To align with updated Centers for Disease Control and Prevention (CDC) updated guidance on potential transmission by aerosol transmission, Indiana Department of Health (IDOH) 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. This eye protection should be used according to these guidelines:

Examples include:

- **The delivery of direct care for COVID 19 residents in any type of transmission-based precautions (TBP)** 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 for COVID positive exposures, symptomatic, or quarantined residents who are already in transmission-based precautions -Droplet-Contact TBP.**

- **During moderate to high community transmission** eye protection should be worn by HCP who provide **essential direct care within 6 feet for any resident regardless of COVID status** in all levels of care in LTC settings. [https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html](https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html).

- **If the county positivity rates are < 5% with low community transmission and the facility is not in outbreak testing,** then eye protection will not be required when providing essential direct care within 6 feet to residents who are not in transmission-based precautions (TBP) for COVID-19 or quarantined for COVID positive exposures.
  - This would include residents in the general population (green zones) who are not suspected to have COVID-19.
  - **IF the county positivity rates increase to moderate or high substantial community transmission** then eye protection should be used for all residents within 6 feet when delivering essential direct care, regardless of COVID 19 status.

- **Changes to the CDC guidance as of February 2021:** Updated the Implement Universal Use of Personal Protective Equipment section to expand options for source control and patient care activities in areas of moderate to substantial transmission. Use eye protection according to product labeling and local, state, and federal requirements. In healthcare settings, eye protection is used by HCP to protect their eyes from exposure to splashes, sprays, splatter, and respiratory secretions (e.g., for patients on Droplet Precautions and for all patient encounters when there is moderate to substantial community transmission of SARS-CoV-2). Disposable eye protection should be removed and discarded. Reusable eye protection should be cleaned and disinfected after each patient encounter. (Conventional Use) [https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/eye-protection.html](https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/eye-protection.html).
Long-term Care Eye Protection
Use of Face shields or protective eyewear/goggles

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 when there is moderate to substantial (high) community transmission.

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, top and bottom 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-CoV2 virus. Use approved cleaning agents according to manufacturer guidance. Use List N: [https://www.epa.gov/pesticide-registration/list-n-disinfectants-useagainst-sars-cov-2](https://www.epa.gov/pesticide-registration/list-n-disinfectants-useagainst-sars-cov-2)