

Questions and answers

Infection Prevention and Control Measures for Preventing Viral Respiratory Illness

Source: Ministry of Health

1. What new measures have been put in place?

- Effective January 6, per direction from the Province, in order to keep people safe, additional infection prevention and control measures are being implemented in health authority–operated facilities and in sites contracted by health authorities for the provision of services such as hospitals, long-term care and assisted-living, outpatient clinics and ambulatory care settings by requiring all health care workers, volunteers, contractors, patients and visitors to wear medical masks in patient-care areas, except when eating and/or drinking. Patient-care areas are places where patients, residents and clients are actively receiving care.
- The updates include:
 - To continue to protect people during respiratory illness season, continuous medical masking by health care workers, visitors, contractors, and volunteers is required in patient/client/resident care areas in health care facilities, programs and services.
 - A patient care area is any area within a health care facility (including a contracted facility), where patients, residents or clients are actively receiving care. This includes any other location where care is provided, such as at home and community care locations (including a client’s home), waiting rooms and any location where emergency health services are being provided.
 - It does not include locations such as administrative areas or private offices, which are not generally accessed by patients, residents or clients. Cafeterias, lunch and break rooms, research areas, engineering spaces, lecture halls, or areas where care is not being provided, such as foyers, hallways, cafeterias, chapels and family rooms are also not included.
- Residents in long-term care and assisted living settings must wear a mask over their nose and mouth, and other PPE when directed by a health care worker during the provision of direct patient care, if medically tolerated.
- It is recommended that residents wear a medical mask when participating in indoor group events, celebrations, gatherings and activities, except when eating and/or drinking, however, this is a personal choice.

2. How does this season’s guidance differ from last year’s?

- Masking requirements for health care workers have shifted from a more universal masking approach as seen during the 2023/24 viral respiratory illness (VRI) season to a specific focus on masking in patient care areas (only) where patients, residents, clients are actively receiving care.
- In 2023/24 the direction was continuous medical masking by health care workers, visitors, contractors and volunteers in patient, resident and client-care areas.
- In 2023/204, visitors to long-term care and seniors’ assisted living settings were to wear a medical mask in communal areas and when participating in indoor events, gatherings and activities in common areas of the home/residents. Masks were not required when visiting

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with a resident in their room, or an assisted living unit, or when visiting in a common area of the care home/residence when others were not around.

- The 2024/25 policy reduces masking requirements for visitors in long term care and seniors' assisted living. These changes are being made to support the mental health of residents by allowing face-to-face interactions with their loved ones, while minimizing the risks of VRI transmission.

3. What health authority facilities, programs and services will be affected by this masking policy?

- To increase protections in the patient-care areas of health care facilities, all health care workers, volunteers, contractors and visitors will be required to follow the mask policy. These settings include:
 - hospitals
 - emergency health services
 - outpatient clinics
 - ambulatory care settings
 - long-term care homes
 - seniors' assisted living settings
 - private hospitals
 - stand-alone extended care hospitals designated under the Hospital Act
 - provincial mental health facilities.

4. Are medical masks required in doctor's offices, pharmacies, dentist's offices, and other community-based professional practice settings?

- Masking requirements and other infection prevention and control (IPC) measures for regulated health professionals operating in community settings (e.g., nurses, midwives, physicians, nurse practitioners, pharmacists, oral health professionals) are determined by their applicable regulatory college.

5. Could there be additional measures put into place this season?

- Medical Health Officers, infection prevention and control physicians, or their designates have the authority to declare a respiratory virus outbreak (e.g., COVID-19, influenza and RSV) and implement additional IPC measures as needed.
- For facilities that currently have an active outbreak, the timeline for implementing updated measures and lifting restrictions will be at the discretion of the local Medical Health Officer or their official delegate.

6. Can health care providers refuse to see a patient if they decline to wear a medical mask?

- If a patient cannot wear a mask due to a medical reason or if a patient refuses to comply, care must still be provided.
- If feasible, health care providers could consider how the patient can be accommodated during their visit in way that minimizes risk to staff and other patients.

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- For example, in a non-acute care setting, rescheduling their appointment to a quieter time when there are fewer patients/clients and staff at the clinic to reduce the risk for the patient, other patients and staff. In some cases, a virtual consultation may be appropriate based on the patient's condition and the risk level.

7. Does this mean that staff in health care settings (acute care, hospitals) no longer need to be vaccinated against COVID-19?

- Health care workers must meet immunization requirements in accordance with Ministry of Health and employer policies, and when directed by a medical health officer.
- Health care workers working in public health care facilities are required to report their immunization for COVID-19 and influenza and their immune status for other [critical vaccine preventable diseases](#).

