



Background

As healthcare providers, it is our privilege and responsibility to take care of the public's health. This is especially true in times such as these when they need us most. In every decision that is made, the Saskatchewan Health Authority's (SHA) top priority is the safety of all staff, physicians, patients, residents and clients.

Principles

After careful consideration, evaluation of the research, and to align with other health care systems across the country, we have decided to implement a continuous mask use strategy in an effort to protect the health and safety of staff and physicians, as well as our patients, residents and clients. **Effective April 14, 2020 all staff and physicians who work in a clinical care area/facility where there will be direct or indirect contact with patients/residents/clients will be required to wear a mask at all times.**

These enhanced measures, in combination with existing infection prevention and control measures (i.e. physical distancing, point of care risk assessment (PCRA), hand hygiene, environmental cleaning/disinfection, etc.) are guided by the following key principles:

1. Prevention of transmission from staff and/or physicians who may be asymptomatic or mildly symptomatic carriers of the virus to our most vulnerable population (i.e. patients/residents/clients).
2. Prevention of transmission from patients/residents/clients who may be asymptomatic or mildly symptomatic carriers of the virus to staff and/or physicians.
3. Conservation of PPE needed by our healthcare providers that enable them to safely practice according to the above principles.

Guidelines

1. All staff and physicians will continue to perform hand hygiene when they enter the unit/facility, frequently throughout their shift, and where indicated.
2. Staff and physicians who self-identify as working in a clinical care area/facility can be provided with a procedure mask at the start of their shift as part of the [daily HCW screening process](#). Alternatively, managers, supervisors or another designated point person on your unit/facility will have access to a supply of masks that can be provided when new masks are necessary.
3. The mask must be changed when it becomes wet, damaged or soiled (with blood or body fluids). It should be discarded when taking scheduled breaks and at the end of the shift.
4. There is currently no limit to the number of masks that will be provided, but judicious use according to the [Continuous and Extended PPE Use guidelines](#) is strongly encouraged.
5. The re-use of masks is NOT encouraged at this time due to the risk of self-contamination if the process of safely doffing, storing, and re-donning is not followed carefully. Should this direction change in the future, appropriate training materials related to safe mask re-use will be provided.
6. Staff and physicians who do not work in clinical care areas/facilities should continue to practice physical distancing and proper hand hygiene while traveling to, and within their work spaces. The use of personal non-medical masks (e.g. cloth) has not been approved at this time for use in our healthcare settings, but is currently being reviewed and further direction may be forthcoming.
7. Questions related to personal protective equipment (PPE) requirements may be directed to your manager or supervisor. If your manager or supervisor are not able to resolve your question, they will consult with the appropriate infection prevention and control practitioner.