

Guidance for Assessing the Level of (and use of) Personal Protective Equipment (PPE) required during an Extraordinary Outbreak of COVID-19

[BRADFORD COUNCIL] – March 30th 2020

This document contains

1. Guidance for Assessing the Level of Personal Protective Equipment (PPE) required during an Extraordinary Outbreak of COVID-19
 2. Guidance for use of PPE when providing care to a person suspected of or confirmed with Covid-19
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To reduce the risk of infection any contact with symptomatic service users, should where practicable, be limited to outside two metres. Symptoms of coronavirus are:

a high temperature (hot to touch on your chest or back - you do not need to measure your temperature), and/or

a new, continuous cough (coughing a lot for more than an hour, or 3 or more coughing episodes in 24 hours)

The table below outlines the PPE that is required to be worn carrying out their duties

A risk assessment at the door/location of contact should be done (or prior to the appointment by phone) to enable the staff member to be fully equipped with the necessary PPE. Also if there are no respiratory symptoms present in the household or location then this will avoid any unnecessary wastage of PPE.

Service Users without symptoms				
Type of PPE (disposable)	Personal Care Tasks for Service User (during aerosol procedures i.e. tracheal suctioning) no respiratory symptoms contact within one metre (a)	Personal Care Tasks for Service User no respiratory symptoms contact within one metre	Contact with Service User no respiratory symptoms contact within two metres	Contact with Service User no respiratory symptoms contact outside two metres
Hand Hygiene	✓	✓	✓	✓
Gloves	✓	✓	Dependant on task	X
Disposable Aprons	✓	✓	Dependant on task	X
Fluid Resistant Surgical facemask (b)	X	X	Dependant on task	X
FFP3 mask	X	X	X	X
Eye Protection (c)	X	X	X	X
Symptomatic Service Users				
Type of PPE (disposable)	Personal Care Tasks for Service User (during aerosol procedures i.e. tracheal suctioning) with respiratory symptoms contact within one metre (a)	Personal Care Tasks for Service User with respiratory symptoms contact within one metre	Contact with Service User with respiratory symptoms contact within two metres ¹	Contact with Service User with respiratory symptoms contact outside two metres
Hand Hygiene	✓	✓	✓	✓
Gloves	✓	✓	✓	✓
Disposable Aprons	✓	✓	✓	✓
Fluid Resistant Surgical facemask (b)	✓	✓	✓	If service user has a cough
Eye Protection (c)	✓	✓	X	X

For PPE used for care staff all equipment should be **single-use**.

All PPE if re-used could harbour infections and if re-used will be a risk when put back on. Putting on PPE (donning) must be preceded with strict hand hygiene and if this isn't adhered to then PPE will potentially be contaminated. Most importantly if PPE isn't doffed (taken off) in the correct manner and order then contamination of the person/staff member is **significantly increased**.

See Appendix for procedure for putting on (donning) and taking off (doffing) PPE.

1 To reduce the risk of infection any contact with service users who have symptoms, should where practicable, be limited to outside two metres.

2 During a pandemic influenza/extraordinary outbreak phase for added protection Fluid repellent face masks are required to be used during aerosol procedures (activities that can induce coughing or have the potential to release droplets in the air).

a) aerosol generating procedures should be undertaken in a single room with only essential staff present

b) surgical masks should:

- cover both nose and mouth
- not be allowed to dangle around the neck after or between each use
- not be touched once put on
- be changed when they become moist or damaged
- be worn once and then discarded as clinical waste – hand hygiene must be performed after disposal

b) eye protection is required to be worn as part of standard infection control precautions when there is a risk of blood, body fluids, excretions or secretions splashing into the eyes. Individual risk assessment should always be carried out at the time of providing care. This assessment will need to include patients with possible COVID-19 who are coughing.

2. Guidance for use of PPE when providing care to a person suspected of or confirmed with Covid-19

Overview

The government has produced guidance for social care settings when dealing with cases of Coronavirus (COVID-19) including care homes, supported living and home care.

