

Ministry of Health

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December 18, 2021

MEMORANDUM TO: Anthony Dale, CEO, Ontario Hospital Association
Donna Duncan, CEO, Ontario Long-Term Care Association
Lisa Levin, CEO, AdvantAge Ontario
Cathy Hecimovich, CEO, Ontario Retirement Communities Association

FROM: Dr. Catherine Zahn, Deputy Minister, Ministry of Health
Nancy Matthews, Deputy Minister, Ministry of Long-Term Care
Carlene Alexander, Deputy Minister, Ministry for Seniors and Accessibility

SUBJECT: Update regarding Directive 5

We are writing to hospitals, long-term care homes and retirement homes to provide an update regarding Ontario's Directive 5 in response to the COVID-19 Omicron variant of concern (B.1.1.529). Directive 5 is the provincial baseline standard for provision of personal protective equipment (PPE) for hospitals, long term care homes and retirement homes.

On December 15, 2021, Public Health Ontario released the *Interim IPAC Recommendations for Use of Personal Protective Equipment for Care of Individuals with Suspect or Confirmed COVID-19* (the "interim Recommendations"). The interim recommendations state:

*"In light of emerging evidence of substantial increased transmissibility of the Omicron (B.1.1.529) variant, unclear mechanism for this increased transmissibility, and reduced vaccine effectiveness, **the recommended PPE for direct care of 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. Other appropriate PPE (based on individual risk assessment) includes a well-fitted medical mask or non-fit tested N95 respirator (or equivalent), eye protection, gown and gloves for direct care of patients with suspect or confirmed COVID-19.**"* (Emphasis Added).

In light of the interim recommendations and the application of the precautionary principle, the Chief Medical Officer of Health has updated the PPE requirements outlined in Directive 5 as follows:

“Additionally, as an interim precaution in light of the uncertainty around the mechanisms of transmission of the COVID-19 Omicron variant of concern (B.1.1.529), required precautions for all health care workers providing direct care to or interacting with a suspected, probable (i.e. placed in precautions as high risk contact, in an outbreak zone of the facility or recently transferred from a facility in outbreak) or confirmed cases of COVID-19 are a fit-tested, seal-checked N95 respirator (or approved equivalent), eye protection (goggles or face shield), gown and gloves.”

In order to ensure greater clarity of the above statement, Directive 5 has also been updated to **remove** the following sections as they are **no longer relevant** given the above change:

- “If a regulated health professional determines, based on the PCRA, and based on their professional and clinical judgement and proximity to the patient or resident, that an N95 respirator may be required in the delivery of care or services (including interactions), then the public hospital or long-term care home must provide that regulated health professional and other health care workers present for that patient or resident interaction with a fit-tested N95 respirator or approved equivalent or better protection. The public hospital or long-term care home will not deny access to a fit-tested N95 respirator or approved equivalent or better protection if determined by the PCRA.”
- “For public hospitals in COVID-19 outbreak, as declared by the local Medical Officer of Health, and for long-term care homes with one laboratory-confirmed case of COVID-19 in a staff member or a resident, if a health care worker comes in contact with a suspected, probable or confirmed case of COVID-19 in a patient or resident where 2 metre distance cannot be assured, the health care worker can determine if a fit-tested N95 respirator or approved equivalent or better protection is needed and must receive this additional precaution. There are also minor wording changes and Directive 3 is now referenced in the Related Directives section instead of as a point in the memo specific to long-term care homes. Both Directive 3 and Directive 1 have also been updated. A FAQ document will be shared soon.”

As a result of the above, employees providing direct care to or interacting with patients or residents must have access to a fit-tested, seal-checked N95 respirator (or approved equivalent), eye protection (goggles or face shield), gown and gloves. They are to have access to this PPE without the employee having to request access. In order to support this access, it is essential that hospitals, long-term care homes and retirement homes eliminate any physical or procedural barriers that may reasonably be expected to prevent an employee from accessing enhanced PPE if they require enhanced PPE.

While hospitals, long-term care homes and retirement homes have been providing their health care workers with access to these supplies, the ministries recognize that that the new PPE requirements may require some preparation. As a result, the effective date of Directive 5 is December 22, 2021, although employers are expected to make every possible effort to achieve compliance immediately.

The changes to Directive 5 are expected to increase use of PPE supplies in your respective sectors. In exercising your stewardship of PPE supplies, the ministries assure you that the provincial stockpile and supplier inventory of PPE is sustainable and able to meet the needs of Ontario's hospitals, long-term care homes and retirement homes. The government continues to monitor the supply of PPE and is taking steps to ensure adequate supply through the winter.

The provision and correct use of PPE is one part of successful occupational health and infection prevention and control (IPAC) practices. For access to IPAC expertise, employers can engage their local IPAC hub or contact EOCoperations.moh@ontario.ca.

Health care workers are the most important resource Ontario has in our response to the COVID-19 pandemic.

Thank you for your continued commitment to their safety.

Sincerely,

Original signed by

Original signed by

Original signed by

Dr. Catherine Zahn

Nancy Matthews

Carlene Alexander

- c: Dr. Kieran Moore, Chief Medical Officer of Health
Greg Meredith, Deputy Minister, Ministry of Labour, Training and Skills Development
Matthew Anderson, President and Chief Executive Officer, Ontario Health
Erin Hannah, Associate Deputy Minister, Ministry of Long-Term Care
Melanie Fraser, Associate Deputy Minister, Ministry of Health
Jacqueline Cureton, Assistant Deputy Minister, Ministry for Seniors and Accessibility
Jay O'Neill, Chief Executive Officer and Registrar, Retirement Homes Regulatory Authority
Katha Fortier, Assistant to the National President, UNIFOR
Michael Hurley, Regional VP Ontario, CUPE
Vicki McKenna, Provincial President, Ontario Nurses' Association
Sharleen Stewart, President, SEIU
Warren (Smokey) Thomas, President, OPSEU