



pei nurses
Prince Edward Island Nurses' Union



Health PEI
One Island Health System



Health and
Wellness

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Joint Statement: COVID-19 and Personal Protective Equipment

Protecting the health and safety of health care workers is an imperative for employers and unions. During the current COVID-19 pandemic, it is critical that the appropriate steps are taken to protect the health and safety of all health care workers in Prince Edward Island and prevent exposure to and transmission of COVID-19. Ensuring that appropriate personal protective equipment (PPE) is used by all staff and physicians, while also preserving supplies of specialized equipment for when they are required to safely provide care, is critical.

This joint communication is issued by Department of Health and Wellness, Health PEI, Canadian Union of Public Employees: Locals 805, 1051, 1778 & 1779, International Union of Operating Engineers, Prince Edward Island Nurses Union, and Union of Public Sector Employees (Health).

The parties agree to the following PPE standards for front-line health care employees in Prince Edward Island dealing with suspected, presumed, or confirmed COVID-19 patients:

1. All health care workers who must work within two metres of suspected, presumed or confirmed COVID-19 patients shall have access to appropriate PPE.
2. The employer commits to provide all health care workers with information on safe utilization of all PPE and employees shall be appropriately trained to safely don and doff all of this equipment. This will include access to gloves that cover the hands and wrists; long-sleeved cuffed gown (covering front of body from neck to mid-thigh) with sufficient overlap between the gown cuffs and gloves to protect the skin of the wrists/forearms; eye, nose and mouth protection (mask and eye protection, or masks and face shields, or masks with attached shield) that fully cover eyes; nose and mouth and ensures that no part of the face is exposed and fit tested N95 respirators or approved equivalents.
3. A point-of-care risk assessment (PCRA) must be performed before every patient interaction. The PCRA should include the frequency and probability of routine or emergent aerosol-generating medical procedures (AGMP) being required. If a health care worker determines on reasonable grounds that specific PPE is required in accordance with Routine Practices Risk Assessment, they shall have access to the appropriate PPE based on their PCRA, and this will not be unreasonably denied by their employer, or they shall be deployed to another area.

4. Droplet/contact precautions must be used by health care workers for all interactions with suspected, presumed or confirmed COVID-19 patients. Contact and droplet precautions includes gloves, face shields or goggles, gowns, and surgical/procedure masks.
5. N95 respirators or approved equivalent protection must be used by all health care workers in the room or other confined space where aerosol-generating medical procedures (AGMP) are being performed, are frequent or probable, or with any intubated patients.

AGMPs include but are not limited to; Intubation and related procedures (e.g. manual ventilation, open endotracheal suctioning), cardio pulmonary resuscitation, bronchoscopy, sputum induction, nebulized therapy, non-invasive ventilation (i.e. BiPAP), open respiratory/airway suctioning, high frequency oscillatory ventilation, tracheostomy care, nebulized therapy/aerosolized medication administration, high flow heated oxygen therapy devices (ex. ARVO, optiflow).

6. Appropriate and judicious use of PPE should be continuously informed by the most up to date versions of the Public Health Agency of Canada and World Health Organization's guidance documents for COVID-19 in acute and community settings.
7. Government and the employers commit to continue to explore all available avenues to obtain a sufficient supply of PPEs on an ongoing basis. In the event that the supply of PPEs reach a point where current supplies are anticipated to last for only 30 days (i.e. a shortage), or where utilization rates indicate that a shortage will occur, government and employers will be responsible for developing contingency plans in consultation with the unions.