



Abbots Care

— EST. 1995 —

COVID-19 PPE Policy and Procedure

Version 3.0 Sept 2020

COVID-19 PPE Policy and procedures

Summary	Policy reviewed in light of the recently published Personal Protective Equipment (PPE) Strategy from the Department of Health and Social Care. Section 5.15 updated. It is recognised that in contexts where coronavirus is circulating in the community at high rates, health and social care workers may be subject to repeated risk of contact and droplet transmission during their daily work. It is also understood that in routine work there may be challenges in establishing whether service users meet the case definition for COVID-19 prior to a face-to-face assessment or care episode. This policy has been updated to highlight when PPE must be worn and the need to risk assess. It includes links to key documents and PPE videos. The impact of this policy has been raised to critical.
Scope Roles affected by policy Service Users affected by policy Stakeholders affected by policy	All Employees of Abbots Care All Senior Managers and Directors All Service Users Family Advocates Commissioners
AC Policies relating to procedure	COVID-19 Policy and Procedure
CQC Outcomes relating to the procedure	<p>EFFECTIVE E5: How are people supported to live healthier lives, have access to healthcare services and receive ongoing healthcare support?</p> <p>RESPONSIVE R1: How do people receive personalised care that is responsive to their needs?</p> <p>SAFE S5: How well are people protected by the prevention and control of infection?</p> <p>WELL-LED W2: Does the governance framework ensure that responsibilities are clear, and that quality performance, risks and regulatory requirements are understood and managed?</p>
Legislation relating to procedure	<ul style="list-style-type: none"> • Care Quality Commission (Registration) Regulations 2009 • Care Quality Commission (Registration and Membership) (Amendment) Regulations 2012 • Civil Contingencies Act 2004 • Control of Substances Hazardous to Health Regulations 2002 • The Hazardous Waste (England and Wales) Regulations 2005 • The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 • Health and Social Care Act 2008 (Registration and Regulated Activities) (Amendment) Regulations 20 • Health and Safety at Work etc. Act 1974 • The Health and Safety (Miscellaneous Amendments) 2002 • Management of Health and Safety at Work Regulations 1999 • Medical Act 1983

	<ul style="list-style-type: none"> • The Medical Devices Regulations 2002 • The Medical Devices (Amendment) Regulations 2012 • The Workplace (Health, Safety and Welfare) Regulations 1992 • The Health and Safety (Miscellaneous Amendments) Regulations 2002 • Health and Social Care (Safety and Quality) Act 2015 • Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) • The Health and Social Care Act 2008 (Regulated Activities) (Amendment) Regulations 2012 <p>Coronavirus Act 2020</p>
Underpinning Knowledge	<ul style="list-style-type: none"> • Author: Public Health England, (2020), <i>Taking off personal protective equipment (PPE) for non-aerosol generating procedures (AGPS)</i>. [Online] Available from: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/531111/taking-off-ppe-for-agps.pdf [Accessed: 29/9/2020] • Author: Department of Health and Social Care, (2020), <i>COVID-19: infection prevention and control (IPC)</i>. [Online] Available from: https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control [Accessed: 29/9/2020] • Author: UK Government, (2020), <i>Coronavirus (COVID-19): provision of home care</i>. [Online] Available from: https://www.gov.uk/government/publications/coronavirus-covid-19-providing-home-care/coronavirus-covid-19-provision-of-home-care?utm_campaign=11563480_Government%20guidance%20digest%2020520&utm_medium=email&utm_source=UKHCA&dm_i=1DVI,6VUFS,VOYMR2,RN4AP,-protective-equipment-ppe [Accessed: 29/9/2020] • Author: GOV.UK, (2020), <i>COVID-19: how to work safely in domiciliary care in England</i>. [Online] Available from: https://www.gov.uk/government/publications/covid-19-how-to-work-safely-in-domiciliary-care?utm_campaign=11615115_PPE%20Update%2016%2020&utm_medium=email&utm_source=UKHCA&dm_i=1DVI,6WYA3,VOYMR2,RSJ1L,1 [Accessed: 29/9/2020] • Author: HM Government, (2020), <i>Hands, Face, Space</i>. [Online] Available from: https://www.gov.uk/government/news/new-campaign-to-prevent-spread-of-coronavirus-indoors-this-winter [Accessed: 29/9/2020] • Author: HM Government, (2020), <i>Staying at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection</i>. [Online] Available from: https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection [Accessed: 29/9/2020] <p>Author: Department of Health and Social Care, (2020), <i>Personal Protective Equipment (PPE) Strategy - Stabilise and build resilience</i>. [Online] Available from: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/531111/ppe-strategy.pdf [Accessed: 29/9/2020]</p>
1.0 Actions	<p>1.1 Share with all Care workers and office staff via email and care worker portal</p> <p>1.2 Care workers to confirm read and understood</p> <p>1.3 Ensure policy is discussed at supervisions</p> <p>1.4 Ensure all staff receive IPC refresher Training</p>
2.0 Objectives	<p>2.1 When there is a need for staff at Abbots Care Limited to use any form of personal protective equipment (PPE), they are fully trained in its safe and effective application to avoid</p>

	<p>infection and the spread of disease and to protect the health of the staff members at Abbotts Care Limited.</p> <p>2.2 That the team at Abbotts Care Limited understands when and why PPE is required to be worn in order to control and prevent infection, to avoid the spread of disease and to keep staff members at Abbotts Care Limited safe from harm by minimising their risk of infection at work and following the current PPE guidance issued by Public Health England.</p> <p>2.3 Supplies of all forms of PPE must be available and maintained in optimum condition to be ready for use to control infection, prevent the spread of disease and to minimise the risk of staff members</p>
3.0 Policy	<p>3.1 Abbotts Care Limited understands that risk assessments are required to ensure that hazards are identified, risks minimised, and residual risk managed. The evaluation of control measures may identify the need for the use of Personal Protective Equipment (PPE). PPE is often one part of a suite of effective control measures. During the COVID-19 pandemic, Abbotts Care Limited must follow Public Health England guidance on PPE and Infection Control.</p> <p>3.2 Staff will be provided with appropriate PPE by Abbotts Care Limited. Staff will be trained in:</p> <ul style="list-style-type: none"> • How to use PPE, including the approved process for donning, removing, and disposing of used PPE • When to use individual items of PPE • When to replace any PPE • The limitations of any PPE being used • How to report issues to The Operations Director regarding the quality, quantity or effectiveness of PPE supplied <p>3.3 Abbotts Care Limited has an Infection Prevention and Control Lead who is responsible for monitoring the effectiveness of PPE usage at Abbotts Care Limited. The person will regularly report to Camille Leavold</p> <ul style="list-style-type: none"> • Concerns with the quality of PPE • Concerns regarding stock levels, supply and range of PPE products available • Audits and reports on the use of PPE • Issues raised by staff • Failure of staff to adhere to PPE policy <p>3.4 Staff will be trained in how to use PPE, when to use it, repair or replace it, how to report if there is a fault and on its limitations.</p> <p>3.5 Powder-free CE-marked gloves are used in Abbotts Care Limited. The gloves supplied have a range of sizes.</p> <p>3.6 Alternatives to latex gloves are also available.</p>
Procedure	