Every effort should be made to care for residents in care settings with suspected coronavirus in their own rooms with the door shut. Where this is not possible a risk assessment should be undertaken to protect other residents from the risk of exposure. This would also apply to supported living accommodation.

People in their own homes should be advised to stay in one room of their home and where practically possible not mix with any other family members.

This document will cover

- correct use of PPE
- Disposal of Covid-19 waste

P.P.E. (Personal protective equipment)

The guidance on use of PPE when dealing with suspected or confirmed cases of COVID-19 is to use single use gloves, aprons and closely fitted fluid resistant surgical masks. These should be applied before entering the resident's home and should be kept on throughout the episode of care.

Eye protection should also be used dependant on the task being performed i.e. if there is likely to be close contact with the affected person (within 2 metres) and there is a risk of splashing or exposure to respiratory droplets

Hand washing / hand rub

Hands must be washed / sanitised before and after each episode of care.

Disposal of Covid-19 waste

All Covid-19 waste has to be double bagged and stored in the home for 72 hours before it can be disposed of in domestic waste. Bags should be stored in a little used / unused room until they can be disposed of.

If there are no members of the household showing signs of a possible COVID-19 nature then it would be 'work as normal' and don PPE when appropriate but no need for masks or face protection.

Before putting on your PPE hands must be washed / cleansed.

Hand rub

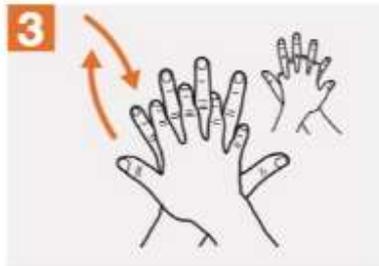
 **Duration of the entire procedure: 20-30 seconds**



Apply a palmful of the product in a cupped hand, covering all surfaces;



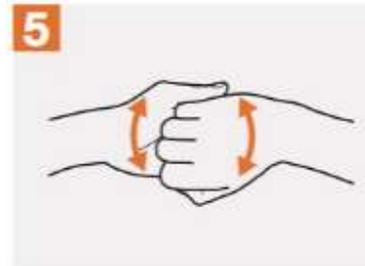
Rub hands palm to palm;



Right palm over left dorsum with interlaced fingers and vice versa;



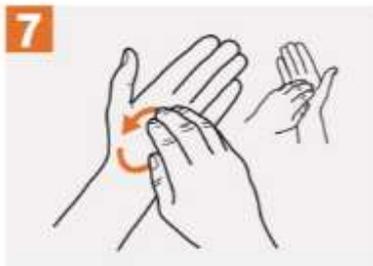
Palm to palm with fingers interlaced;



Backs of fingers to opposing palms with fingers interlocked;



Rotational rubbing of left thumb clasped in right palm and vice versa;



Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;



Once dry, your hands are safe.

Use the link below to access a Public Health England video on donning and doffing of PPE:

<https://youtu.be/eANIs-Jdi2s>

PPE must be put on in the following order.

APRON - MASK - EYES - GLOVES.



Putting on your mask

1. Remove a mask from the box and make sure there are no obvious tears or holes in either side of the mask.
2. Determine which side of the mask is the top. The side of the mask that has a stiff bendable edge is the top and is meant to mould to the shape of your nose.
3. Determine which side of the mask is the front. The coloured side of the mask is usually the front and should face away from you, while the white side touches your face.
4. Bring the mask to your nose level and place the top of the mask on the bridge of your nose. Mould or pinch the stiff edge to the shape of your nose.
5. Place the top ties over the crown of your head and secure with a bow. These should be tight enough to form a seal around the top of the mask around the nose.
6. Pull the mask down so that it covers your mouth and chin.
7. Tie the bottom ties around the nape of your neck. This should be tight enough to ensure that there are no gaps.

