PPE guidance

The revised PHE guidance below recommends Fluid Resistant Surgical Masks –TYPE 11R (FRSM) can be used for single or sessional (extended) use.

Please refer to table below. However, a risk assessment should be undertaken by each HCW to determine if the mask can be worn as single-use or per session.

In principle a mask may be able to be worn until the mask becomes, compromised, damp, damaged, uncomfortable to wear or for comfort breaks.

The rationale for recommending sessional use is aimed in reducing the risk of inadvertent indirect transmission. The guidance says there is no evidence to show that discarding facemask or eye protection in between each patient reduces the risk of transmission to HCW or patient.

Also, staff working in reception, communal areas, dispensary (unable to maintain -2 metres social distancing) can wear an FRSM mask for a whole session. This may also help to maintain, safe FRSM stock levels.
Guide to donning and doffing standard Personal Protective Equipment (PPE)

for health and social care settings

Donning or putting on PPE
Before putting on the PPE, perform hand hygiene. Use alcohol handrub or gel or soap and water. Make sure you are hydrated and are not wearing any jewellery, bracelets, watches or stoned rings.

1. Put on your plastic apron, making sure it is tied securely at the back.
2. Put on your surgical face mask, if tied, make sure securely tied at crown and nape of neck. Once it covers the nose, make sure it is extended to cover your mouth and chin.
3. Put on your eye protection if there is a risk of splashing.
4. Put on non-sterile nitrile gloves.
5. You are now ready to enter the patient area.

Doffing or taking off PPE
Surgical masks are single session use, gloves and apron should be changed between patients.

1. Remove gloves, grasp the outside of the cuff of the glove and peel off, holding the glove in the gloved hand, insert the finger underneath and peel off second glove.
2. Perform hand hygiene using alcohol hand gel or rub, or soap and water.
3. Snap or unfasten apron ties the neck and allow to fall forward.
4. Snap waste ties and fold apron in on itself, not handling the outside as it is contaminated, and put into clinical waste.
5. Once outside the patient room. Remove eye protection.
6. Perform hand hygiene using alcohol hand gel or rub, or soap and water.
7. Remove surgical mask.
8. Now wash your hands with soap and water.

Please refer to the PHE standard PPE video in the COVID-19 guidance collection:

If you require the PPE for aerosol generating procedures (AGPs) please visit:
COVID-19 Safe ways of working

A visual guide to safe PPE

General contact with confirmed or possible COVID-19 cases:
- Eye protection to be worn on risk assessment
- Fluid resistant surgical mask
- Disposable apron
- Gloves

Aerosol Generating Procedures or High Risk Areas:
- Eye protection eye shield, goggles or visor
- Filtering facepiece respirator
- Long sleeved fluid repellent gown
- Gloves

Clean your hands before and after patient contact and after removing some or all of your PPE
Clean all the equipment that you are using according to local policies
Use the appropriate PPE for the situation you are working in (General / AGPs or High Risk Areas)
Take off your PPE safely
Take breaks and hydrate yourself regularly

For more information on infection prevention and control of COVID-19 please visit:
## Covid-19: PPE guidance

New guidelines on use of personal protective equipment (PPE) by healthcare workers significantly expands the potential use of eye protection and fluid-resistant surgical masks, including to doctors carrying out face to face assessments where a patient’s risk of Covid-19 is unknown.*

### Situation

<table>
<thead>
<tr>
<th>Mask/respirator</th>
<th>Apron/gown</th>
<th>Eye protection</th>
<th>Gloves</th>
</tr>
</thead>
<tbody>
<tr>
<td>Performing AGP on patient with suspected or confirmed Covid-19 OR All patients in context of sustained Covid-19 transmission</td>
<td>FFP3 (filtering facepiece) respirator filters at least 99% of airborne particles</td>
<td>Long sleeved disposable fluid resistant gown Must be worn when risk of splashing of body fluids</td>
<td>Full face shield orvisor only</td>
</tr>
<tr>
<td>Within higher risk acute inpatient care areas (where AGPs are regularly performed)</td>
<td>If FFP3 not available: FFP2 and N95 respirators filter 94% and 95% of particles</td>
<td>Disposable plastic apron provides inadequate cover of staff uniform or clothes for the procedure or task being performed</td>
<td>Disposable gloves</td>
</tr>
<tr>
<td>Labour ward (not aerosol generating procedures or surgery) for possible or confirmed cases (or all patients subject to local risk assessment)</td>
<td>Fluid resistant surgical mask (type III) Provide barrier protection against droplets</td>
<td>If fluid resistant gown not available, a non-fluid resistant gown can be worn with disposable plastic apron underneath</td>
<td></td>
</tr>
<tr>
<td>Face to face assessment or direct care where risk of covid-19 cannot be established prior to consultation</td>
<td></td>
<td>Disposable plastic apron</td>
<td></td>
</tr>
<tr>
<td>Inpatient area with suspected or confirmed covid-19 patients (giving direct care)</td>
<td></td>
<td>Eye protection See examples above</td>
<td></td>
</tr>
<tr>
<td>Primary care, direct care of possible or confirmed case (or all patients subject to local risk assessment)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emergency or acute admissions, possible or confirmed cases (or all cases subject to local risk assessment)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Transfer of possible or confirmed cases</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Operating theatres without aerosol generating procedures, treatment of possible or confirmed cases (or all patients subject to local risk assessment)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inpatient area with suspected or confirmed covid-19 patients (not giving care)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inpatient areas with no identified suspected or confirmed cases</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>