4.0 Procedure	<p>4.1 National/Local Guidance The procedure detailed in the policy reflects current national guidance. However, as the pandemic evolves and more targeted and local responses are developed, Abbots Care Limited will be aware of, and follow, relevant regional or local guidelines for PPE.</p> <p>4.2 All PPE Must Be:</p> <ul style="list-style-type: none"> ▪ Compliant with the relevant BS/EN standards (European technical standards as adopted in the UK) ▪ Stored to prevent contamination in a clean/dry area until required for use (expiry dates must be adhered to) ▪ Disposed of after use correctly ▪ Used in line with current COVID-19 guidance <p>4.3 Effectiveness of PPE PPE on its own will not prevent the spread of infection and is only effective when combined with:</p> <ul style="list-style-type: none"> ▪ Thorough hand hygiene. Staff must perform hand hygiene immediately before every episode of care and after any activity or contact that potentially results in their hands becoming contaminated. This includes before putting on (donning) and after the removal (doffing) of personal protective equipment (PPE), equipment decontamination and waste handling ▪ Respiratory hygiene (“catch it, bin it, kill it”) ▪ Being aware of the importance of avoiding touching your face with your hands (Hands, Face, Space) ▪ Following standard infection prevention and control precautions ▪ Using the correct technique for putting on and taking off PPE ▪ The safe disposal of used PPE <p style="padding-left: 40px;">○ When and What PPE Must be Worn</p> <p>The care required, the health needs of a Service User and the vulnerabilities of individual staff should be risk assessed. The type of PPE and how much PPE is needed must be dictated by risk assessments undertaken by Abbots Care Limited. PHE has produced guidance that relates to a number of situations and these are detailed below.</p> <p style="padding-left: 40px;">○ COVID-19 PPE: recommendations for domiciliary care workers within 2 metres of a client and providing close personal care (for example, touching) OR within 2 metres of anyone in the household who is coughing</p> <p>Close personal care requires you to be in direct contact with the Service Users (e.g. touching). This applies to all care, e.g. assisting with getting in/out of bed, feeding, dressing, bathing, grooming, toileting, administering medications. For any close, personal care, the following PPE must be worn by all staff:</p> <ul style="list-style-type: none"> • Disposable gloves • Disposable plastic apron • Fluid repellent surgical mask • Eye protection - The use of eye protection (such as goggles or visor) must be determined by a risk assessment and may be needed for the care of some Service Users where there is a risk of contamination to the eyes from respiratory droplets or from splashing of secretions, e.g. coughing or spitting <ul style="list-style-type: none"> ○ When within 2 metres of a Service User but not delivering personal care or needing to touch them, and there is no one within 2 metres who has a cough • Type II surgical mask must be worn • Plastic disposable aprons and gloves are only required for other standard infection control reasons,
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e.g. the staff member will come into contact with body fluids or a member of the household is shielding

- Where domestic activities are being carried out, normal household gloves will be sufficient if there are no body fluids

○ **Risk Assessment Before Each Visit**

Attempts should be made, where appropriate, to ascertain whether a Service User meets the case definition for a possible or confirmed case of COVID-19 before the care episode.

Service Users who are well but who have the following must now follow [COVID-19: guidance for households with possible coronavirus infection](#):

- **A new continuous cough and/or**
- **A high temperature**
- **A loss or change in normal sense of smell or taste**

Abbots Care Limited will monitor its Service Users for symptoms and Care Workers will inform their line manager if any changes occur. Those Service Users with symptoms will be assessed based on their needs to decide if it is appropriate to visit them at the end of a Care Worker's list rather than in between other Service Users.

Abbots Care Limited must ensure that staff are aware that Service Users may not present with the same symptoms as someone who is young and healthy. The symptoms may include confusion or diarrhoea, sore throat, loss of appetite or shortness of breath. The Coronavirus Policy and Procedure at Abbots Care Limited has a symptom checker for staff to refer to. PPE guidance must be followed as stated in [COVID-19: Coronavirus \(COVID-19\): providing home care](#) and [PPE guidance for Home Care](#). Abbots Care Limited can refer to the PPE Fact Sheet for Domiciliary Care Staff in the QCS Resource Centre.

○ **Action Required Before Using PPE**

Follow [Putting on personal protective equipment for home care workers](#) on donning (putting on) PPE. Before PPE is donned:

- Perform hand hygiene
- Ensure the staff member is hydrated
- Tie hair back
- Remove jewellery
- Check PPE in the correct size is available

PPE must be donned and doffed at least two metres away from the Service User and anyone in the household who may have a cough. This also includes when replacing PPE. The best place to do this in the Service User's home must be agreed, i.e. just before or just after entering the Service User's home or in a separate room.

Guidance on removing (doffing) PPE can be read here: [How to work safely as a home carer - Taking off personal protective equipment \(PPE\)](#).

4.9 Service Users with Behaviours that may Challenge

Where Abbots Care Limited supports Service Users with behaviours that may challenge, such as those with learning disabilities or autism, [guidance](#) in relation to PPE must also be adhered to. The levels of PPE will depend upon the tasks being carried out, the risk, and how vulnerable the Service User may be. A robust risk assessment will be completed by Abbots Care Limited for each Service User on an individual basis and must be regularly reviewed. For some Service Users, PPE can affect their normal routine and Abbots Care Limited will look at ways to ensure that PPE items do not appear frightening to them, whilst not altering them in anyway. Some examples of how this can be done include:

- Greeting the Service User without a mask through a window before entering the space where you actually meet

- Explain that by wearing the mask you are helping other people to stay safe and that the mask is now part of your regular working clothes or uniform
- Wear disposable picture badges showing what you look like without a mask
- Introduce masks by making them in an art session. This will be useful if Service Users need masks when going out. Have a choice of colours or fabric designs
- Try to normalise the wearing of masks around the Service User's home; if there are soft toys around, perhaps provide masks for these
- Play a game trying to guess what expression people are making behind masks

- Use Makaton or British Sign Language (BSL) or possibly develop shared, non-verbal signals for the expressions usually read from faces
- Develop a matching pairs game with pictures of people with and without masks
- Praise people when they ask questions about the masks. Answer clearly and honestly using their preferred communication method
- Consider graded exposure approaches with the aim of making the PPE acceptable

Where it is decided by Abbots Care Limited that PPE is not required to be used with a Service User, this must be under continual review and alternative solutions looked at.

