

Face and PPE

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Choosing the right Face covering

- Face Covering - used by the public are not suitable for care staff.
- Face masks:
 - Surgical face mask Type IIR- used for most situations.
 - FFP3:
 - Used for Aerosol generating procedures.

What is 'sessional use'?

- Sessional use refers to using PPE for a period of time.
- During this period you may be looking after more than one resident.
- The items that can be used *sessionally* are the ones that protect the health worker from that resident (mask and eye protection).
- Items that protect both the resident and the health care worker cannot be used in this way (gloves and apron) and must be changed between residents.

Using face mask and eye protection “sessionally”

- Do:
 - Make sure that it is comfortably put in place and will not need adjustment.
 - Take a comfort break before putting it on and remain well hydrated.
- Don't:
 - Have a mask hanging off your chin or with goggles on top of your head.
 - Take them off and leave them to reuse.

How to wear the face mask

- **Do:**
 - Cover both nose and mouth.
 - Wear once and then discard – hands must be cleaned after disposal.
- **Don't:**
 - Dangle around the neck.
 - Hang from your ear.
 - Touch once put on, except when carefully removed before disposal.

Face Coverings

- Face coverings is the term used for the variety of products used in the community to cover both the mouth and nose.
- Cotton Face coverings used in the community when out shopping are **NOT** good enough for work. They do not offer staff enough protection.
- While working in a health care setting you must use medical grade products.

Reasons to remove a face mask

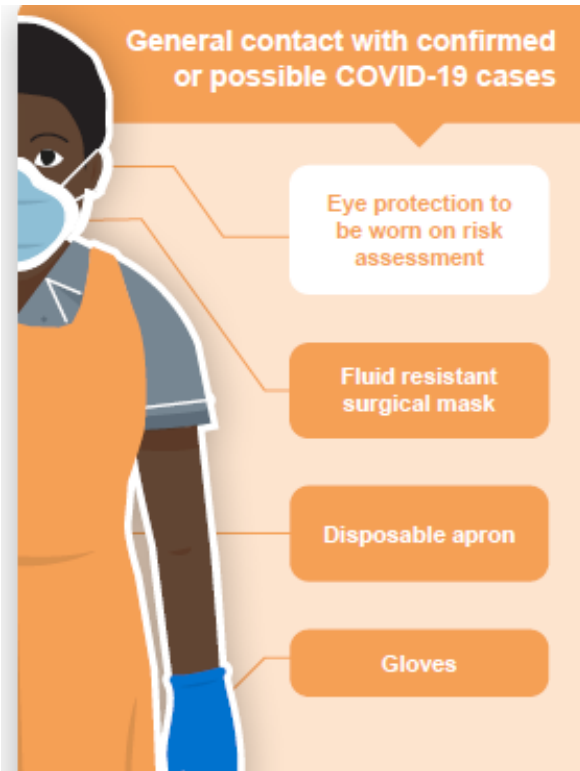
- Damp.
- Contaminated.
- Leaving the care facility.

Aerosol generating procedures

e.g. in patients with tracheostomy or those with CPAP masks

- You will need different PPE .
- FFP 3 Face mask.
 - Specialist training needed!
- Long sleeve water repellent gowns.
- Residents may deteriorate more quickly.
- Contact the GP, your local IPC Team and get a hospital opinion.

Choose the correct PPE



Recommended PPE items	Explanation
<p>✓ Disposable gloves</p>	<p>Single use to protect you from contact with resident's body fluids and secretions.</p>
<p>✓ Disposable plastic apron</p>	<p>Single use to protect you from contact with resident's body fluids and secretions.</p>
<p>✓ Fluid-resistant surgical mask</p>	<p>Fluid-repellent surgical masks can be used continuously while providing care, until you take a break from duties (e.g. to drink, eat, for your break time or end of shift).</p> <p>The mask is worn to protect you, the care worker, and can be used while caring for a number of different residents. You should not touch your face mask unless it is to put it on or remove it.</p> <p>You should remove and dispose of the mask if it becomes damaged, soiled, damp, or uncomfortable to use. You need to use a new mask when you re-start your duties after a break.</p>
<p>Eye protection</p>	<p>Eye protection may be needed for care of some residents where there is risk of droplets or secretions from the resident's mouth, nose, lungs or from body fluids reaching the eyes (e.g. caring for someone who is repeatedly coughing or who may be vomiting).</p> <p>Use of eye protection should be discussed with your manager and you should have access to eye protection (such as goggles). If you are provided with goggles, then you should be given instructions on how to clean and store them between duties.</p> <p>Eye protection can be used continuously while providing care, until you need to take a break from duties.</p>



