

Feb. 25, 2021

**Joint statement with unions on COVID-19 PPE**

Due to the changing environment related to COVID-19, Alberta Health Services (AHS), Alberta Union of Provincial Employees (AUPE), Covenant Health, the Health Sciences Association of Alberta (HSAA), and United Nurses of Alberta (UNA), have updated the [joint statement](#) on the safe and effective use of personal protection equipment (PPE) in our collective response to the COVID-19 pandemic. This replaces the original joint statement reached on March 26, 2020.

The updated joint statement provides additional clarity for our frontline leaders and staff and reinforces that health care workers are best positioned to make the determination on appropriate PPE based on their Point of Care Risk Assessment. (PCRA). The updated statement also confirms a shared commitment to encouraging all health care workers to pay meticulous attention to fitness to work protocols, appropriate utilization of PPE, hand hygiene practices, and maintaining required physical distancing whenever possible, including when not providing direct patient care.

**Understanding the updated statement**

The statement continues to be an important part of our partnership with our unions, as we continue to build trust and collaboration in our response to COVID-19.

It is important to note that under the updated joint statement:

- Frontline staff will be trusted to make their best decision on the proper type of PPE to use in various situations.
- All health care workers regardless of classification, across the care continuum and in all clinical settings, will be provided access to the PPE they have determined appropriate based on their PCRA for every patient interaction.
  - For non-clinical workers who are required to be within two metres of a patient and who do not conduct a PCRA, access to the PPE will be based on their assessment of all known and foreseeable risks and hazards.
- This means health care workers have the ability to shift from medical/surgical mask requirements to using fit-tested and seal-checked N95 respirators or equivalents, if they determine it is required based on the PCRA in each situation, even in non-AGMP situations.
- [Contact and Droplet Precautions](#) are still required when dealing with suspected or confirmed COVID patients (gown, gloves, face shield and procedure mask), with procedure masks being replaced by fit-tested N95 respirators if determined appropriate by the health care worker's PCRA.
- No employee will be required to work with PPE contrary to their PCRA. Within this guide, a process has been outlined to handle the extremely rare event of a dispute regarding the appropriateness of a health care worker's PCRA or PPE request.

The changes in the updated joint statement are based on the changing environment related to COVID-19, including updated guidance from the [Public Health Agency of Canada](#), similar work in other health care jurisdictions and new information and uncertainty related to the ongoing nature of the pandemic (new virus strains, virus transmission, vaccination supply and schedules, etc.).

The key change is a shift from focusing strictly on the science as it relates to contact and droplet precautions versus aerosol generating medical procedures (AGMPs) to a balance of a wide range of considerations, including a more precautionary approach to PPE use where determined appropriate

by the employee. This shift recognizes that the mental health and psychological safety of health care workers is equally important as physical safety concerns.

### Intent of specific provisions

- **Section 1: Access** - Focuses on access and availability of all appropriate PPE. Managers must ensure adequate supply is readily available to meet the needs as determined by PCRA's.
- **Section 2: PCRA** - Conveys the trust and confidence that we have in our workforce, as well as the expectation that both professional judgement and common sense will be exercised in decisions made following the PCRA.  
**Sections 3: Contact and Droplet Precautions** - Confirms all health care workers are still required to meet the minimum PPE standards. Substitution of an N95 or equivalent respirator in place of a medical mask may occur based on a health care worker's PCRA, even in non-AGMP situations.
- **Section 4: AGMPs**- Fit-tested and seal-checked N95 respirators or approved equivalent protection must be used by all health care workers in the room where AGMPs are being performed, or when frequent or unexpected exposure to AGMPs is anticipated, or with any intubated patients suspected or confirmed to have a viral respiratory infection.
- **Section 5: PPE Supply** - Commits to frequently review supply availability with our unions and develop timely contingency plans together, should this be required.

### What to do if there is dispute about the PCRA

- In the extremely rare event where there is dispute on whether the employee's decision to use an N95 respirator based on their PCRA is appropriate:
  - There should be a respectful and timely discussion regarding their PCRA.
  - While this discussion is occurring, the requested PPE should be provided.
  - Managers will reach out to their HRBP Advisor to support this discussion and the employee will be provided contact information for their applicable union Health and Safety resource.
  - No employee will be required to work with PPE contrary to their personal PCRA while such resolution discussions are occurring.
  - No employee will be redeployed in these situations, however, an employee may be reassigned during an investigation of a dangerous work refusal
- Any denial of PPE shall be reported by:
  - AHS employees in MySafetyNet
  - Covenant Health employees to Occupational Health and Safety Reporting Line 780-342-8070 (Edmonton Area) or 1-855-342-8070
  - Additionally, this shall be reviewed by the applicable Joint Workplace Health and Safety Committee.
- The union Provincial Occupational Health and Safety representatives have a provincial contact within each organization for expedited dispute resolution.