○ **COVID-19 - Safe ways of working**

- Staff working on the Rapid Response teams will be required to take their temperature before every shift and report this to the office before starting work. They would need to email oncall@abbotscare.com with their temperature results.
- Staff should be trained on donning and doffing PPE. Videos are available for training (See 'Further Reading' section for links)
- Staff should know what PPE they should wear and when they should be using it
- Staff should have access to the PPE that protects them for the appropriate setting and context
- Gloves and aprons are subject to single use, with disposal after each Service User contact
- Fluid repellent surgical masks and eye protection can be used for a session of work (in domiciliary care this may vary depending on the length of the visit at the Service User's home)
- It is important to remember to change gloves if providing personal care and carrying out food preparation which is standard good infection control and food hygiene practice
- Gowns can be worn for a session of work in higher risk areas. In domiciliary care, where it is regular personal care, staff must be bare below the elbows. Long sleeved gowns are not required
- Hand hygiene should be practiced and extended to exposed forearms, after removing any element of PPE
- Staff should take regular breaks and rest periods
- If staff feel unwell, they must not attend work and must contact Abbots Care Limited 3 hours before they are due to work to inform Abbots Care Limited that they are unable to attend their Service User

○ **Reusable PPE**

Whilst most PPE items are for once-only use, certain PPE items are manufactured to be reusable. This most commonly applies to eye/face protection items, i.e. goggles or visors. Reusable items should be clearly marked as such and identified in advance by Abbots Care Limited.

Reusable PPE items may be used, provided that they are appropriately cleaned or stored between uses, according to the manufacturer's instructions or local infection control policy. The Operations Director will advise staff where this applies.

Reuse of gloves and aprons is not recommended in any circumstances. Face masks must be disposed of after single or sessional use. They cannot be cleaned and so are also not reusable.

○ **Single and Sessional use of PPE - COVID-19**

Single use is for the use of one discrete, individual intervention

Sessional use is for a number of individual interventions undertaken on one duty, i.e. between breaks

- Aprons and gloves are subject to single use
- Respirators, fluid-resistant (Type IIR) surgical masks (FRSM), eye protection and long-sleeved disposable fluid repellent gowns can be subject to single sessional use
- Face masks should be discarded and replaced in any of the following circumstances:
 - If damaged
 - If soiled (e.g. with secretions, body fluids)
 - If damp
 - If uncomfortable
 - If difficult to breathe through
- Eye protection should be discarded and replaced (or decontaminated if the item is reusable) in any of the following circumstances:
 - If damaged
 - If soiled (e.g. with secretions, body fluids)

○ **Disposing of PPE**

Any waste PPE must be placed in a bin bag and can be disposed of as normal domestic waste unless the Service User or anyone in their household has symptoms of COVID-19 (new continuous cough, shortness of breath, fever, loss or change in sense of smell or taste). Where a Service User or anyone in their household does have symptoms of COVID-19, then waste from the cleaning of areas where they have been (including disposable cloths and tissues) and PPE waste from their Care must be:

Put in a plastic bin bag which is tied when full

- The bag must then be placed in a second bin bag and tied
- The bag must then be put in a suitable and secure place and marked for storage for 72 hours.
- Waste must be stored safely and securely and kept away from children.
- Waste must not be put in communal waste areas until the waste has been stored for at least 72 hours.
- Storing for 72 hours saves unnecessary waste movements and minimises the risk to waste operatives. This waste does not require a dedicated clinical waste collection in the above circumstances and can be added to domestic waste after 72 hours

Do NOT put any items of PPE in the recycling bin.

○ **PPE Stock Levels**

Abbots Care Limited must maintain sufficient supplies of PPE for Care Workers to utilise. PPE stock levels are required to be reported to the CQC via their online form, 'Update CQC on the impact of COVID' during the coronavirus pandemic.

Where supplies are required and not accessible from the usual wholesalers of Abbots Care Limited, the Local Resilience Forum (LRF) for Abbots Care Limited should be approached for support with PPE supplies.

The Department of Health and Social Care will also provide PPE to meet the requirements of all providers to support their COVID-19 needs, further information on this is set out in the [Personal Protective Equipment \(PPE\) Strategy](#).

Abbots Care Limited can also refer to the following guidance for further information: [PPE portal: how to order emergency personal protective equipment](#). Weekly order limits from the portal will be based on the size of the provider, and the range of PPE products has been extended.

4.16 What are the PPE Minimum Requirements?

The guidance has three elements and levels of PPE which should be worn depending on the following situations:

- When providing personal care which requires you to be in direct contact with the Service Users who has symptoms of or has been confirmed as testing positive for COVID-19
- Care workers on the Rapid Response rounds will take the responsibility of managing Service Users who have symptoms of or have tested positive to COVID-19. If an Abbots Care Worker suspects that a SU has symptoms they must contact the office and/or their line manager immediately and the Rapid Response team will carry out the symptom checking process.
- Care Workers should use personal protective equipment (PPE) for activities that bring them into close personal contact, such as washing and bathing, personal hygiene and contact with bodily fluids.

Care worker must have a COVID-19 kit bag which contains the following:

- Gloves
- Aprons
- Eye googles (one per care worker) / Visors
- Face masks
- Alcohol hand sanitizer
- Hand soap
- Bottle of water
- Bags for waste
- Paper towels

Staff working on the Rapid Response teams will be required to take their temperature prior to every shift and before leaving their home, they will need to record their results onto their Block shift notes, they would need to do this by going onto their Mobizio app, clicking onto their Block Shift and added their temperature result in the notes section. If they have a high temperature (above 38) they **MUST** call the out of hours or office and speak to a member of the team immediately before they leave their home. The member of team will then advise them on the next steps to take.

