

Title: Universal Masking		Procedure			
Patient Age Group:	<input type="checkbox"/> N/A	<input checked="" type="checkbox"/> All Ages	<input type="checkbox"/> Newborns	<input type="checkbox"/> Pediatric	<input type="checkbox"/> Adult

DESCRIPTION/OVERVIEW

COVID-19 infection is reduced by wearing masks. Masks serve as a means of source control by limiting virus spread thus improving patient, staff and provider safety in the healthcare setting. With ongoing SARS-CoV-2 transmission and the emergence of potentially more contagious variant strains, standardizing the use of procedure masks in all areas of UNM Hospitals, Clinics and Buildings is an important addition to reduce infection spread. This practice is in addition to engineering and administrative controls that also help reduce SARS-CoV-2 transmission risk in the healthcare setting.

REFERENCES

- CDC. Strategies for Optimizing the Supply of Facemasks ([link](#))
- CDC. Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 (COVID-19) Pandemic ([link](#))
- Associated Guidance for use of UNMH N95 Masks
 - N95 Plan including use with Aerosol Generating Procedures (AGPs) ([link](#))
 - Extended Use and Reuse Guidance ([link](#))

AREAS OF RESPONSIBILITY

- All individuals in clinical and non-clinical areas
- Patients, vendors, contractors, and visitors

PROCEDURE

- 1) When to Don a Procedure Mask
 - a. Individuals working in any UNMH building will be provided one procedure face mask at the beginning of their shift or workday from a designated member of leadership team.
 - b. Consultants, providers, and other services/units without a geographic unit in the hospital or clinics will pick up a procedure mask from the leadership team of the first unit they interact with.
 - c. In non-clinical buildings, procedure mask use is required. This includes, but is not limited to, 1650 University, 400 Tijeras and the Hope Building (933 Bradbury).
 - d. Visitors, patients and vendors will be offered procedure masks upon entry to all UNM Hospitals, clinics, and UNMH buildings.
 - e. Between entry of a UNMH building and reaching the unit/area where a procedure mask is obtained, individuals must wear a mask (i.e., use procedure or cloth mask while in transit). Once a procedure mask is obtained, individuals should wear the procedure mask for the shift/workday.

- f. Each individual will receive one procedure mask per day from the designated member of the leadership team.
- 2) Procedure Mask Use During Shift/Workday/Visit
- a. After individuals receive a procedure mask, they should wear the procedure mask throughout the day.
 - b. The procedure mask must cover the nose and mouth.
 - c. Individuals should strive to avoid touching the mask to reduce the risk of contaminating the mask or oneself.
 - d. How to safely don or re-don a procedure mask
 - i. Perform hand hygiene.
 - ii. Grasp procedure mask, pinching at the ear loops.
 - iii. Place procedure mask over face, securing ear loops behind the ears, then secure mask over nose and mouth.
 - iv. Perform hand hygiene.
 - e. How to safely doff a procedure mask with a plan to reuse
 - i. Perform hand hygiene.
 - ii. Remove procedure mask by holding the ear loops. The front/outside of the mask is considered contaminated so remove slowly and carefully to avoid self-contamination.
 - iii. After removing facemask, visually inspect for soiling, saturation, and/or damage.
 - 1. If the facemask is not soiled, saturated or damaged, carefully store with the exterior side down on a paper towel, paper bag or bottom half of shallow container.
 - 2. If soiled, saturated or damaged, throw away the mask.
 - iv. Perform hand hygiene.
 - f. Exceptions for wearing the procedure mask throughout the day include:
 - i. While eating/drinking. Procedure for safely doffing and then donning the mask listed above (2e).
 - ii. While working in a single occupancy office.
 - iii. When individuals are involved in clinical care/procedures requiring surgical masks.
 - iv. When individuals are involved in clinical care/procedures requiring N95 respirators or other higher levels of respiratory protection (e.g., elastomeric masks). For more information regarding mandatory and recommended N95 respirator use, please refer to associated procedures listed above (References).
- 3) Storage of Procedure Masks
- a. New procedure masks must be securely stored in each area/unit.
 - b. Individuals may store procedure masks for reuse on a paper towel, paper bag or bottom half of shallow container. This should be in an area where there is a low risk for contamination (e.g., enclosed space).
- 4) Addressing Procedure Mask Non-Compliance
- a. For visitors/outpatients:
 - i. Wearing a procedure mask is strongly preferred to wearing a personal cloth mask.

