

Guidance note for the Provision of Personal Protective Equipment (PPE) during the Coronavirus Pandemic (26.10.2020)

Telford & Wrekin Council as an employer need to adequately control the risk of exposure to hazardous substances where exposure cannot be prevented. COVID 19 cannot be prevented and therefore the provision and use of personal protective equipment (PPE), is issued to protect our staff, customers and where necessary our visitors. Employees have an obligation to make full and proper use of any control measures, including using the necessary PPE, provided by Telford & Wrekin Council to ensure they are protected.

Your manager will have risk assessed the need for PPE for any tasks that have been deemed essential during the Coronavirus pandemic using the necessary PPE provision table for your service area, task or role within the authority.

- [Working in Care Homes PPE Table](#)
- [Working in Domiciliary Care PPE table](#)
- [Community visits/tasks PPE table](#)
- [Schools PPE table and Guidance](#)

If you work in a care home or domiciliary care the government have issued specific guidance on how to work safely – the key points have been incorporated into this guidance and the necessary PPE provision table. For further details see the full document. [PPE in Care homes](#) and [PPE for Domiciliary care](#)

If you have been issued with personal protective equipment here are some considerations to ensure it is providing the protection you need.

Before undertaking any procedure, staff should assess themselves any likely exposure and ensure PPE is worn that provides adequate protection against the procedure or task being undertaken.

All PPE provided:

- is compliant with the relevant BS/EN standards
- needs to be located close to the point of use;
- should be stored to prevent contamination in a clean/dry area until required for use
- is where identified, either single-use or continuously used while providing care
- the single use PPE must be disposed of after using the correct procedure

When PPE can be used for a session, you can wear masks and eye protection continuously until you take a break. Where you need to remove your mask (e.g. to take a drink or eat) then you need to dispose of it safely or remove safely and store in a bag/ box for future use. Do not dangle your mask or eye protection around your neck. It is recommend you use face masks and eye protection continuously until you leave for a break both to reduce risk of transmission and also to make it easier for you to conduct your routine work without unnecessary disruption. When you take a break, you should remove your face mask and eye protection, a new mask should be used for the next duty period.

A pre visit risk assessment where possible should take place by phone, other remote triage, prior to entering the premises or clinical area or at 2 metres social distance on entering. Where the health or social care worker assesses that an individual is symptomatic and meets the case definition, appropriate PPE should be put on prior to providing care.

Where the potential risk to health and social care workers cannot be established prior to face-to-face assessment or delivery of care (within 2 metres), the recommendation is for health and social care workers in any setting to have access to and where required wear aprons, face mask, eye protection and gloves.

These recommendations assume that employees are not undertaking aerosol generating procedures (AGPs), if AGP is being performed see the PPE Guidance for AGP .

Ultimately, where staff consider there is a risk to themselves or the individuals they are caring for they should wear a fluid repellent surgical mask with or without eye protection, as determined by the individual staff member for the episode of care or single session. Staff need to consider that some visits will be unpredictable in their nature and the appropriate controls that are necessary i.e. social distancing and the wearing of PPE will be dynamic to manage these risks.

Government guidance includes a statement that states “Workplaces should not encourage the precautionary use of extra PPE to protect against COVID-19 outside clinical settings or when responding to a suspected or confirmed case of COVID-19” the tables above will indicate what PPE is needed for your service provision and job role.

Disposable apron (single use)

Disposable plastic aprons must be worn to protect staff uniform or clothes from contamination when providing **direct** customer care and during environmental and equipment decontamination.

Disposable aprons and gowns must be changed between customers and immediately after completion of a procedure/task.

Hand hygiene must be performed immediately after the removal of the gloves and it is important that staff need to extended hand hygiene to exposed forearms, after removing any element of PPE

Disposable Gown (Full Body Suit) and over shoes

Fluid-resistant gowns must be worn when a disposable plastic apron provides inadequate cover of staff uniform or clothes for the procedure/task being performed and when there is a risk of extensive splashing of blood and/or other body fluids

Hand hygiene must be performed immediately after the removal of suit and over shoes and it is important that staff need to extended hand hygiene to exposed forearms, after removing any element of PPE.