On arrival to the service user's property, please ensure you use your bottled water and hand soap to wash your hands outside the service user's property. Please ensure your hands are dry and put a pair of gloves on.

Access the service user's property and in the hallway/porch or separate room lay out the PPE onto an additional apron (as shown in the photo below), take off your ID badge and any jacket, hoodie or jumper:



- Remove your gloves and use the hand sanitizer thoroughly on both hands then follow the process attached for donning (putting on) PPE.
- Provide care to service user, ensuring gloves are changed after every task.
- Once care delivery has been completed, please follow the process attached for doffing (taking off) PPE and place goggles into a shoe cover to take away with you.
- Place all used PPE into a double bag and leave in the same room as the service user in the property for 72 hours.

- Once outside the property, please wash your hands thoroughly with hand soap and your bottled water, ensuring they are dried thoroughly.
- Googles are to be washed in warm soapy water and dried with paper towels before using again.

See appendix 1 below for Donning and Doffing PPE

Staff should take regular breaks and rest periods.

If staff feel unwell, they must not attend work and must contact Abbots Care Limited 3 hours before they are due to work to inform Abbots Care Limited that they are unable to attend their Service User.

4.17 Gloves

Gloves must be:

- Worn when shielding a service user defined as vulnerable by Public Health England
- Worn when there is a confirmed case or suspected case of COVID-19
- Worn when there is a confirmed or suspected case in the Service User's household
- Changed between Service Users' homes
- Changed if a perforation or puncture is suspected
- Appropriate for use, fit for purpose and well-fitting
- Put on properly (donned) and taken off properly (doffed)
- Disposed of in either clinical waste where this is available or, in the case of use for Service Users with symptoms of COVID-19, double bagged and left in a safe location for 72 hours
- Worn when exposure to blood and/or other body fluids, non-intact skin or mucous membranes is anticipated or likely as per standard infection control procedures outside a pandemic

Hand hygiene is performed before donning gloves and following their removal, as outlined in the Infection Control Policy and Procedure. Staff must follow 'bare below the elbows' and must wash their hands and up to their elbows before donning and after doffing PPE.

4.8 Face Masks

Fluid repellent surgical face masks (FRSM)

Should be worn in accordance with Table 1 and Table 2 above

The aim of wearing a face mask is to protect your mouth and nose from a Service User's respiratory secretions. Wearing a face mask also protects Service Users by minimising the risk of passing on infection from yourself (via secretions or droplets from your mouth, nose and lungs) to Service Users when you are caring for them. (Note: do not go to work if you have symptoms of COVID-19 such as cough and or temperature).

Alternatives to standard PPE

There is insufficient evidence to consider homemade masks or cloth masks in health and care settings.

4.1.0 Facial Hair

Many masks rely on a good seal against the face so that, when you breathe air in, it is drawn into the filter material where the air is cleaned. If there are any gaps around the edges of the mask, 'dirty' air will pass through these gaps and into your lungs. It is therefore very important that the mask is put on correctly and is checked for a good fit every time. Facial hair – stubble and beards – make it impossible to get a good seal of the mask to the face.

If the member of staff is clean-shaven when wearing tight-fitting masks (i.e. those which rely on a good seal to the face), this will help prevent leakage of contaminated air around the edges of the mask and into the lungs. Staff will therefore be breathing in clean air which will help them stay healthy.

4.1.2 Aprons

Aprons must be:

- Worn to protect the uniform or clothes when contamination is anticipated or likely, e.g. when in direct care contact with a Service User
- Changed between Service Users and/or after completing a procedure or task
- Disposable plastic aprons must be worn to protect the staff's uniform or clothes from contamination during environmental and equipment decontamination

The current guidance is that staff do not need full body gowns/fluid repellent gowns in domiciliary care and that 'bare below the elbows' must be followed.

4.1.3 Eye and Face Protection

This provides protection against contamination to the eyes from respiratory droplets, aerosols arising from aerosol generating procedures and from splashing of secretions (including respiratory secretions), blood, body fluids or excretions. Eye and face protection can be achieved using any one of the followings:

- Surgical mask with integrated visor
- Full face shield or visor
- Polycarbonate safety spectacles or equivalent

Regular corrective spectacles are not considered adequate eye protection. Risk assessment on the use of eye protection, for example, should consider the likelihood of encountering a case(s) and the risk of droplet transmission (risk of droplet transmission to eye mucosa such as with a coughing Service User) during the care episode. The use of FRSMs during the visit and eye protection is indicated if there is perceived to be close or prolonged interaction with the Service User.

- **Uniforms**

Uniforms should be washed:

- Separately from another household linen
- In a load not more than half the machine capacity
- Wash uniforms and clothing worn at work at the hottest temperature suitable for the fabric
- A wash for 10 minutes at 60°C removes almost all micro-organisms
- Washing with detergent at lower temperatures – down to 30°C – eliminates MRSA and most other micro-organisms, including coronaviruses

4.1.5 Staff Guidance when Using PPE

- Use safe work practices to protect yourself and limit the spread of infection
- Keep hands away from the face and the PPE being worn
- Change gloves when torn or heavily contaminated
- Limit surfaces touched in the Service User environment
- Regularly perform hand hygiene
- Always clean hands after removing some or all of your PPE
- Remove PPE safely
- Take breaks and regularly hydrate

4.1.6 Action Required Before Using PPE

Follow [Public Health England Guidance](#) on donning (putting on) PPE. Before PPE is donned:

- Perform hand hygiene
- Ensure the staff member is hydrated
- Tie hair back
- Remove jewellery
- Check PPE in the correct size is available

Appendix 1 – Donning and Doffing when working with COVID-19 service users



Public Health
England

Putting on personal protective equipment (PPE) for non-aerosol generating procedures (AGPs)*

Please see donning and doffing video to support this guidance: <https://youtu.be/eANis-Jdl2s>

Pre-donning instructions:

- Ensure healthcare worker hydrated
- Remove jewellery
- Tie hair back
- Check PPE in the correct size is available

- 1** Perform hand hygiene before putting on PPE.



- 2** Put on apron and tie at waist.



- 3** Put on facemask – position upper straps on the crown of your head, lower strap at nape of neck.



- 4** With both hands, mould the metal strap over the bridge of your nose.



- 5** Don eye protection if required.



- 6** Put on gloves.



