

PERSONAL PROTECTIVE EQUIPMENT – INFECTION PREVENTION AND CONTROL Page 1 of 7

Reviewed: January 2021

Policy Applies to:

All staff employed by Mercy Hospital, Credentialed Specialists, Allied Health professionals, students, patients, visitors and contractors will be supported to meet policy requirements.

Related Standards:

- Infection Prevention and Control Standards NZS 8134.3:2008
- Health and Safety at Work Act, 2015
- EQuIP 3.1.2 Health and Safety
- EQuIP 1.5.2 Infection Control

Rationale:

This policy defines the standards and processes associated with the use of personal protective equipment within the context of infection prevention and control. Personal protective equipment provides a barrier which reduces the opportunity for transmission of pathogens within a healthcare setting and provides protection for the health care worker.

Requirements for personal protective equipment outside of those used for infection control hazards do not come under this procedure (Refer to Personal Protective Equipment policy).

Definitions:

Personal protective equipment (PPE) use is part of standard precautions for all healthcare workers to prevent skin and mucous membrane exposure when in contact with blood and body fluid of any patient. PPE includes protective laboratory clothing, disposable gowns, disposable gloves, eye protection, and face masks.

Transmission based precautions are safety measures designed for the care of patients who are documented or suspected to be infected with transmissible pathogens. This requires additional precautions beyond standard precautions to interrupt transmission in hospitals. There are three types of transmission-based precautions: airborne precautions, droplet precautions, and contact precautions.

Objectives:

- To ensure staff and patient safety
- To ensure staff understand when to use PPE as part of the standard and transmission-based precautions
- To ensure staff understand what PPE equipment is available
- To ensure staff understand how to safely don and remove PPE.



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Implementation:

Protective equipment will be supplied and available in each clinical area or department as required.

All staff shall wear appropriate protective equipment whenever it is reasonably anticipated that they will be in contact with blood or body fluids from any patient. Personal protective equipment shall include- gloves, apron/gown, mask, protective eyewear/face shield.

Visitors are not usually required to wear protective clothing but gowns, gloves/aprons or masks may be required for visiting patients in isolation.

Clinical staff will be trained in the use of PPE in orientation and the safe donning and removing of PPE (see appendix one and two) as part of the Infection Prevention and Control Annual Competency. Non-clinical based staff will be trained according to their role.

Evaluation:

Orientation training and records. Hospital-acquired infection and outbreak reporting to IPCC.

Appendix One:Donning PPEAppendix Two:Removing PPE

Associated Documents:

• Lippincott, Personal Protective Equipment

Internal

- Health and Safety Policy
- Standard Precautions Policy
- Isolation Policy
- Infectious Diseases Patient Management
- Hand Hygiene Policy
- Blood and Body Fluid Exposure and Management Policy
- Outbreak management Policy
- MDRO Policy
- Emergency Management Policy



Process

Gloves

Gloves must be available and accessible in a range of sizes in all patient care areas. Gloves are single-use.

Wearing gloves reduces contamination of hands and minimises the risk that a health care worker will become infected after contact with a patient's blood or body substance. When gloves are worn and used appropriately they can reduce the likelihood that staff will transmit micro-organisms from their hands to patients.

The type of glove used will depend on the task involved:

Non-sterile gloves:

• Non-sterile nitrile gloves are suitable for most situations when contact with any blood or body substance, mucous membranes or non-intact skin is anticipated.

Sterile gloves:

- Sterile gloves shall be worn for surgical procedures where asepsis must be maintained.
- Staff involved with surgical procedures should double-glove for added protection.

Masks

A mask shall be worn in any situation.

- When splash or splatter with blood or body substance to the mucous membranes on the mouth and nose is anticipated.
- To protect staff from inhalation of infectious aerosols or droplets, smoke or plume or other airborne and droplet hazards.
- To prevent the spread of micro-organisms from the nasopharynx of staff of the patient to others who are susceptible.

Types of masks:

Surgical Mask (with or without visor)

- Used in outpatient and inpatient departments or operating theatres.
- Used when caring for patients with a diagnosed or suspected droplet infectious disease.
- Used by immunocompromised patients/staff to protect them from inhalation of potentially infective hazards.

Respirator mask

• Used when caring for patients with diagnosed or suspected airborne infectious diseases.



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• Used when preparing, administering and discarding medications and or therapies that are hazardous to the administrator e.g., Chemotherapy.

Eye/ Face Protection

Eye/face protection shall be worn in any situation when splash or splatter with blood or body substance to the mucous membrane of the mouth, nose and or eyes is likely.