8. Why are these measures being implemented now?

- Public health officials, the Office of the Provincial Health Officer, monitor influenza and other VRI trends globally throughout the summer and early fall, which can indicate what to expect in B.C.
- This monitoring is combined with active surveillance of viral respiratory illnesses in B.C, to provide up to date information on when there is likely to be a surge in health care settings, necessitating the implementation of infection prevention and control measures.
- Implementing these measures, only when necessary and where it will have the greatest benefits (i.e., patient care areas), is a balanced approach that will help protect health care workers and patients, to reduce the spread of illness, and support resident mental health and wellness, while not being overly cumbersome for families/visitors.

9. What has changed since last year's viral respiratory illness season?

- Three things:
 - 1) The definition of "patient care area" has been modified.
 - A patient care area is any room or area within a health care facility (including a contracted facility) where patients, residents or clients are actively receiving care. This includes home and community care locations (including a client's home), waiting rooms and any location where emergency health services are being provided.
 - A patient care area does not include locations such as administrative areas or private offices which are not generally accessed by patients, residents, or clients. Cafeterias, lunch and break rooms, research areas, engineering spaces, lecture halls, or areas where care is not being provided, such as foyers, hallways, cafeterias, chapels and family rooms.
 - 2) Visitors in long-term care facilities are no longer required to wear masks in resident rooms and communal areas when visiting a single resident. They should wear masks if engaged in indoor group events, celebrations, gatherings and activities, except when eating/drinking.
 - 3) Ambassadors are no longer required at all health care facility entrances.

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- As our current understanding and lessons learned regarding how specific viral respiratory illnesses are generally spread continue to evolve, and recognizing the importance of keeping our most vulnerable patients safe, we have adapted the definition of “patient care area” accordingly from previous years.
- If a facility is experiencing an active outbreak, additional measures – over and above those outlined in the masking policy – will be put in place at the direction of a Medical Health Officer or their delegate. Residents/families/visitors in long-term care facilities are no longer required to wear masks when visiting a single resident in single or multi-bedrooms or in communal areas.

10. What are the current levels of influenza, RSV and COVID-19 in BC?

- As of January 3, 2025, current surveillance trends show that influenza and RSV activity is increasing, and COVID-19 activity is stable but showing early signs of an increase.
- As of January 3, 2025, surveillance trends also show that visits to emergency departments and primary care settings for respiratory illness continues to increase and is comparable to last season.
- Please see [BCCDC Respiratory Virus Data](http://www.bccdc.ca/health-professionals/data-reports/respiratory-virus-data) for more information.
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 - The next update is expected January 9, 2025.

11. Does avian flu have anything to do with this masking policy?

- No, the measures in this policy apply to viral respiratory illnesses with increased human-to-human transmission during the fall/winter season that impact health care settings. Separate IPC guidance is available for health care settings to safely provide care for patients with suspected or confirmed avian influenza, including recommendations on the use of appropriate personal protective equipment.

12. Will a masking policy be implemented each year during annual respiratory illness season?

- At this time, a decision has not been made about returning to continuous medical masking at the start of every VRI season.
- The Provincial Health Officer, along with provincial infection prevention and control, and workplace health experts, will continue to review this issue to determine if additional IPC measures are needed on an ongoing, seasonal basis.
- Any updated measures put into effect during the respiratory illness season will consider provincial needs, epidemiological concerns, and health system trends at that time.

13. What is the annual respiratory illness season?

- Respiratory illness season takes place annually, usually starting in the fall and usually ending in early spring.
- It is the time of year where higher-than-average levels of respiratory illnesses are observed across the population, including cases of influenza, RSV, and COVID-19.

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- The risk level of the respiratory illness season in the province is determined by the Provincial Health Officer, based on current international, national, and provincial data, health system trends, and other considerations.
 - The BC Centre for Disease Control monitors indicators such as disease severity, laboratory testing, facility outbreaks, wastewater for viruses such as influenza, RSV, and SARS-CoV-2.
 - BCCDC maintains six dashboards, and information is updated on their website every Thursday (<http://www.bccdc.ca/health-professionals/data-reports/respiratory-virus-data>).

14. What can I do to protect myself and my family this season?

- We recommend you get the updated influenza and COVID-19 vaccines as soon as you receive your invitation to book an appointment.
- Vaccines are available in more than 1,300 participating pharmacies, health-authority clinics and some primary-care providers' offices throughout the province. People can call 1 833 838-2323 if they have questions or need help booking.
- The vaccines are free and are available for all B.C. residents six months and older, including enhanced influenza vaccines for seniors.
- People can receive influenza and COVID-19 vaccines at the same time, if they want.
 - By being immunized, you protect yourself, your family, your friends and your community.
 - While previous vaccines reduce the risk of serious illness and hospitalization – because you have built up immunity – it is important to get the latest updated vaccine which protects against the current circulating variants.
- Additional healthy habits that everyone can take to stay safe include appropriate hand hygiene, appropriate ventilation, not visiting when sick, and respecting personal space.