*For the PPE guide for AGPs please see:
www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control

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Public Health
England

Taking off personal protective equipment (PPE) for non-aerosol generating procedures (AGPs)*

Please see donning and doffing video to support this guidance: <https://youtu.be/eANis-Jdl2s>

- PPE should be removed in an order that minimises the risk of self-contamination

- Gloves, aprons (and eye protection if used) should be taken off in the patient's room or cohort area

1 Remove gloves. Grasp the outside of glove with the opposite gloved hand; peel off.
Hold the removed glove in the remaining gloved hand.



Slide the fingers of the un-gloved hand under the remaining glove at the wrist.
Peel the remaining glove off over the first glove and discard.



2 Clean hands.



3 Apron.
Unfasten or break apron ties at the neck and let the apron fold down on itself.



Break ties at waist and fold apron in on itself – do not touch the outside – **this will be contaminated.** Discard.



4 Remove eye protection if worn.
Use both hands to handle the straps by pulling away from face and discard.



5 Clean hands.



6 Remove facemask once your clinical work is completed.
Untie or break bottom ties, followed by top ties or elastic, and remove by handling the ties only. Lean forward slightly. Discard. DO NOT reuse once removed.



7 Clean hands with soap and water.



*For the doffing guide to PPE for AGPs see: www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control

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PPE guidance for care staff in residential, supported living and home care settings

Please follow the guidance on sessional use, the correct use and disposal of PPE and follow good hand hygiene at all times

Full PPE should be worn where carers come within 2 metres of a person for delivery of direct care

If you are working within 2 metres of someone but not providing direct care you only need a mask



For more information on infection prevention and control please visit the social care guidance on gov.uk
For local information and support please visit our provider hub www.hcpa.info/covid-19



Herts
Care
Partners



Surgical mask guidance for care staff in residential, supported living and homecare settings

Please follow guidance on sessional use and the correct use and disposal of PPE.
Remember to maintain good hand hygiene and avoid touching your face.



Activity	Fluid resistant surgical mask (Type II R)	Surgical mask (Type II)
Providing direct care to ANY* person (e.g. touching/personal care)	✓	✗
Working in an area with ANY* person which includes close contact and possible touching so unable to maintain > 2 metres.	✓	✗
Working in the same room, communal area or on a home visit with a symptomatic** person – no direct contact but potentially within 2 metres.	✓	✗
Working in the same room/communal area or on a home visit with a symptom-free person – no direct contact but potentially within 2 metres.	✗	✓
Working in an area with ANY* person and staying more than 2 meters away from them at all times.	✗	No mask required

*Person with or without Covid-19 symptoms (new continuous cough and/or high temperature)

** a symptomatic person is someone with a new continuous cough and/or high temperature

Bacterial Filtration Efficiency of surgical masks:

Type II: ~98%

Type II R: ~98% and fluid resistant

What if a Type II R (Fluid Resistant) mask isn't available?

An FFP2 can be used (and fit testing is not required in this instance).

An N95 mask is the U.S. equivalent of a FFP2.

All products must have:

- A clear CE marking
- A Declaration of Conformity
- A label with the name of device
- Instructions for use
- Warnings
- Manufacturer name & address
- Information on if the product is sterile
- Date of manufacture
- Expiry date of safe use

All surgical masks must be tested to the following
EU standard

Surgical Masks
(Type II & Type II R)

EN 14683

If using an FFP2 in place of a Type II R, FFP2s masks must be tested to EU standard EN 149:2001+A1:2009. A N95 is the U.S. equivalent of this.

For more information on infection prevention and control please visit the social care guidance on gov.uk

For local information, guidance and support please visit our provider hub www.hcpa.info/covid-19.

Version 3 | 13 May 2020



Herts
Care
Partners



Appendix 2 – What to wear for each table above (1,2 & 3)

THE DIFFERNECE BETWEEN PPE		
Personal protective equipment (PPE) – resource for domiciliary care workers delivering homecare (domiciliary care) to SU has symptoms as testing positive for COVID-19 - Table 1	Personal protective equipment (PPE) – resource for domiciliary care workers delivering homecare (domiciliary care) - Table 2	Personal protective equipment (PPE) – resource for domiciliary care workers delivering homecare (domiciliary care) When your visit does not require you to touch the Service User, but you need to be within two metres of the Service User - Table 3
<p>PPE REQUIRED: FLUID REPELLENT SURGICAL MASKS – 1 PER SERVICE USER DISPOSABLE GLOVES DISPOSABLE APRONS EYE PROTECTION - GOGGLES / VIZORS</p> <p>Before providing care: 1. Lay out PPE on a bin liner on the floor outside SU home 2. Wash Hands 3. Put Apron on 4. 5. Put your mask on 6. Put your goggles on 7. Put your gloves on 8. Provide care as normal</p> <p>After providing care: 1. Remove Gloves 2. Remove Apron 4. Remove Goggles 5. Remove Mask 6. Wash your hands 7. Dispose of your PPE correctly</p>	<p>PPE REQUIRED: FLUID REPELLENT SURGICAL MASKS – 1 PER SERVICE USER DISPOSABLE GLOVES EYE PROTECTION – GOGGLES / VIZORS (IF Air Generation required) DISPOSABLE APRONS</p> <p>Before providing care: 1. Wash Hands 2. Put Apron on 3. Put your mask on 4. Put your goggles on 5. Put your gloves on 6. Provide care as normal</p> <p>After providing care: 1. Remove Gloves 2. Remove Apron 3. Remove Goggles 4. Remove Mask 5. Wash your hands 6. Dispose of your PPE correctly</p>	<p>PPE REQUIRED: SURGICAL MASKS</p> <p>Before providing care: 1. Wash Hands 2. Put your gloves on 3. Provide care as normal</p> <p>After providing care: 1. Remove Gloves 2. Wash your hands 3. Dispose of your PPE correctly</p>



Public Health
England

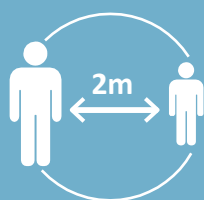
PPE guide for community health and social care settings

What PPE to wear and when – an illustrative guide



This resource outlines personal protective equipment (PPE) advice for health and social care workers working in the community. Guidance should be used in conjunction with local policies.

Personal protective equipment (PPE) is not effective on its own. Ensure you practice:



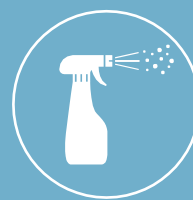
social distancing



staying away from work when you are ill



hand hygiene



more frequent cleaning

Respiratory hygiene:



catch it



bin it



kill it

If you are a health and social care worker in the community you should ensure you wear the correct PPE for your work. Below are five common scenarios you might encounter. For each we describe what PPE you should wear.

