



Guidance on the Use of PPE for Drop-Ins

(Updated March 31, 2022)

In settings like shelters and drop-ins, it is not possible to know when you may come in contact with droplets (eg: from coughs, sneezes, etc.), and it is not always possible to maintain physical distancing from others. We also know that the virus that causes COVID-19 enters the body via the eyes, nose, and mouth, so all three of these areas should be protected. **Eye protection should be worn at all times in addition to wearing a mask.**

Universal masking (wearing a mask at all times) should be practiced by staff – both indoors and outdoors. It is also important to keep in mind that PPE should not replace other effective measures, such as hand washing and maintaining physical distancing. **Staff should continue to maintain physical distancing as much as possible even when wearing a mask and eye protection.**

For Safe Donning and Doffing of PPE, see:

- [Risk Algorithm to Guide PPE Use](#) to help staff determine how best to protect themselves
- [How to Remove Gloves](#)
- [Putting on and Removing PPE Posters](#)
- [Putting on and Removing PPE Posters \(Detailed\)](#)
- [Putting on Full PPE](#) Video
- [Taking off Full PPE](#) Video
- [Putting on a Mask and Eye Protection](#) Video
- [Taking off a Mask and Eye Protection](#) Video
- [Putting on a Flatfold N95 Respirator](#) Video
- [Taking off Flatfold N95 Respirator/KN95 Mask](#) Video
- [1870+ N95 Respirator Donning Instructions, 3M Worker Health and Safety](#) Video
- [How to Wash Your Hands](#) Video
- [How to Use Hand Sanitizer](#) Video

If used, gown and gloves should be changed between appointments/interactions with clients, and should also be changed/removed when moving from a dirty area/task (eg: handling dirty laundry, cleaning and disinfecting a bathroom, when wearing gloves to wipe down used tables and chairs, etc.) to a clean area/task to avoid cross contamination. Perform hand hygiene immediately after removal. Follow above resources as guidance for how to remove safely.

Masks and eye protection should be changed if they become visibly soiled or damaged. Avoid touching the mask and eye protection during your shift as much as possible, and perform hand hygiene before and after touching facial protection (if removing to eat, etc.) and before putting on your facial protection. Follow above resources as guidance for how to remove safely.

The [interim recommendations by Public Health Ontario](#) (updated March 2022) states the recommended PPE when providing direct care for patients with suspect or confirmed COVID-19 includes a fit-tested, seal-checked N95 respirator (or equivalent or greater protection), eye protection, gown, and gloves.



Masks

- Participants should be provided with high-quality masks that fit well to the face without gaping anywhere as much as possible (eg: KN95 masks or N95 respirators)
 - *Provide resources and training for participants and visitors on proper mask use (for example, how to wear and remove a mask), as well as on safe use and limitations of masks. For additional information, read [Ontario's COVID-19 face covering and mask guidance](#), Ministry of Labour, Training and Skills Development's [guidance on wearing masks in the workplace](#) and [PHO's website](#). (Source [here](#))*
 - *If participants are unable to safely or properly wear an N95 type mask, ensure that a well-fitted medical/surgical mask is made available for use.*
- Staff should wear high-quality masks that fit well to the face without gaping anywhere (eg: KN95 masks or N95 respirators)
- Cloth masks are not considered PPE
- **It is highly encouraged that staff wear an N95 respirator mask throughout their shift**
 - *Due to the airborne nature of the Omicron variant, and because of how contagious it is, fit-tested N95 respirators are the best masks to wear to protect yourself.*
 - *It is also not always possible to know when you may be coming into contact with someone who is positive for COVID-19, so **wearing a fit-tested N95 respirator + eye protection at all times is highly recommended.***
- **For full information, best practice recommendations on using N95 respirators, and fit-testing resources, please see [here](#)**
- **For further guidance and instruction on mask use for staff + participants, please see: [SSHA Mask Directive](#)**
- If providing direct care to clients who are a suspected or confirmed COVID-19 positive case, and/or staff are providing direct care to clients in a site where there is a suspect or declared COVID-19 outbreak, staff must wear an N95 respirator mask in addition to eye protection
 - Some examples of DIRECT care in drop-in settings:
 - One-on-one case management appointments
 - Closely helping clients with tasks (eg: laundry, computer use, etc.)
 - Providing any hands-on care to clients
- Clean hands before putting on a mask
- Should cover the nose, mouth and chin
- Should fit snugly without gaping anywhere
- Do not wear it around your neck or top of your head
- Do not wear your mask under the nose, chin or forehead, or hang it from your ear
- Do not touch the mask while wearing it (if you do, clean your hands)
- Do not store masks in your pocket
- Do not share your mask with others.
- Change if it becomes wet, soiled, damaged, or difficult to breathe through
- Clean hands before and after removing your mask
- Remove by ear loops/straps/ties



- Masks should be discarded once removed (eg: don't place a used mask on a table – as this may cause contamination)

Eye protection

- Should be worn at all times in addition to a mask
- Protects the eyes from splashes, sprays
- Protects the eyes from droplets (eg: from coughs and sneezes)
- Face shield, goggles, certain safety glasses
- Should protect the front, top and sides of eyes
- Perform hand hygiene before putting on and after taking off
- Ensure hands are cleaned BEFORE removing eye protection to avoid contaminating your face
- Disposable eye protection should be tossed right away
- If you are using reusable eye protection, be sure to clean and disinfect it properly (look at your site's policy on how to do this). Also see: [Cleaning and Disinfection of Reusable Eye Protection](#)
 - Reusable eye protection should be cleaned and disinfected once removed
- Store in a designated clean area
- Regular prescription eyeglasses are not a substitute for proper eye protection, as it does not fully protect your eyes from splashes or sprays
- Do not touch the outside of your eye protection when using it – this can contaminate your hands (if you touch your eye protection while using it, be sure to perform hand hygiene immediately after and before touching anything else)
- Don't put eye protection on the top of your head – this can contaminate yourself
- Remove by the arms of goggles or headband of face shields

