

EYE PROTECTION

To align with updated Centers for Disease Control and Prevention (CDC) updated guidance on potential transmission by aerosol transmission, Indiana Department of Health recommends the use of eye protection as a standard safety measure to protect long-term care (LTC) healthcare personnel (HCP) who provide essential direct care within 6 feet of the resident in all levels of care in all long-term care and assisted living.

- Examples include:
 - The delivery of direct care for COVID 19 residents in any type of transmission-based precautions throughout the facility- both COVID positive and those being tested or monitored for unknown COVID status.
 - The delivery of care for non-COVID residents in all facilities and those who are quarantined in COVID positive, symptomatic, or quarantined residents who are already in transmission-based precautions -Droplet-Contact.
 - They should be used for any resident regardless of COVID status when < 6 ft. spray or splash is anticipated: High-risk examples include assistance in showers, tub rooms, salons, and assistance in toileting, hygiene, changing linens, and environmental cleaning.
- **Changes to the CDC guidance as of July 15:** Added language that protective eyewear (e.g., safety glasses, trauma glasses) with gaps between glasses and the face likely do not protect eyes from all splashes and sprays.
- <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html>
- **Changes to the CDC guidance as of Oct. 5, noting the risk of aerosolization and transmission potential. Added language that COVID 19 most commonly spreads person to person, however sometimes it can be spread by airborne transmission by droplets that linger in the air for minutes to hours.**
- <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/how-covid-spreads.html>.

WHY IS THIS CHANGE HAPPENING?

The Indiana Department of Health is providing this guidance to align with CDC and their recommended safety measures for HCP; there has been an update on Oct. 5 to the CDC guidance on potential airborne transmission that has caused us to change our understanding of the risk of COVID-19 infection for LTC personnel.

WHO IS AFFECTED BY THIS RECOMMENDATION?

All LTC facilities care providers (nurses, CNAs, QMAs, hospice, EMS, healthcare providers, environmental services and support staff) who **provide direct care within 6 feet of the resident** are impacted. HCP who provide care for residents confirmed or suspected to have COVID-19 are **required** to wear eye

protection already as part of Droplet-Contact TBP — this practice has already been in place across the state. **It is now recommended to wear eye protection when providing direct care within 6 feet of the resident regardless of COVID-19 status.**

WHAT TYPE OF EYE PROTECTION IS RECOMMENDED?

Thanks to a robust supply, face shields are the recommended source of eye protection; if you have access to goggles/safety glasses in your area, those are permitted as well. They must fit close to face and not have gaps at the side of the glasses/goggles **Note that face shield or goggles should be worn in addition to a facemask; they are not meant to replace them.**

TIPS FOR APPROPRIATE USE AND CLEANING

Face shields should not be shared between HCP, however the HCP may reuse a face shield/goggles/eyewear for multiple resident encounters/days until it is no longer functional.

Face shields/goggles/eyewear must be cleaned with an approved disinfectant that kills the SARS-CoV-2 virus. Use approved cleaning agents from List N: <https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2>