**Cover mouth and nose
with mask and **make sure**
there are no gaps
between your face and
the mask**

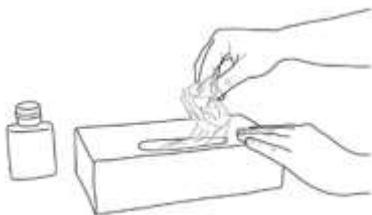


Eye protection

When worn Eye protection should not fog up when you breathe. If this is happening tighten the seal around the top of the mask.

Putting on your gloves

1. Take glove from original box.



2. Touch only a small surface area of the glove near the wrist opening



3. Pull first glove onto hand



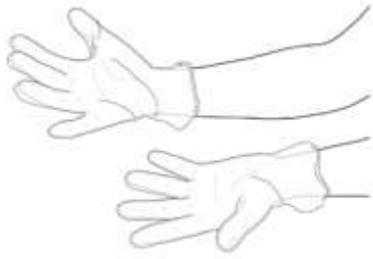
4. Take second glove from box touch only small area near the wrist



5. Pull on second glove



6. Once gloved hands should not touch anything else.



Removing PPE

PPE must be removed in this order.

GLOVES - APRON - EYE - MASK

Order for removing PPE

 Grasp the outside of the glove with opposite gloved hand, peel off. Hold the removed glove in the gloved hand. Slide the fingers of the ungloved hand under the remaining glove at the wrist and peel off.

 Unfasten or break apron ties. Pull apron away from neck and shoulders lifting over head, touching inside of the apron only. Fold or roll into a bundle.

 Handle eye protection only by the headband or the sides.

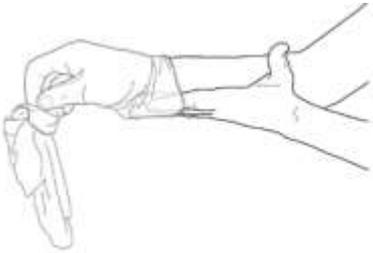
 Unfasten the mask ties—first the bottom, then the top. Remove by handling ties only.

Taking off your gloves.

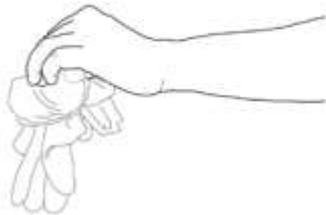
1. Pinch one glove at the wrist and pull glove off allowing the glove to turn inside out.



2. Hold the removed glove in the gloved hand and slide the un-gloved hand inside the between the glove and the wrist, remove the second glove by rolling it down.



3. Discard the removed glove



Taking off your Apron

Unfasten or break apron ties. Pull apron away from neck and shoulders lifting over the head. Touching the inside of the apron only. Snap the tie at the back of the neck; allow the top half of the apron to fold towards the bottom half of the apron; break the tie at the back from around the waist and fold the apron in on itself avoid contact with the outside of the apron.

Taking off your eye protection

Remove eye protection touching the arms of the glasses only. It is good practice to look down and position your head away from your body (lean forward). When removing your glasses.

Taking off your mask

1. Avoid touching the front of the mask. The front of the mask is contaminated. Only touch the ear ties. Follow the instructions below for the type of mask you are using.
2. Untie the bottom bow first then untie the top bow and pull the mask away from you as the ties are loosened.
3. Lean away from the body and face downwards; the mask should not be allowed to flop down towards the chest
4. Do not scrunch up the mask.



Disposal of Covid-19 waste

All Covid-19 waste must be stored for 72 hours. After this time it can be disposed of in the normal waste.

All waste PPE and any other waste including wipes, pads etc. must be double bagged and labelled with the date.

Labels must clearly show the date the waste was bagged.

This waste must be stored in the clients home (if possible in a little used room) and can only be put in the clients domestic waste after 72 hours. (3 Days)

If a client has 4 calls a day then 4 bags will need to be labelled and stored in the clients home per day.

Bags will need to be removed from the home and disposed of in the normal waste after 72 hours (3 days)