Disposable gloves (single use)

Disposable gloves must be worn when providing **direct** customer care and when exposure to blood and/or other body fluids is anticipated/likely, including during equipment and environmental decontamination.

Gloves must be changed immediately following the care episode or the task undertaken. **See appendix one** for further details on glove type for the tasks you are carrying out.

Hand hygiene must be performed immediately after the removal of gloves and it is important that staff need to extended hand hygiene to exposed forearms, after removing any element of PPE.

Eye protection (Single use or continuously used whilst providing care)

Eye protection should be worn when there is a risk of contamination to the eyes from splashing of secretions (including respiratory secretions), blood, body fluids or excretions. An individual risk assessment should be carried out prior to/at the time of providing care.

Regular corrective spectacles are not considered adequate eye protection.

Hand hygiene must be performed immediately after the removal of eye protection and it is important that staff need to extended hand hygiene to exposed forearms, after removing any element of PPE.

Face masks (single use or continuously used whilst providing care)

There are two different types of face masks, but remember whatever mask you have been asked to wear you must:

- Not touch your face mask with your hands, if you need to, undertake hand hygiene after
- Not allow the mask to dangle around your neck after use or between uses.
- It must be well fitted and cover both noses and mouth
- Consider communication barriers when you are wearing a mask
- As the wearer (that is you) – check that it fits right, think about - facial hair, spectacles, fitting over nose bridge.

A face mask should be discarded and replaced and NOT continued to be used 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

Hand hygiene must be performed immediately after the removal of face mask and it is important that staff need to extended hand hygiene to exposed forearms, after removing any element of PPE.

1. Type IIR – Fluid Repellent Surgical Face Mask (FRSM)

This is to protect you from respiratory droplets produced by customers/residents (e.g. when they cough or sneeze), by providing a barrier to prevent these reaching your mouth and nose. They also protect the customer/residents from you and fellow care workers by minimising the risk of transmitting infection from yourself (via secretions or droplets from your mouth, nose and lungs)

2. Type II – Surgical Face Mask

The aim of a surgical type II face mask is to protect your mouth and nose from a customer's respiratory secretions. Wearing a face mask also protect customers and residents by minimising the risk of transmitting infection from yourself (via secretions or droplets from your mouth, nose and lungs) to customers/residents when you are caring for them.

Face coverings

[Face coverings](#) are mainly intended to protect others and not the wearer but it is important to know [how to wear a face-covering](#) effectively

Anyone can choose to [wear face coverings](#) whilst at work and staff wishing to wear face coverings in corridors, staff rooms and other areas where social distancing is difficult should be supported to do so, but as stated above face coverings should not be necessary in Telford & Wrekin Councils' workplace as they are assessed to be COVID secure.

Access to face coverings

It is reasonable to assume that staff will now have access to face coverings due to their increasing use in wider society, and Public Health England has made available resources on how to [make a simple face covering](#).

There is more advice on face coverings on [GOV.UK](#)

Provision and collection of PPE:

All personal protective equipment for Telford & Wrekin Council staff is centrally located and managed from a single point of contact.

The Council has procured PPE centrally to be able to supply you all with the **right quality PPE** when you need it. We have also been able to take advantage of favourable pricing due to the volumes we are purchasing. You can obtain your PPE very easily from the [Internal health and safety team](#) and if they are unable to support your request please come directly to the Procurement Team who will help source the right quality PPE at the right price.

Please do not buy any PPE or cleaning type supplies individually, the Council's Procurement and Cleaning teams have already got this covered for you so you can just get on with your day job. PPE includes but is not limited to mask, gloves, aprons, sanitiser, paper towels, cleaning solutions and wipes.

The collection point for PPE is at Granville House, St Georges Road, Donnington, TF2 7RA. You will need to have authorisation for the provision of PPE for your service area, task or role using the [PPE request form](#) and sending it to the coronavirus@telford.gov.uk email

The collection point will be manned:

- Monday to Friday (weekdays only) 11.00- 12.00 o'clock



The collection point is from **dedicated WHITE** window at the front of Granville and will be indicated by a sign too. You do not need to enter the building. The point is maned during opening times and a member of the internal H&S team will come to you at the window. On receipt of emailed authorised request we will pack the PPE into a box/bag for you to take away.

Unless you have made a prior request/have confirmed authorisation we may not be able to provide you with PPE.