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# Recommended PPE for primary, outpatient and community care by setting, NHS and independent sector

<table>
<thead>
<tr>
<th>Setting</th>
<th>Context</th>
<th>Disposable Gloves</th>
<th>Disposable Plastic Apron</th>
<th>Disposable Fluid-resistant coverall (gown)</th>
<th>Surgical mask</th>
<th>Fluid-resistant (Type II)</th>
<th>N95 facepiece</th>
<th>Eye/face protection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Any setting</td>
<td>Performing an aerosol generating procedure (e.g. on a possible or confirmed case)</td>
<td>✔️ single use</td>
<td>✗</td>
<td>✔️ single use</td>
<td>✗</td>
<td>✗</td>
<td>✔️ single use</td>
<td>✗</td>
</tr>
<tr>
<td>Primary care, ambulatory care, and other non-emergency outpatient and other non-clinical settings (e.g. optometry, dentistry, massage, mental health)</td>
<td>Direct patient care – possible or confirmed case(s) (within 2 metres)</td>
<td>✔️ single use</td>
<td>✔️ single use</td>
<td>✗</td>
<td>✗</td>
<td>✔️ single or n95 use</td>
<td>✗</td>
<td>✔️ single or n95 use</td>
</tr>
<tr>
<td></td>
<td>Working in reception/communal area with possible or confirmed case(s) and unable to maintain 2 metres social distance</td>
<td>✗</td>
<td>✗</td>
<td>✗</td>
<td>✗</td>
<td>✗</td>
<td>✗</td>
<td>✗</td>
</tr>
<tr>
<td>Individuals own home (current place of residence)</td>
<td>Direct care to any member of the household where any member of the household is a possible or confirmed case(s)</td>
<td>✔️ single use</td>
<td>✔️ single use</td>
<td>✗</td>
<td>✗</td>
<td>✔️ single or n95 use</td>
<td>✗</td>
<td>✔️ single or n95 use</td>
</tr>
<tr>
<td></td>
<td>Direct care or visit to any individuals in the extremely vulnerable group or where a member of the household is within the extremely vulnerable group undergoing shielding</td>
<td>✔️ single use</td>
<td>✔️ single use</td>
<td>✗</td>
<td>✗</td>
<td>✔️ single or n95 use</td>
<td>✗</td>
<td>✗</td>
</tr>
<tr>
<td>Community-care home, mental health inpatients and other outpatient care facilities (e.g. learning disability, hospices, prison healthcare)</td>
<td>Facility with possible or confirmed case(s) and direct resident care (within 2 metres)</td>
<td>✔️ single use</td>
<td>✔️ single use</td>
<td>✔️ single use</td>
<td>✗</td>
<td>✔️ single or n95 use</td>
<td>✗</td>
<td>✗</td>
</tr>
<tr>
<td>Any setting</td>
<td>Collection of nasopharyngeal swabs</td>
<td>✔️ single use</td>
<td>✔️ single or n95 use</td>
<td>✗</td>
<td>✗</td>
<td>✔️ single or n95 use</td>
<td>✗</td>
<td>✗</td>
</tr>
</tbody>
</table>

**Table 2**

1. This may be single or reusable face protection for a specific use or goggles.
2. The full list of aerosol generating procedures (AGPs) is in the PPE guidance. [Note: AGPs are undergoing a further review at present.]
4. Single use refers to disposables of PPE or decontamination of reusable items (e.g. eye protection or respirators). After each patient contact or following completion of a procedure, task, or sequence, dispose or decontaminate reusable items after each patient contact or use. [https://www.hse.gov.uk/infshort/contrel.html](https://www.hse.gov.uk/infshort/contrel.html)
5. Single session refers to a period of time when a healthcare worker is undertaking duties in a specific care setting/exposure environment, e.g. in a ward, ward, providing ongoing care for inpatients. Session ends when the healthcare worker leaves the care setting/exposure environment. Single use should always be risk assessed and considered where there are high rates of hospital cases. PPE should be disposed of after each session or earlier if damaged, soiled, or uncomfortable.
6. Non-clinic staff should maintain 2 metres social distancing, through maintaining a controlled distance. Sessions use should always be risk assessed and considered where there are high rates of community cases.
7. Initial risk assessment should take place by phone prior to entering the premises or at 2 metres social distance on entering. Where the healthcare or hospital worker assesses that an individual is symptomatic with suspected or confirmed cases appropriate PPE should be used prior to providing care.
8. Risk assessed use refers to utilising PPE when there is an anticipated high risk of contamination with respiratory droplets or body fluids.