin. Areas that do not have lidded black bag waste bins can order these bins by emailing

[gram-uhb.covid19supplies@nhs.net](mailto:gram-uhb.covid19supplies@nhs.net)

**11. Do staff, patients and visitors need to wear masks in offsite clinics not contained within a hospital site e.g. Health Village?**

Not necessarily. Staff, patients and visitors should follow the policies of these clinics which should be prominently displayed.

**12. Do staff who have an office including, in any hospital or clinical setting, need to wear a mask in their office?**

It should not normally be necessary for staff to wear masks whilst in their offices as the 2 metre physical distancing should be adhered to

Please consult the safer workplaces website for additional information:

<https://covid19.nhsgrampian.org/for-nhs-grampian-staff/safe-workplaces/>

Note however that staff are required to wear masks or face coverings in the public areas of any designated site, and masks should be worn if passing through a clinical area to access offices.

**13. Do patients need to wear a mask if they want to visit areas out-with their ward such as a shop?**

Patients who have symptoms of infection especially respiratory tract infection / CoVID-19 should not leave their single rooms. Asymptomatic patients must use a mask or face covering as they move about the facilities including shops. (Exemptions apply as in Qs 17&18 below). Staff should ensure that patients

understand how to use a mask safely before they leave the ward.

#### **14. Do patients need to wear masks in the ward?**

In clinical areas, communal waiting areas and during transportation, it is recommended that possible or confirmed COVID-19 cases wear a surgical face mask if this can be tolerated. In a single room setting this is not required unless care is being provided. In all other instances this should be subject to the outcome of a risk assessment in each ward area and should be informed by an overall clinical risk assessment for each patient or the patient group in the ward.

#### **15. When should patients replace their mask?**

In instances where patients are wearing a mask, and this either becomes dislodged or damp through use, they should be encouraged to dispose of it correctly in an orange waste bag and put on a new mask.

#### **16. Do children need to wear masks over a certain age?**

Parents can choose to use the provided masks for themselves and for their children over 5 years of age. Scottish Government Guidance indicates that children under 5 years should not use face coverings including masks.

Parents may choose to use their own face covering or personally acquired masks for themselves or their children over 5 years of age.

#### **17. What conditions are exempt from wearing a face mask in public areas of the facilities?**

The use of the provided masks or face coverings in the public areas of designated sites is subject to certain exclusions. People who find the wearing of face coverings to be detrimental to their condition (such as people with asthma, chronic obstructive pulmonary disease, certain phobias and skin conditions) can be exempted from the requirement to wear a mask or face covering (but only in non-clinical areas) People will not be refused access to the facilities if they are unable to wear the provided masks or a face covering.

#### **18. Do they have to evidence reasons for exemption?**

No. Staff and members of the public who attest that they are unable to wear a

mask or face covering will not be asked to provide any evidence of their reason for exemption.

**19. What happens if someone refuses, do security have authority to stop them entering?**

Where possible, staff shall invite each person entering a designated site to sanitise their hands and either wear a face covering or don the provided mask. In buildings where it is not possible to have staff or security monitoring the donning of the mask, clear signage will be provided. Usage of the provided masks is subject to Q 17&18 above, and access to facilities will not be denied to those who are unable to wear a face covering or the provided mask.

**20. Who shall be available to help with putting on and removing Type 11R Masks if assistance is required?**

Visual instructions on how to don or doff the mask will be located at each mask holding point at the entrance of the buildings where this guidance applies. If you have difficulty putting on the mask, take it with you and ask an available member of NHS staff to assist you before you enter.

**21. What happens if someone is not wearing a face covering or mask and is observed not to be adhering to the 2 metre physical distancing rules?**

Everyone will be encouraged to wear a mask to keep themselves and others safe while in a clinical environment. If they are unable to wear a mask they must ensure complete adherence to physical distancing and other hygiene measures such as frequent hand washing, and any other instructions from clinical staff.

Should staff be repeatedly observed to be ignoring physical distancing during their working day, their Manager, or those who witness the breaches should remind the staff member of the importance of physical distancing if they feel comfortable in doing so. If reminding that member of staff does not result in compliance with physical distancing, their Manager should consider progressing to the NHS Scotland Conduct Policy, using the Early Resolution process initially.

## **22. Some staff have read the National guidance and want clarity as to why we are saying something different?**

The National Guidance has been reviewed in line with our current operational requirements, and local context of infection rates, with specialist input. In general, the guidance is being followed with local adaptation. For example, in NHS Grampian it was decided that the guidance would apply to paediatric areas as ARI is attached to RACH via the link corridor and both staff and patients move freely in the public spaces between the two buildings.

## **23. Why is the guidance changing all the time?**

Guidance is continually updated in light of new and emerging evidence, which is important when responding to a novel disease. This is why the guidance keeps evolving, and this evolution in response to evidence is the fundamental basis for evidence based care.

## **24. Why is the guidance so complicated?**

Healthcare facilities are complex institutions with complex and individualised care pathways and this makes it difficult to issue 'one size fits all' type guidance. NHS Grampian has implemented this guidance with local adaptation in order to best provide for the needs of staff and visitors within our own institutions. These general principles require to be applied to your local context. If you have any doubt about the best process to follow in your specific situation please discuss with and follow advice from your line manager.