1. Personal care involving touching the person you are caring for
2. When you are within 2 metres of anyone who has a cough (whether you are caring for them or not)
3. When you are within 2 metres of the individual being cared for (for whatever reason) but not touching them
4. When you are caring for a person who is shielding
5. When you are in the workplace and 2 metres away from people you are caring for

If you are caring for someone involving aerosol generating procedures (AGPs), you will need the enhanced PPE guidance found [here](#):

www.gov.uk/government/publications/covid-19-personal-protective-equipment-use-for-aerosol-generating-procedures

1 Personal care involving touching the person you are caring for

Apron

Gloves

Fluid repellent Type IIR surgical mask

Eye protection, either a visor or goggles, can be used (prescription glasses are not eye protection), subject to risk assessment such as if the person has a cough

This PPE also applies if the person is shielding



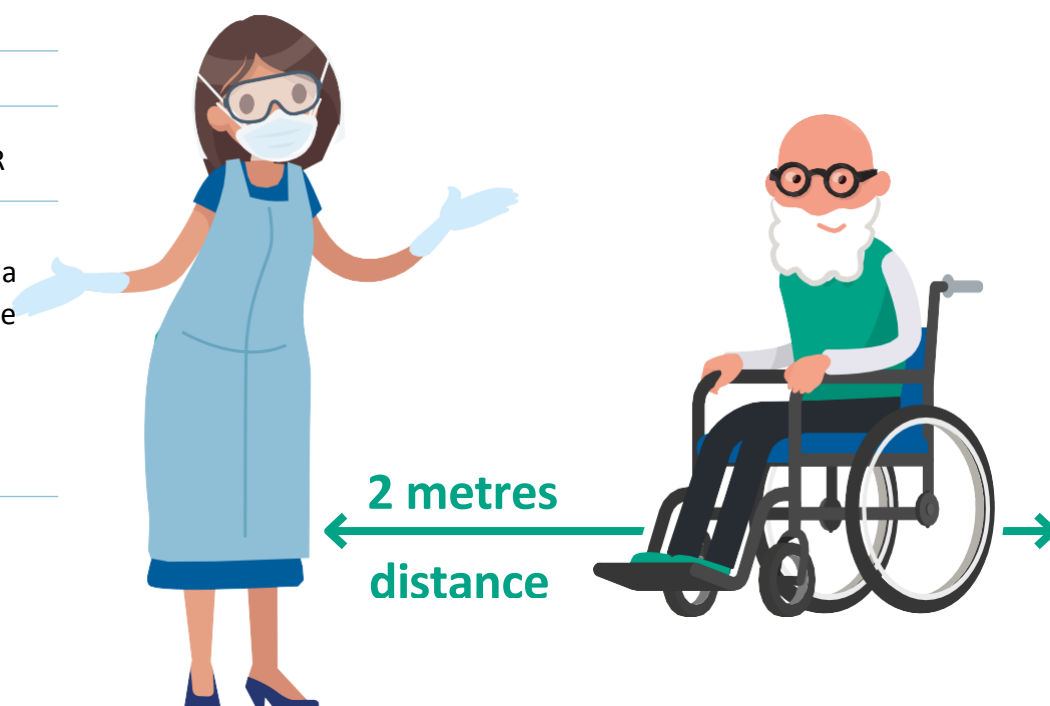
2 When you are within 2 metres of anyone who has a cough (whether you are caring for them or not)

Apron

Gloves

Fluid repellent Type IIR surgical mask

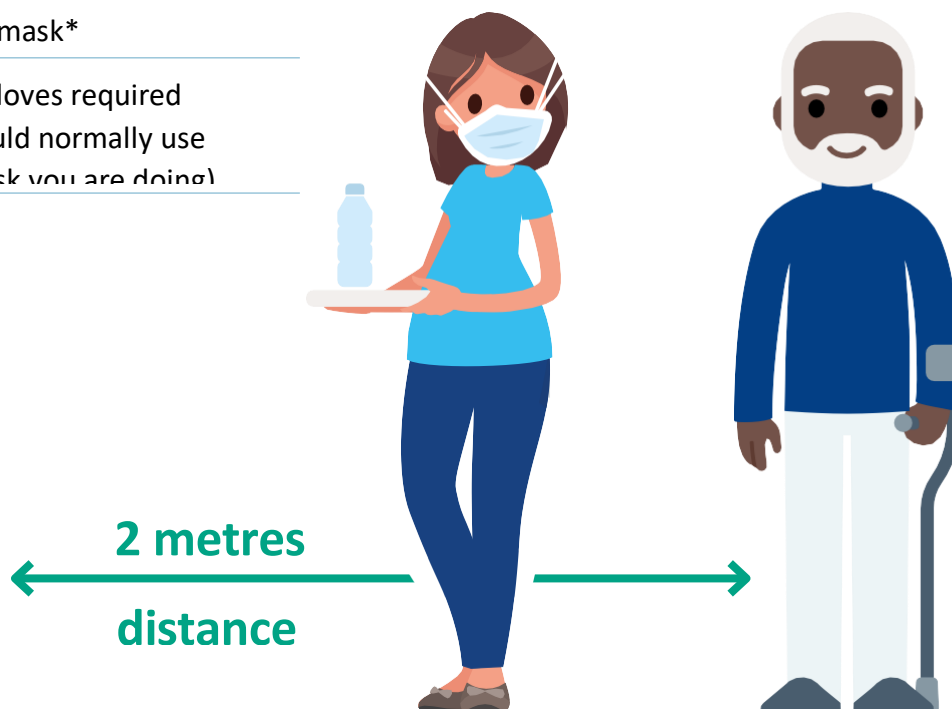
Eye protection, either a visor or goggles, can be used (prescription glasses are not eye protection), subject to risk assessment



3 When you are within 2 metres of the individual being cared for (for whatever reason) but not touching them

Type II surgical mask*

No apron and gloves required
(unless you would normally use them for the task you are doing)