- ii. Procedure mask is preferable to a cloth mask. However, if an individual refuses to wear a procedure mask but is wearing a cloth mask, security doesn't need to get involved.
 - iii. If a patient or visitor refuses to wear any mask, staff will negotiate mask use. If a patient or any visitor continues to refuse to wear any mask, security may be contacted to escort the individual from the building.
 - iv. Visitors/patients may wear a procedure mask under their cloth masks.
 - v. Exceptions for visitors or patients to wear masks include:
 - 1. Patients < 2 years of age,
 - 2. Patients with difficulty tolerating the mask due to breathing issues,
 - 3. Patients with altered mental status, or
 - 4. Other clinically appropriate scenarios.
 - b. For inpatients, a procedure mask should be donned by the patient when anyone enters the room. Exceptions for masks are listed in 4.a.v.). A cloth mask may be used if the inpatient cannot tolerate a procedure mask.
 - c. For vendors and contractors, compliance is mandatory with procedure masks. If non-compliance with mask wearing is seen, this may be addressed directly with the individual or escalated to the appropriate area (e.g., materials management, facilities, etc.).
 - d. For staff/providers, this may be addressed directly with the individual. Additionally, more routine mask non-compliance should be escalated through area/department leadership.
- 5) Procedure Mask Replacement
- a. Procedure masks may be replaced when the mask becomes visibly soiled, saturated or damaged at any time during the day.
 - b. When soiled, saturated or damaged, discard the procedure mask.
 - c. Obtain a new mask as described in 1a through 1c.
- 6) Methods to Extend Life of Procedure Mask
- a. It is all personnel's responsibility to help preserve the supply of PPE and reduce the need for replacement masks whenever possible.
 - b. Strongly consider eliminating the application of makeup and face lotions before/during work. These degrade the procedure masks and can render them quickly unusable.
- 7) Procedure Mask Removal
- a. At the end of shift/workday, individuals will doff their used procedure mask and don a mask for transition to home.
 - b. If the procedure mask is not soiled, saturated or damaged, it can be reused the following shift at the discretion of the individual.
- 8) Cloth Masks
- a. Cloth masks are not considered appropriate PPE in any UNMH areas, particularly in clinical areas. These masks may only be worn by staff while entering or exiting buildings.
 - b. If allergies, irritation or other concerns regarding use of masks occur, then the individual needs to follow up with the appropriate Occupational Health Service Clinic.

9) Issues with Procedure Mask Supply

- a. In the event of a procedure mask shortage, distribution of masks will be prioritized based on the highest risk clinical activities and further guidance will be issued.

DEFINITIONS

AGP: aerosol generating procedure

COVID-19: Coronavirus Disease – the disease/infection caused by the novel coronavirus

Doffing: taking off personal protective equipment

Donning: putting on personal protective equipment

PPE: personal protective equipment such as masks, gloves, gowns, etc.

SARS-CoV-2 (Severe Acute Respiratory Syndrome Coronavirus-2): the virus which causes COVID-19 infection

SUMMARY OF CHANGES

5/2020 – New document created: UNM Health System Universal Staff Mask Policy and FAQs

1/2021 - Updated procedure to replace previous document and remove FAQs.

RESOURCES/TRAINING

Resource/Dept	Contact Information
PPE Committee	HSC-PPE@salud.unm.edu
Infection Prevention and Control	272-9722 or InfectionControl@salud.unm.edu

DOCUMENT APPROVAL & TRACKING

Item	Contact	Date	Approval
Owner	CEO, UNM Hospitals		
Consultant(s)	Meghan Brett, MD, Hospital Epidemiologist; Shamima Sharmin, Director, Infection Prevention and Control Dept.		
Committee(s)	Personal Protective Equipment (PPE) Committee		Y
Nursing Officer	Patti Kelley, Chief Nursing Officer		Y
Medical Director/Officer	Irene Agostini, Chief Medical Officer		Y
Official Approver	Kate Becker, CEO / Emergency Operations Center		Y
Official Signature	Approved by EOC on 1/28/2021	[Day/Mo/Year]	
Effective Date	date signed by Official Approver	[Day/Mo/Year]	

ATTACHMENTS

None.