

Thompson, Holly

Subject: Email - Communication - Dr Jasmine Hasselback - Mandatory Masking on Public Transit and City Facilities - File CK 270-7
Attachments: jh_-_mandatory_masking_on_public_transit_and_city_facilities_-_august_26_2020.pdf

From: Web NoReply
Sent: Wednesday, August 26, 2020 2:11 PM
To: City Council <City.Council@Saskatoon.ca>
Subject: Email - Communication - Dr Jasmine Hasselback - Mandatory Masking on Public Transit and City Facilities - File CK 270-7

--- Replies to this email will go to Jasmine.Hasselback@saskhealthauthority.ca ---

Submitted on Wednesday, August 26, 2020 - 14:10

Submitted by user: Anonymous

Submitted values are:

Date Wednesday, August 26, 2020
To His Worship the Mayor and Members of City Council
First Name Dr. Jasmine
Last Name Hasselback
Phone Number (306) [REDACTED]
Email Jasmine.Hasselback@saskhealthauthority.ca
Address 310 Idylwyld Drive North
City Saskatoon
Province Saskatchewan
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Name of the organization or agency you are representing (if applicable) Saskatchewan Health Authority
Subject Mandatory Masking on Public Transit and City Facilities
Meeting (if known)
Comments
Please find attached a communication on mandatory masking on public transit from the Saskatoon Medical Health Officers.
Attachments
[jh - mandatory masking on public transit and city facilities - august 26 2020.pdf](#)

[REDACTED]

[REDACTED]

August 24, 2020

Attn: City Councilors,

Mandatory Masking on Public Transit and Saskatoon City Facilities

SARS CoV-2 the virus that causes COVID-19 disease is known to spread through small respiratory droplets (<5 µm) which can travel up to 2 meters distance when a person sneezes or coughs⁽¹⁾. There is also increasing concern regarding asymptomatic and pre-symptomatic transmission of COVID-19 infection (without development of symptoms)⁽²⁻⁴⁾. This concern further poses a challenge to the control of the spread of infection and warrants consideration of mandatory masking (from here on presented as face covering or FC) to minimize risk of transmission. The objective of this written statement is to make recommendations regarding mandatory FC use on Saskatoon city transit and facilities with consideration given to its associated potential benefits and harms.

Context

In order to curb the transmission of COVID-19 in the community; WHO has provided guidance to decision makers using a risk-based approach for the use of masks in areas with community transmission of COVID-19 when physical distancing is difficult (Appendix)⁽⁵⁾. From this guidance document, WHO recommends the use of non-cloth masks in settings where individuals are unable to keep a physical distance of at least 2 metres (e.g public transportation)⁽⁵⁾. The Public Health Agency of Canada (PHAC) has also indicated that wearing a non-medical (cloth) mask in the community has not been proven to protect the person wearing it, however, it can be an additional measure to protect others around you, and might be useful in situations where physical distancing is not possible (e.g., public transportation, workplaces necessitating close proximity to other workers or the public, or when entering and exiting public buildings)⁽⁶⁾.

Community mask use is now either encouraged or mandatory in over 80 countries, with many jurisdictions encouraging but not mandating the use of cloth masks⁽⁷⁾. In Canada, cities like Ottawa, Toronto, Hamilton, Guelph and recently Regina have mandated non-cloth masks on City transit. These cities state that they plan to focus more on education than penalties⁽⁸⁻⁹⁾.

A study done on 1269 respondents resident in Saskatoon between June and July by University of Saskatchewan researchers revealed that; 484 (38%) participants said they wore a mask all or most of the time when they couldn't physically distance, 103 (8%) said some of the time and 259 (20%) little or none of the time. 423 (33%) said they didn't leave home or didn't answer the question. This survey shows that more than half of Saskatoon residents have adopted the new practice of wearing a FC all or most of the time⁽¹⁰⁾.

Assessment

The main theoretical benefit of masks during the COVID-19 pandemic would be preventing the infected wearer (asymptomatic, pre-symptomatic or symptomatic) from transmitting the virus to others, thus, minimizing the spread of the virus. Evidence reveals that systematic reviews of randomized clinical trials fail to show significant benefit with medical mask use in community settings, more observational and case-control studies (both at higher risk of bias), have suggested that masks are protective in community settings ⁽¹¹⁾. This protective benefit is likely to be more significant in settings with higher risk of transmission (i.e bus transit, closed settings and areas with increased community cases with no known exposures).

Recommendation

In light of the current evidence of spread of COVID-19, uptake of masking by most Saskatoon residents and applying the precautionary principle (re: complete evidence of a potential risk is not required before action is taken to mitigate the effects of the potential risks); we support mandatory masking on Saskatoon city transit and facilities. For this policy to be successfully implemented focus should be on the following: education rather than punitive measures, communication to avoid risk compensation behaviours (i.e continue to maintain 2 metres physical distancing and hand hygiene), messaging on optimal mask construction & “mass etiquette” (re: the need to not touch the mask, to replace when soiled or wet and ensure appropriate laundering) and barrier-free access to face coverings to individuals who do not have access for any reason. In addition, non-medical masks or cloth face coverings should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.

Sincerely,



Dr. Jasmine Hasselback
MD, MPH, FRCPC
Interim Lead Medical Health Officer – Saskatoon

APPENDIX

WHO advises decision makers to apply a risk-based approach focusing on the following criteria when considering or encouraging the use of masks for the general public:

1. Purpose of mask use: if the intention is preventing the infected wearer transmitting the virus to others (that is, source control) and/or to offer protection to the healthy wearer against infection (that is, prevention).
2. Risk of exposure to the COVID-19 virus:
 - due to epidemiology and intensity of transmission in the population: if there is community transmission and there is limited or no capacity to implement other containment measures such as contact tracing, ability to carry out testing and isolate and care for suspected and confirmed cases.
 - depending on occupation: e.g., individuals working in close contact with the public (e.g., social workers, personal support workers, cashiers).
3. Vulnerability of the mask wearer/population: for example, medical masks could be used by older people, immunocompromised patients and people with comorbidities, such as cardiovascular disease or diabetes mellitus, chronic lung disease, cancer and cerebrovascular disease.
4. Setting in which the population lives: settings with high population density (e.g. refugee camps, camp-like settings, those living in cramped conditions) and settings where individuals are unable to keep a physical distance of at least 1 metre (3.3 feet) (e.g. public transportation).
5. Feasibility: availability and costs of masks, access to clean water to wash non-medical masks, and ability of mask wearers to tolerate adverse effects of wearing a mask.

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Healthy People, Healthy Saskatchewan

The Saskatchewan Health Authority works in the spirit of truth and reconciliation, acknowledging Saskatchewan as the traditional territory of First Nations and Métis People.

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