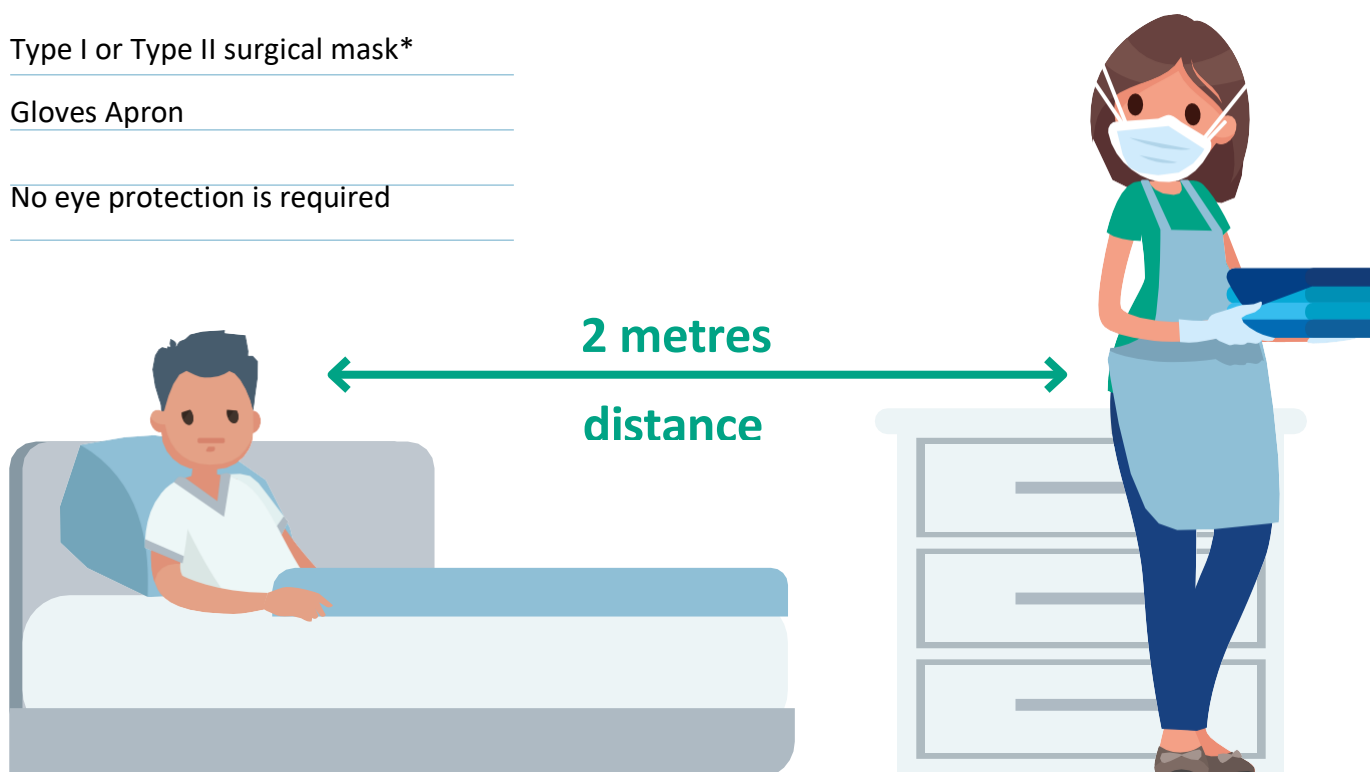
4 When you are caring for a person who is shielding

You need to follow the advice in scenarios 1 and 2 when you are giving personal care or within 2 metres. When you are 2 metres of more away but in the home or living premises of someone shielding then you need to wear the following items.

Type I or Type II surgical mask*

Gloves Apron

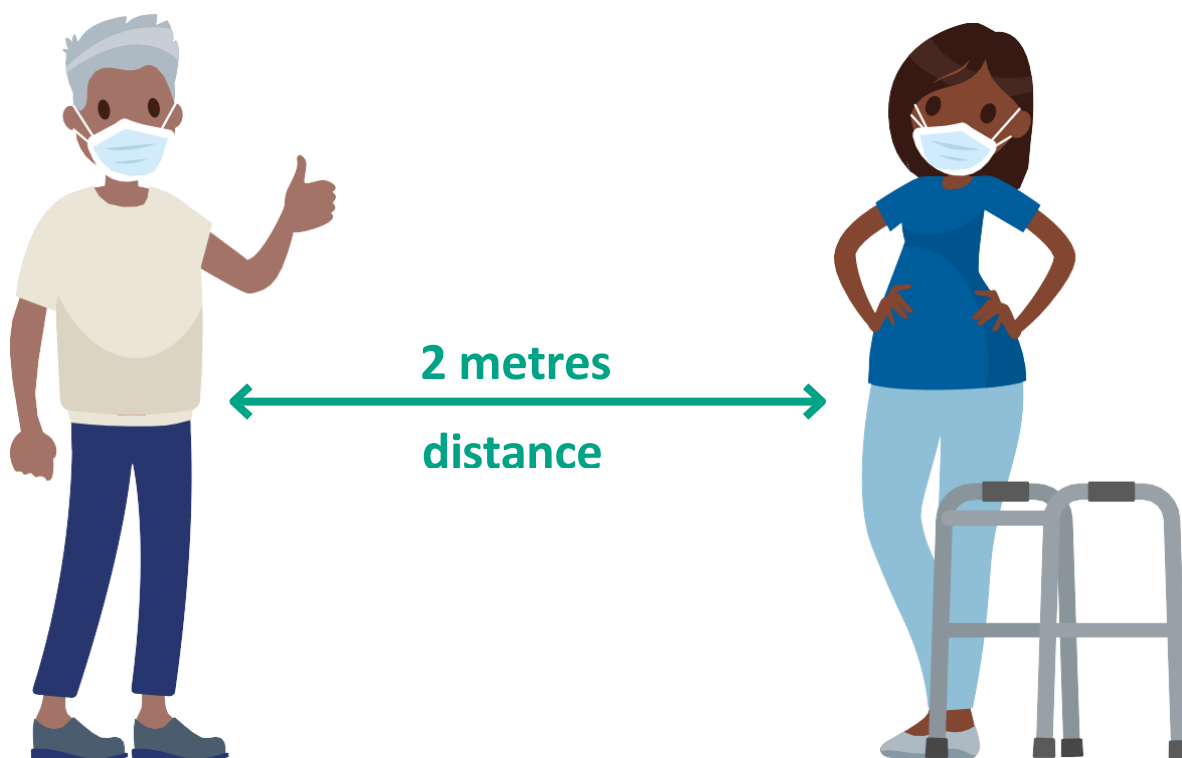
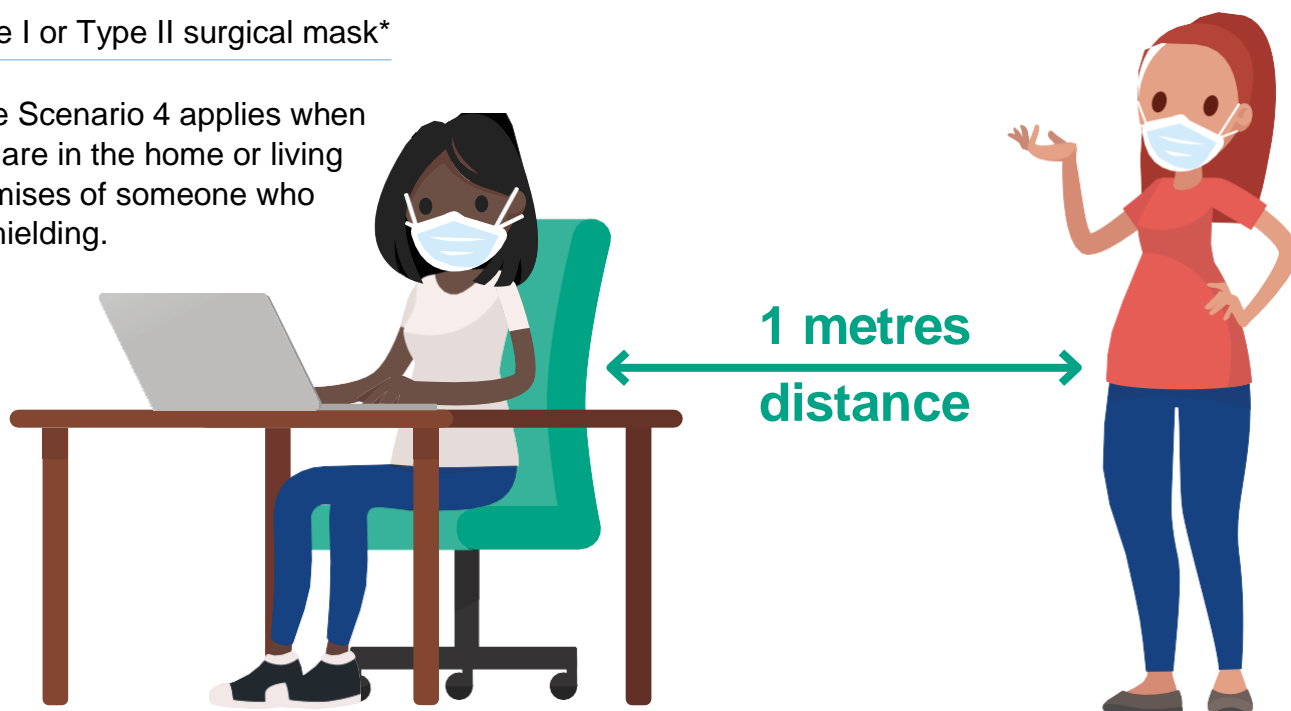
No eye protection is required



