

## INTERIM GUIDANCE ON THE WIDER USE OF FACE MASKS FOR STAFF IN HEALTH AND SOCIAL CARE

### FREQUENTLY ASKED QUESTIONS

#### **Why has the guidance changed?**

There is new and emerging scientific evidence about the risk of spread of COVID-19 from people who are not displaying any symptoms but can still be infectious. This is either because they have the virus but have not yet become unwell –‘pre-symptomatic’-or because they are carrying the virus and have no symptoms –‘asymptomatic’.

Because it is often difficult in hospitals and other residential care settings to maintain physical distancing there is a risk that the infection can be spread from person to person.

Patients in our hospitals are often very vulnerable to infection because of underlying illness or age.

The extended use of masks by health and social care workers is designed to protect both staff and patients.

#### **What does the guidance mean for staff?**

All staff who work within a clinical area, i.e. ward or outpatient department, are required to wear a Type IIR fluid resistant surgical face mask (FRSFM) at all times whilst in the ward or department. Any member of staff who does not normally work in these areas must also wear a FRSFM staff on entry to the ward or department.

There is no requirement for staff to wear a FRSFM in other areas of the hospital e.g. offices, laboratories, canteens, R&R hubs whilst working in these areas if they can physically distance.

#### **Does the new guidance replace the national infection control guidance for the direct care of patients?**

**No.** This new guidance is in **addition** to the existing infection control guidance. **It is still a requirement for staff to wear disposable gloves, plastic apron and a FRSFM, whilst risk assessing for eye protection, for all direct patient care within 2 metres.** Gloves and plastic aprons remain single use whilst face masks and eye protection can be worn sessionally.

#### **Does the new guidance remove the need for physical distancing?**

**No.** Physical distancing remains one of the most important measures in reducing the transmission of COVID-19. The extended use of face masks in settings where there is an increased risk of outbreaks of infection provide an additional control measure. Staff must do all they can to ensure physical distancing within clinical areas. It will also help reduce the risk of transmission where staff are unable to physically distance from their work colleagues.

#### **When should a FRSFM be worn in clinical areas?**

The FRSFM must be put on when entering the ward or outpatient department. Therefore local provision should be made to have these available at the entrances to these areas.

For staff who are working within the clinical area a FRSFM mask is required at all times.

### **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.

### **When should a mask be changed?**

The mask may require to be changed several times during your shift, e.g. if it becomes moist, damaged or contaminated. There may also be times when it requires to be changed between different types of clinical activity. When being worn for sessional use, e.g. when care is being delivered to patients who are being isolated with Transmission Based Precautions, e.g. MRSA, C. diff infection or a respiratory infection.

There is no specified time limit for wearing a face mask. Staff should change their masks when they feel it is necessary.

### **It is safe to change masks within the ward or outpatient departments?**

Yes. Observe physical distancing whilst doing so. Hand hygiene must be performed before and after removal of the mask.

### **When should a mask be removed?**

The mask should be removed on leaving the ward or department, except where the mask is being worn whilst transporting a patient between departments or a number of clinical areas are being visited in sequence e.g. deliveries, walk rounds, etc. In these circumstances a mask can continuously be worn in transit between wards

Hand hygiene must be carried out on entering and leaving.

### **Why is there a distinction between clinical areas and non-clinical areas?**

It has become clear that clinical areas are often the source of outbreaks of COVID-19 with transmission occurring from those who are asymptomatic at the time. It is also more difficult to ensure physical distancing in these areas.

### **I am a ‘clinical’ member of staff and I work in a hospital – but not in a ward – do I have to wear a mask?**

You should wear a mask at all times when you are working in a ward, clinic or other department where patients are present

### **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?**

Both should wear a mask at all times when working in a ward, clinic or other department where patients are present. However, if you work behind a screen and can maintain 2 metres physical distance from your co-workers **at all times** there is no requirement to wear a mask.

### **I have a medical condition which makes it difficult for me to wear a mask or find it difficult to tolerate wearing a surgical face mask for a prolonged period of time.**

Please discuss this with your line manager in the first instance to ensure that you have the support you need, and that you are confident that you are appropriately protected.

**You will not be ‘forced’ to wear a mask.**

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

Yes, in line with previous advice, you can choose to wear Personal Protective Equipment (PPE) appropriate to and not exceeding the level specified in the current UK guidance where you perceive there to be a risk to yourself.

**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?**

There is no requirement to wear a mask in public corridors or out with the clinical area, **providing you can maintain physical distancing.**

**Can I wear my own face mask at work?**

No. This is not appropriate for **clinical care delivery** as these are unlikely to provide the correct level of protection required for this. However Staff should consider wearing a non-medical fabric face covering **out with** the clinical areas, when not on duty, **where it is not possible to observe physical distancing** measures, in particular hospital shops, in line with national guidance.

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

If you are in a ward or clinical area where patients are present you are required to wear a mask. If you are in a ward /department office or duty room, and able to physically distance, there is no need to wear a mask.

**What should I do if a patient or visitor refuses to wear a mask?**

Please politely encourage patients and visitors to comply with the request to use a face covering. At all times hand hygiene and physical distancing is recommended.

**If clinical areas are able to risk assess and evidence that they are able to physical distance are they going to be allowed to do so or will this be a blanket 'all areas must wear face masks'?**

No. This is a mandatory policy change from Scottish Government, and staff are asked to comply with this change. The rationale for the change is to protect staff and patients based on emerging scientific evidence.

**Are there situations where face masks can be removed in clinical areas?**

It is acceptable to remove a face mask within a clinical area for a short period of time if there is a clinical need to do so, e.g. communicating with a patient where lip reading is part of that communication or the patient is distressed. Physical distancing must be maintained at all times while the mask is removed and hand hygiene and a new mask put on when required.

**What is the process for disposing of masks?**

In clinical areas masks must be disposed of into an orange clinical waste bag. Provision should be made to ensure that clinical waste bins are located at or as near to the exit of the ward or department as possible. Alcohol hand rub should also be available.