Gloves

- Wear when there is a risk of coming in contact with body fluids, mucous membranes, non-intact skin, tissue, secretions, excretions, or equipment or surfaces contaminated with the above
- **If it's wet and not yours...wear gloves!**
- Change your set of gloves when going from a dirty area/task to a clean area/task – this prevents the transfer of germs from dirty to clean sites
- Do not re-use – disposable gloves should be used with the idea of “one pair for one task”
- Nitrile gloves – should be used when using cleaners and disinfectants
- Toss gloves and wash hands immediately after removing gloves – gloves are not a replacement for proper hand hygiene
- Perform hand hygiene before and after use
- Ensure hands are dry before putting them on to prevent germs from growing inside
- Do not attempt to clean gloves with hand sanitizer or soap and water
- Don't wear 2 pairs of gloves
- Should be taken off right after using it for the activity you were using it for (i.e remove right after completing a “dirty” task before moving on to a clean area/task)
- Gloves are not a substitute for hand hygiene!



- Wearing gloves when they're not needed can actually contribute to the spread of germs (eg: doing paperwork, using the phone or computer, sitting at the front desk, putting clean linens out)
- In general, gloves do not need to be worn if you are touching intact skin (however, you should wash your hands before and after touching someone's skin)
- Gloves should go over the cuff of the gown

Gowns

- Used when there is a risk that your arms and clothing may become contaminated by splashes or sprays of bodily fluids (eg: when changing linens on a bed or handling dirty laundry)
- Wear a gown that fits properly – should cover your body from the neck to the knees, arms to end of wrists, and should wrap around the back
- Should fit snug at the cuffs
- Should be fastened at the back of the neck and the back with the opening at the back
- Do not re-use!
- Should be taken off right after using it for the activity you were using it for (i.e remove right after completing a “dirty” task before moving on to a clean area/task)
- Don't wear a gown just to keep warm – this may cause accidental contamination
- When removing, do so in a way that prevents contamination of clothing or skin and prevents agitation of the gown

Additional PPE should be worn in the following situations:

- Staff who are providing direct care to clients who are a suspected or confirmed COVID-19 positive case and/or staff who are providing direct care to clients in a site where there is a suspect or declared COVID-19 outbreak as determined by Toronto Public Health should use a N95 respirator mask in addition to eye protection when providing direct care to clients. Staff will be provided N95 respirator masks as needed. Please refer to the [N95 Respirator PPE Information Sheet for Staff](#) for information on the use and care of N95 Respirators.
- Staff who perform aerosol generating medical procedures (AGMPs) or anticipate to perform AGMPs on clients should use a fit-tested N95 respirator.
- When actively screening clients, visitors and staff, screeners should ask question behind a physical barrier (e.g. Plexiglass) when possible. Screeners must follow hand hygiene protocols before and after completing this task at a minimum and as often as necessary.
- When administering naloxone, staff should wear gloves and a gown in addition to wearing their mask and protective eyewear. It is not advisable to perform full cardio-pulmonary resuscitation (CPR) during COVID-19, including rescue breaths when responding to an overdose during COVID-19. There is no evidence that CPR face shields in naloxone kits or one-way valve masks provide adequate protection against COVID-19.
- Staff should wear gloves and gowns in addition to wearing their mask and protective eyewear when closely handling items clients have interacted with, including cleaning, dishwashing, handling laundry, cooking, distributing food, and disposing of garbage. Staff must use a clean pair of gloves and wash their hands if they are switching tasks.



When going for breaks:

- Staff should be as physically distanced as possible during meal/break times
- Remove all PPE safely (see above resources) to avoid contaminating oneself
- When removing PPE:
 - Dispose of any non-reusable PPE immediately in the trash
 - Clean and disinfect re-usable PPE immediately after removal (eg: eye protection) and store it in a safe and clean space
- Do not set used or dirty PPE on tables

References:

1. Infection Prevention and Control Guide for Homelessness Service Settings: Toronto Public Health. (September 2019): <https://www.toronto.ca/wp-content/uploads/2019/09/98bf-tph-infection-prevention-and-control-homeless-service-settings-2019-.pdf>
2. Training Modules – Infection Prevention and Control (IPAC): City of Toronto. (May 2021): (<https://www.toronto.ca/community-people/community-partners/emergency-shelter-operators/training-modules/>)
3. COVID-19 Information Sheet for Staff: Use of Personal Protective Equipment (PPE) in Homelessness Services Settings: Shelter Support and Housing Administration. (March 23, 2022): <https://www.toronto.ca/wp-content/uploads/2022/03/8d2f-COVID-19-PPE-Information-Sheet-for-Staff-PPE-Info-Sheet-March-23-2022.pdf>
4. COVID-19 Information Sheet for Staff: Use of N95 Respirators in Homelessness Services Settings: Shelter Support and Housing Administration. (January 13, 2022): <https://www.toronto.ca/wp-content/uploads/2022/01/9652-COVID-19-PPE-Information-Sheet-for-StaffN95-RespiratorsFINALJanuary-1....pdf>
5. COVID-19 Guidance: Congregate Living for Vulnerable Populations. (November 29, 2021):https://health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/2019_congregate_living_guidance.pdf
6. ICHA Position Statement: COVID-19 Omicron Variant and Required Responses. (January 13, 2022): <https://www.icha-toronto.ca/icha-position-statement-covid-19-omicron-variant-and-required-responses>