5 When you are in the workplace and 2 metres or more away from people you are caring for or supporting

Type I or Type II surgical mask*

Note Scenario 4 applies when you are in the home or living premises of someone who is shielding.



*if only fluid repellent Type IIR surgical masks are available then these may be used as an alternative

What you need to know about using PPE

You need to wear PPE for personal care of all individuals you care for:

- whether the person you are giving personal care to has symptoms or is known to have COVID-19 or not
- regardless of the age of the person you are caring for
- no matter what your role is

You can use face masks and eye protection continuously until you need to take a break or until the item needs replacing. You can use

the same mask and/or eye protection:

- for caring for more than one person (regardless whether they have symptoms)
- until you need to take a break e.g. to drink, eat or break or end duties
- when moving/travelling between individuals if safe to do so (don't wear eye protection when driving or

Use PPE safely:

- make sure you clean your hands appropriately before putting on and after removing your PPE
- you should not touch your face mask or eye protection unless it is to put it on or remove it
- make sure that your face mask always

covers your mouth and nose

- do not dangle your face mask or eye protection around your neck or place on the top of your head



Put on and take off PPE items according to this video

<https://youtu.be/-GncQ ed-9w>

Remove and discard/decontaminate the eye protection:

- if damaged, visibly soiled, uncomfortable
- for taking a break e.g. to drink, eat or break or end duties
- decontaminate your eye protection when you remove it before next use
- if your eye protection is for single use only then dispose of it after use

Remove and discard the face mask:

- if damaged, visibly soiled, damp, uncomfortable, or difficult to breathe through
- for taking a break e.g. to drink, eat or break or end duties
- replace it with a new face mask for your next duty period

Put on and remove PPE at least 2m away from the people you are caring for

Do not re-use PPE items unless they are clearly marked as re-usable:

- gloves and aprons are always single use and must be disposed of and replaced after use
- re-usable items e.g. eye protection must be cleaned according to manufacturer's instructions or according to local infection prevention and control protocol

Make sure you change your clothing at the end of your work duties and launder your uniform/work clothes:

- separately from other items if heavily soiled
- at the maximum temperature the fabric can tolerate, then iron or tumble dry

Useful further information on PPE and IPC in community health and social care settings:

How to work safely in care homes

www.gov.uk/government/publications/covid-19-how-to-work-safely-in-care-homes

How to work safely in domiciliary care

www.gov.uk/government/publications/covid-19-how-to-work-safely-in-domiciliary-care

COVID-19 personal protective equipment (PPE)

www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control/covid-19-personal-protective-equipment-ppe

Resources for care workers working with people with learning disabilities or autism

COVID-19 guide for care staff supporting adults with learning disabilities or autistic adults

www.scie.org.uk/care-providers/coronavirus-covid-19/learning-disabilities-autism/care-staff

Section 3 of this care home PPE resource

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/892466/How_to_work_safely_in_care_homes_v3_15_Jun.pdf

Section 3 of this home (domiciliary) care PPE resource

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/892496/Domiciliary_guidance_v2_15Jun.pdf

Dementia in care homes and COVID-19

www.scie.org.uk/care-providers/coronavirus-covid-19/dementia/care-homes

Considerations for acute personal protective equipment (PPE)

shortages www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control/managing-shortages-in-personal-protective-equipment-ppe

Quick guides for putting on and taking off PPE

www.gov.uk/government/publications/covid-19-personal-protective-equipment-ppe

equipment-use- for-non-aerosol-generating-procedures

My 5 moments for hand hygiene

<https://www.who.int/infection-prevention/campaigns/clean-hands/5moments/en/>