SCCA Universal Eye Protection for Patient Interactions
Starting Monday, August 3, 2020

In line with recent CDC guidelines, and to reduce the potential risk of exposure and transmission of SARS-CoV-2 during patient interactions, SCCA is implementing universal eye protection at all clinics on Monday, August 3, 2020. This applies to all healthcare staff, students, trainees and faculty interacting with patients where environmental barriers do not exist. All health care workers will now wear eye protection* any time when interacting with a patient.

*Eye protection is defined as a face shield or Infection Prevention-approved goggles. Personal eyewear is not considered eye protection.

Effective Monday, August 3, 2020
Health care personnel (HCP) will be provided with eye protection at the start of the shift.

Clinic clean utility rooms and provider work areas will be stocked with face shields and storage bags for providers and clinical staff.

Infection Prevention preference is that staff use face shields, as they also provide an extra layer of protection from contamination of the mask.

- Clinic managers and supervisors will determine the process for managing eye protection based on assessment of clinic needs and individual preference.
- If staff are not able to wear a face shield, goggles can be worn. This can be determined on a case by case basis, and goggles can be obtained by contacting SCCA Materials Management.
- In order to conserve PPE, managers should ensure their stock of eye protection supplies are securely stored with controlled access.

Process for safe removal of eye protection
Upon removal of eye protection, HCP will disinfect the eye protection prior to storage or reuse:

- Prior to removing eye protection, perform hand hygiene and don clean gloves.
- Clean eye protection with alcohol cleaner and a microfiber cloth. If a surface is needed to perform cleaning, ensure that the surface is wiped with a clean disinfectant wipe before and after cleaning the eye protection.
- The used microfiber cloth needs to go into a soiled laundry bin.
- Remove gloves, dispose of them, and perform hand hygiene.
• If there is residue on the eye protection, it can be removed with a water-dampened paper towel or washcloth/towel.

Notes
• If exiting a Droplet, Contact, or Airborne and Contact Precaution room, eye protection must be disinfected immediately (with alcohol cleaner) prior to entering the next patient’s room.
• If exiting a Contact Enteric precaution room, bleach wipes will be used to clean the eye protection. Residue can be removed with water-dampened paper towel or washcloth/towel.
• Following disinfection and drying time, eye protection may be discreetly labeled with permanent marker and stored in provided storage bags, a clean personal bag belonging to the staff member, or reused immediately as appropriate.
• Hand hygiene is required prior to donning and after doffing eye protection.
• For staff and providers who travel between SCCA clinics and other sites (UWMC, community sites), eye protection shall be cleaned as outlined above and transported to other sites and back to SCCA clinics in provided storage bag or a clean personal bag.

FAQs

Do personal eyeglasses count as eye protection?
• No, personal eyewear does not provide proper protection. A face shield can be worn over the glasses.

I work at a front desk or in food service, am I also required to wear eye protection?
• No, only those staff members who are providing care for patients face to face are required to wear eye protection.

Do I need to disinfect the eye protection after leaving each room if I intend to wear the same eye protection all the time?
• No. They must be disinfected between patients only if you are exiting a room with transmission-based precautions (droplet, contact, airborne or contact enteric).

Do I need to disinfect my eye protection after I remove it?
• Yes. Eye protection must be disinfected every time they are removed from the face.

Do I have to wear eye protection in the work rooms?
• No. Eye protection is only required for use when in direct patient contact. However, some staff may decide to wear eye protection outside of patient rooms. This is allowed as long as staff avoid touching the eye protection during work, and if they do, they have to use hand gel or soap and water immediately after doing so.

Should staff obtain a new face shield each day, or reuse more than one day?
• Staff can use eye protection for multiple days so long as the fit is not compromised and vision is not obscured (i.e., clouding or scratches).

**How can I obtain new eye protection if I need a replacement?**

• Contact the clinic manager who will provide you with eye protection.

**Would staff be able to bring their own goggles from home to wear?**

• This can be assessed on a case-by-case basis by the unit manager in coordination with Infection Prevention. Prescription goggles are allowed as well.

**I need to go over to UW to see patients, do I bring my eye protection?**

• Staff and providers can clean and take their eye protection from SCCA, but please also know that the UW clinics and hospital units at have access to eyewear when entering UW facilities.


NIOSH guidance: [https://www.cdc.gov/niosh/topics/eye/eye-infectious.html](https://www.cdc.gov/niosh/topics/eye/eye-infectious.html)

Please contact Infection Prevention for questions at [ip@seattlecca.org](mailto:ip@seattlecca.org). As this is a new process, we will work with you or your team to answer questions and make adjustments as needed. We thank you for your continued commitment to infection prevention and safety.