User Information, instruction, and training:

There is an OLLIE module that demonstrates how to use and dispose of PPE safely

You can also access the demonstrations on these YouTube links and instruction sheets.

<p>Putting on and taking off PPE – guide for care home https://youtu.be/ozY50PPmsvE</p>	<p>How to put your PPE on safely and effectively https://youtu.be/kKz_vNGsNhc</p> <p> PHE_11606_Putting_on_PPE_02b.pdf</p>	<p>How to take your PPE off safely and effectively https://youtu.be/oUo5O1JmLH0</p> <p> PHE_11606_Taking_off_PPE_02b.pdf</p>
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Disposing of PPE correctly

All PPE that is used when encountering confirmed cases of COVID-19 is single-use only and should be changed immediately after each customer and/or following completion of a procedure or task.

PPE should be disposed of after use into clinical waste bin (this will require disposal via orange or yellow bag waste).

Where healthcare workers are caring for customers in their own homes they can dispose of PPE waste through the householder's normal non-recyclable waste collection. Place the items in a bin bag and secure and put in waste bin.

Never forget the importance of effective Hand Hygiene

Hand hygiene is essential to reduce the transmission of infection and is a critical element of standard infection control precautions.

Hand hygiene must be performed immediately before every episode of direct care and after any activity or contact that potentially results in hands becoming contaminated, including the removal of personal protective equipment (PPE), and it is important that staff need to extended hand hygiene to exposed forearms, after removing any element of PPE

Hand hygiene must be followed after contact with equipment decontamination and waste handling.

Other useful links and information

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/931636/How_to_work_safely_in_domiciliary_care_v7_2_11_2020.pdf

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/931616/How_to_work_safely_in_care_homes_v8_2_11_2020.pdf

Appendix one

Gloves – protect you from picking up SARS-CoV-2 (the virus that causes COVID-19) from the environment (such as contaminated surfaces) or directly from people infected. The use of gloves may be based on a risk assessment of the task being carried out

Vinyl gloves provide sufficient protection for the majority of duties in the care environment, providing the correct size of glove is chosen according to the wearer's hand size.

If there is a risk of gloves tearing, or the task requires a high level of dexterity, or requires an extended period of wear, then an alternative better fitting glove (e.g. Nitrile) should be considered.

If a change of gloves is required during a task because the glove is torn or punctured, then hand hygiene is needed after removal of the original gloves. Hands should be thoroughly dried to make the donning of new gloves easier and to reduce the risk of gloves tearing before donning a clean pair.

Providers need to consider the characteristics of the different gloves available for the duties the care workers are doing. This includes the gloves required in relation to cleaning products.

Vinyl

Vinyl gloves are suitable for short-term, low-risk tasks and are suitable for use in home-based and residential care settings. They do not offer quite the same level of dexterity as nitrile or latex gloves but are a good option for everyday tasks in health and care settings. They are cost effective and latex free. Because they offer less dexterity due to being a looser fit compared to nitrile or latex, they can be more susceptible to tears and punctures than other gloves. However, they still remain a good option. It is important to ensure that the correct size of vinyl gloves is available to the person wearing them.

Nitrile

Nitrile gloves are made from a synthetic rubber that is latex-free. They are superior to vinyl when it comes to puncture resistance and general durability. They can be worn for longer periods of time than vinyl. They provide a better fit to the hand (if the correct size of glove is used) and have a long shelf life. They are more expensive than vinyl gloves.

Natural rubber Latex (must be powder free)

Latex gloves are made from natural rubber. They must be powder free and can be worn for prolonged periods of time and enable the wearer to have a high degree of dexterity and comfort. However, latex gloves are associated with increased rates of contact dermatitis and allergy in a small proportion of the population. If latex gloves are needed for any specific purpose, then a risk assessment for latex sensitivity and allergy is necessary for both the person wearing the glove and the person receiving care and support.

Disposable gloves are single use and you must dispose of them immediately after completion of a procedure or task and after each person being cared for, and then clean your hands. You must take care not to touch your face, mouth or eyes when you are wearing gloves.

Disposable gloves may be worn for routine cleaning, however if chemicals are being used as part of a decontamination schedule a COSHH assessment must be carried out and the correct PPE worn