Types of eye/face protection:

- Chin length plastic face shield
- Mask with a visor attached
- Safety glasses with side shields
- Goggles

Note: Prescription glasses do not provide adequate protection

Protective Clothing

Gowns/aprons are to be worn to protect clothing and/or skin from becoming contaminated, soiled or wet from splashes or contact with blood or body substances, or during cleaning and disinfection.

Types of protective clothing:

<u>Plastic aprons</u>

• In general, disposable plastic aprons should be used in standard precautions where there is anticipated contact with blood/body fluid and patient clothing/skin with the uniform or skin of a staff member. E.g., removing a drain, repositioning a patient.

Fluid Resistant Gown

• Long-sleeved, disposable fluid-resistant gowns should be used for transmission based isolation or where there is an elevated risk of contamination.

Note: Plastic aprons and gowns are single-use



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APPENDIX ONE

SEQUENCE FOR PUTTING ON PERSONAL PROTECTIVE EQUIPMENT (PPE)

The type of PPE used will vary based on the level of precautions required, such as standard and contact, droplet or airborne infection isolation precautions. The procedure for putting on and removing PPE should be tailored to the specific type of PPE.

1. GOWN

- Fully cover torso from neck to knees, arms to end of wrists, and wrap around the back
- · Fasten in back of neck and waist

2. MASK OR RESPIRATOR

- Secure ties or elastic bands at middle of head and neck
- · Fit flexible band to nose bridge
- Fit snug to face and below chin
- Fit-check respirator

3. GOGGLES OR FACE SHIELD

· Place over face and eyes and adjust to fit

4. GLOVES

· Extend to cover wrist of isolation gown



USE SAFE WORK PRACTICES TO PROTECT YOURSELF AND LIMIT THE SPREAD OF CONTAMINATION

- Keep hands away from face
- Limit surfaces touched
- · Change gloves when torn or heavily contaminated
- · Perform hand hygiene





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APPEDNDIX TWO:

HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE) EXAMPLE 1

There are a variety of ways to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. Here is one example. **Remove all PPE before exiting the patient room** except a respirator, if worn. Remove the respirator **after** leaving the patient room and closing the door. Remove PPE in the following sequence:

1. GLOVES

- Outside of gloves are contaminated!
- If your hands get contaminated during glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Using a gloved hand, grasp the palm area of the other gloved hand and peel off first glove
- · Hold removed glove in gloved hand
- Slide fingers of ungloved hand under remaining glove at wrist and peel off second glove over first glove
- · Discard gloves in a waste container

2. GOGGLES OR FACE SHIELD

- Outside of goggles or face shield are contaminated!
- If your hands get contaminated during goggle or face shield removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Remove goggles or face shield from the back by lifting head band or ear pieces
- If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container

3. GOWN

- Gown front and sleeves are contaminated!
- If your hands get contaminated during gown removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Unfasten gown ties, taking care that sleeves don't contact your body when reaching for ties
- · Pull gown away from neck and shoulders, touching inside of gown only
- Turn gown inside out
- · Fold or roll into a bundle and discard in a waste container

4. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated D0 N0T T0UCH!
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front
- Discard in a waste container

5. WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING ALL PPE











PERFORM HAND HYGIENE BETWEEN STEPS IF HANDS BECOME CONTAMINATED AND IMMEDIATELY AFTER REMOVING ALL PPE





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HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE) EXAMPLE 2

Here is another way to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. **Remove all PPE before exiting the patient room** except a respirator, if worn. Remove the respirator **after** leaving the patient room and closing the door. Remove PPE in the following sequence:

1. GOWN AND GLOVES

- Gown front and sleeves and the outside of gloves are contaminated!
- If your hands get contaminated during gown or glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp the gown in the front and pull away from your body so that the ties break, touching outside of gown only with gloved hands
- While removing the gown, fold or roll the gown inside-out into a bundle
- As you are removing the gown, peel off your gloves at the same time, only touching the inside of the gloves and gown with your bare hands. Place the gown and gloves into a waste container



2. GOGGLES OR FACE SHIELD

- Outside of goggles or face shield are contaminated!
 If your hands get contaminated during goggle or face shield removal,
- immediately wash your hands or use an alcohol-based hand sanitizer • Remove goggles or face shield from the back by lifting head band and
- without touching the front of the goggles or face shield
 If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container

3. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated D0 N0T T0UCH!
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front
- · Discard in a waste container
- 4. WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING ALL PPE





PERFORM HAND HYGIENE BETWEEN STEPS IF HANDS BECOME CONTAMINATED AND IMMEDIATELY AFTER REMOVING ALL PPE