Disposable plastic aprons

- Should be used when there is a risk of clothes becoming contaminated with blood/bodily fluids.
- When client/resident has a known infection.
- When providing direct client/resident care.
- When cleaning equipment.
- Single use – discard following episode of client care.

Gloves are not a substitute for hand hygiene

- Gloves and apron should never be used *sessionally*.
- Hands should be washed to the elbow between patients.
- Even if your are wearing gloves your hands inside may get contaminated therefore requiring hand hygiene following glove removal.

Eye Protection

- Risk assess for the need to wear.
- Either goggles or face visor.
- Ideally single use (Visors).
- Goggles may be reusable – decontamination.
- Glasses are not adequate protection.

Donning and Doffing







<https://www.youtube.com/watch?v=ozY50PPmsvE&feature=youtu.be>



How to work safely in care homes Putting on personal protective equipment (PPE)

Before putting on your PPE:

- make sure you drink some fluids before putting on your PPE
- tie hair back
- remove jewellery
- check PPE in the correct size is available

<p>1 Clean your hands using alcohol hand rub/gel or use soap and water.</p> 	<p>2 Put on apron and tie at waist.</p> 	<p>3 Put on facemask – position upper straps on the crown of your head, lower strap at nape of neck.</p> 
<p>4 With both hands, mould the metal strap over the bridge of your nose.</p> 	<p>5 Don or put on your eye protection, if required due to the risk of splashing.</p> 	<p>6 Put on gloves.</p> 












Please see the Putting on and taking off PPE – a guide for care homes video here: <https://youtu.be/ozY50PPmsvE>

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How to work safely in care homes Taking off personal protective equipment (PPE)

- 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 resident's room or cohort area
- This is the type of PPE is needed when providing personal care which requires you to be in direct contact with the resident(s) (e.g. touching) or within 2 metres of a resident who is coughing

<p>1 Remove gloves. Grasp the outside of glove with the opposite gloved hand; peel off. Hold the removed glove in the remaining gloved hand.</p> 	<p>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.</p> 
<p>2 Clean hands.</p> 	<p>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.</p>  
<p>4 Remove eye protection if worn due to risk of splashing. Use both hands to handle the straps by pulling away from face and discard or disinfect before using again.</p> 	<p>5 Clean hands.</p> 
<p>6 Remove your facemask once your care task is completed and before you take a break, eat a snack or change activities. Untie or break bottom ties, followed by top ties or elastic, and remove by handling the ties only because the front of the face mask may be contaminated. Lean forward slightly. Discard. DO NOT reuse once removed.</p>   	<p>7 Clean hands with soap and water.</p> 

Please see the guide and instruction video here: www.gov.uk/government/publications/covid-19-how-to-work-safely-in-care-homes

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Donning and Doffing

- Risk of Contaminating your self.
- Donning - Low risk.
- Doffing - High risk.
- PPE being removed is contaminated.
- Support other staff.
- Watch and remind them.

PPE do's and don'ts

- Fail to prepare - Prepare to fail.
- Walking out of a patients room wearing Gloves and Aprons is a major contributor to the spread of infection.
- When you go in to provide personal care take everything with you.
- Staff should **not** be seen walking round the communal areas of the care home wearing gloves and aprons.

PPE

- Ensure you have plenty of stock of all PPE items.
- PPE can be ordered via:
 - National Portal.
 - People commissioning.