



## HOMES AND SENIORS SERVICES

### POLICY & PROCEDURE NUMBER: 2.24

DEPARTMENT: *Infection Control*

SUBJECT: *Universal Masking for Residents*

APPROVAL DATE: March 2021

REVISION DATE: November 2022

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### PURPOSE

To ensure a safe environment that follows provincially mandated directives and protocols, this policy provides guidance on universal masking for residents in Long-term care.

**Minister's Directive: COVID-19 response measures for long-term care homes, August 30 2022, states LTCHs are required to have policies regarding masking for residents. It is strongly recommended that residents wear masks in common indoor areas in the LTCH as tolerated. LTCHs are also required to follow any additional directions provided by provincial, local public health unit or municipal bylaws.**

Last updated October 14 2022

**For residents:** homes are required to have policies regarding masking for residents. While there is no requirement for residents to wear a mask inside of the home, a home's policies must set out that residents must be encouraged to wear or be assisted to wear a medical mask or non-medical mask when receiving direct care from staff, when in common areas with other residents (with the exception of mealtimes), and when receiving a visitor, as tolerated.

- SARS-CoV-2 is transmitted between individuals through close contact and droplets. Universal masking, the process of wearing a face mask, covers an individual's nose and mouth, thereby reducing transmission of large respiratory droplets to others while talking, coughing or sneezing.
- To prevent asymptomatic transmission of COVID-19, universal masking is implemented as source control for those working, visiting, and where possible, living in group settings in LTCH's.
- The homes will encourage residents to wear procedural masks while in common areas (with the exception of mealtimes), and during direct care, as tolerated, when physical distance cannot be maintained.

**NOTE: A resident who has previously consented to the use of a procedural mask or face shield, or a resident who has refused, has the right to change their preference at any time.**

### PROCEDURE:

#### Identification of eligible participants



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1. Resident’s cognitive performance scale (CPS) score will be used to determine initial eligibility to safely participate in universal masking. The CPS score classifies the resident’s level of cognitive impairment which will be a key indicator in determining the resident’s ability to understand donning and doffing instruction and ability to safely and effectively wear a procedure mask during interactions. Residents with a higher CPS score, indicative of a higher degree of cognitive impairment cannot safely follow the safety requirements required to participate in universal masking precautions.

CPS Score	Cognitive Status	Eligibility	Staff Intervention
0-2	Cognitively Able	Eligible	Health teaching re: masking, reminders observations for compliance
3	Borderline	Assessment required	Resident unpredictable with level of understanding. Nurse to assess if resident able to safely participate in universal masking
4-6	Cognitively Impaired	Ineligible	Staff to wear eye protection during interactions when physical distancing cannot be accomplished

2. Further eligibility to participate in universal masking is determined by the resident’s ability to safely don and doff procedure mask independently. If a resident is unable to safely don and doff the mask, they become ineligible
3. Lastly, in respect to the resident’s rights, a resident who is able and cognitively well but refuses to participate in universal masking will be excluded.

### Visual Identifiers

A sticker/notation on the “over the bed care plan” will be used to identify each resident’s participation in universal masking:

1. Indication that the resident is able to wear a mask.
2. Indication that staff need to check the care plan for further direction (i.e. resident may or may not agree to wear a mask).
3. Indication that the resident has refused, or is unable to wear a mask.

### Care Plan Documentation

1. If the resident consents to wearing a procedural mask:
  - a. The resident’s preference will be documented in their plan of care
  - b. Nursing staff will provide education to the resident on proper use of the mask, and safe donning and doffing practices



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- c. Staff must wear both a procedural mask and eye protection during direct care and/or when not able to maintain physical distancing
  2. If the resident refuses to, or is unable to, wear a procedural mask:
    - a. Offer a face shield to the resident if they refuse to wear a procedural mask
    - b. The resident's preference will be documented in their plan of care
    - c. Nursing staff will provide health teaching to residents on the public health recommendations of mask use in LTC
    - d. Staff must wear both a procedural mask and eye protection during direct care and/or when not able to maintain physical distancing
  3. If the resident refuses to, or is ineligible to wear either a procedural mask or face shield:
    - a. Staff must complete a Point of Care Risk Assessment and choose appropriate PPE.
    - b. The resident's refusal will be documented in their plan of care

Care plans will be reviewed and updated at minimum quarterly and as needed.

#### **Point of Care Documentation**

PSW staff will document the resident compliance with universal masking each shift in POC.

#### **Universal Masking for Residents**

1. Residents who are identified as able and willing to participate in universal masking will be required to wear a procedure mask when interacting with staff or residents in common areas and shared spaces; and, during direct care, as tolerated, when physical distance cannot be maintained.
2. A resident's procedural mask can be removed during dining room service once they have been seated at the table to eat. Masks worn into the dining room will be discarded and a fresh procedural mask will be provided prior to leaving the table at the conclusion of the meal
3. Encourage and assist the resident with performing hand hygiene using alcohol-based hand rub prior to applying an prior to/after removing mask

#### **Health Teaching and Signage**

1. Health teaching will be provided to all eligible residents on the process for donning and doffing the procedural mask, including hand hygiene requirements
2. Health teaching will be provided on an ongoing basis by staff when a resident is observed to be deviating from the required steps for donning/doffing mask or compliance with hand hygiene



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3. Laminated signage will be posted in the Home with instructions on donning/doffing their mask

Reference:

COVID-19 Directive #3 for Long-Term Care Homes under the Long-Term Care Homes Act, 2007 Issued under Section 77.7 of the Health Protection and Promotion Act (HPPA), R.S.O. 1990, c. H.7

Minister's Directive: COVID-19 response measures for long-term care homes  
August 30 2022: <https://www.ontario.ca/page/ministers-directive-covid-19-response-measures-for-long-term-care-homes>

Retrieved from: [https://www.ontario.ca/page/covid-19-guidance-document-long-term-care-homes-ontario?\\_ga=2.216549333.296075483.1655923277-1105002195.1580917255#\\_Masking](https://www.ontario.ca/page/covid-19-guidance-document-long-term-care-homes-ontario?_ga=2.216549333.296075483.1655923277-1105002195.1580917255#_Masking)