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| **Initial Effective Date** | mm/dd/yyyy |
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| **Authorized/Reviewed by** | Individual or Committee Name |
| **Standard** | 22VAC40-61-290 B, D, and E |

**Definition and Overview (define the infection control practice)**

Personal protective equipment (PPE) includes a variety of barriers used alone or in combination to protect mucous membranes, skin and clothing from contact with pathogens. PPE comprises gloves, gowns, face protection (including facemasks, goggles, and face shields) and respiratory protection.

In this center, use of PPE is expected not only by direct care staff to prevent the transmission of infection but also by anyone who handles food, cleaning chemicals and hazardous agents according to the Safety Data Sheets (SDS) for protection.

**Purpose (why this policy/procedure is important)**

Using PPE prevents exposure to blood, body fluids, or potentially infectious materials. Proper selection and use of PPE is an element of Standard Precautions and an important strategy for preventing the transmission of pathogens to participants, staff and visitors.

Principles of Standard Precautions that apply to selection and use of PPE:

1. All blood, body fluids, secretions, excretions (except sweat), non-intact skin (including rashes), and mucous membranes may contain transmissible pathogens.
2. PPE selection and use should be based on the type of interaction/task and the type of exposure anticipated, durability, appropriateness for the task and fit, regardless of a participant’s suspected or confirmed infection status.

**Responsibility (who is responsible for following this policy/procedure)**

For the purpose of this policy, the term “staff” will be used to refer to any individual providing direct care, anyone who handles food, and also anyone who handles cleaning chemicals and hazardous agents.

**Policy and Procedure**

To protect participants, visitors and staff, this center promotes the proper use of PPE. It is the expectation that proper PPE use is performed when indicated as part of this center’s infection prevention program.

Selection of Appropriate PPE

The selection and proper use (i.e., donning and doffing) of PPE during participant care activities, as well as during environmental services and cleaning and food handling and preparation, should be incorporated into all aspects of the center’s operations.

*Gloves:*

1. Wear gloves when:
   1. Direct contact with blood, body fluids, mucous membranes, nonintact skin, or potentially contaminated surfaces or equipment is anticipated.
   2. Assisting an individual in the restroom.
   3. Preparing or handling food items.
   4. Cleaning up spills or bodily fluids.
   5. Using cleaning products and chemicals.
   6. Administering medications if indicated by the administration route or method required for the specific medication.
2. Guidelines for glove use:
   1. Gloves are not a substitute for hand hygiene.
   2. Use gloves that fit properly and are designed for the task.
   3. Perform hand hygiene prior to donning gloves and immediately after removing gloves.
   4. Gloves must be changed after the care of one participant and before providing care to another participant.
   5. Do not touch your face or PPE with contaminated gloves.
   6. Do not touch environmental surfaces except as necessary when providing care.
3. When donning gloves:
   1. Inspect gloves to ensure they are not damaged.
   2. Carefully pull one onto each hand. If wearing a gown, extend the glove to cover the wrist of the gown.
4. When doffing gloves:
   1. Using a gloved hand, grasp the palm area of the other gloved hand and gently pull the glove away from the palm and toward the fingers, removing the glove inside out.
   2. Hold the removed glove in the gloved opposite hand.
   3. Without touching the outside of the contaminated glove, carefully slide the ungloved index finger inside the wrist band of the gloved hand.
   4. Gently pulling outward and down toward fingers, remove the glove inside out.
   5. Throw away both gloves in an appropriate container.
   6. Use an alcohol-based hand rub to clean your hands and other exposed skin or use the soap and water method to wash hands.
5. When to change gloves and perform hand hygiene:
   1. If the glove becomes damaged or torn.
   2. If the gloves become visibly soiled.
   3. When moving from performing a dirty task (e.g., trash removal and incontinence care) to clean tasks.
   4. After sneezing, coughing, or touching hair or face with gloved hand.

*Gowns:*

1. Wear a gown when:
   1. The arms, exposed body areas, and clothing need to be protected from contamination.
   2. Splashing or spraying of blood, body fluid, and other potentially infectious material is anticipated.
   3. During direct care when the individual is suspected to have an infection with symptoms such as fever, diarrhea, vomiting, coughing, sneezing or rash.
2. Guidelines for gown use:
   1. Single-use/disposable gowns should not be used more than one time and should be disposed of after each use
   2. If cloth gowns or other multi-use gowns are utilized, follow manufacturer instructions on cleaning and reuse.
   3. Gowns should be changed right away if wet, soiled or torn.
3. When donning a gown:
   1. Select an appropriate size.
   2. Fully cover torso from neck to knees, arms to the end of the wrists and wrap around the back.
   3. Fasten behind neck and waist. Never tie a gown in the front.
4. When doffing a gown:
   1. Unfasten the gown ties, taking care that sleeves do not contact your body when reaching for ties.
   2. Pull gown away from neck and shoulders, touching inside of gown only.
   3. Turn gown inside out.
   4. Fold or roll into a bundle and discard in an appropriate container.

*Masks*

Face protection (i.e., a combination of facemask and goggles, or face shield) should be worn to protect the face from contamination with blood, body fluids, and other potentially infectious materials during tasks that generate splashes or sprays. Masks are to be used according to the center’s recommendations/requirements and/or regulatory guidance.

1. Wear a mask when:
   1. The nose and mouth need to be protected from spray or splash of blood and body fluids, or for protection from respiratory secretions.
   2. Needed for source control.
2. When donning a mask:
   1. Secure ties or ear loops.
   2. Fit flexible band to nose bridge.
   3. Fit snug to face and below chin (make sure nose, mouth and chin are covered).
3. When doffing a mask:
   1. Grasp bottom ties or elastics of the mask or respirator, then the ones at the top, and remove without touching the front.
   2. Discard in an appropriate container.

*Respirators*

1. Wear a respirator when:
   1. Wear a fit-tested, approved N-95 respirator or higher-level respirator to prevent inhalation of pathogens transmitted by the airborne route, or if recommended by the Centers for Disease Control and Prevention (CDC).
2. When donning a respirator:
   1. Place the respirator over the nose and mouth and fit the flexible nose piece over the nose bridge.
   2. Secure on the head with the elastic bands and adjust to fit.
   3. Perform a seal check by loosely cupping hands over mask: inhale—the respirator should collapse, and exhale—checking for leakage around the edges of the mask.
3. When doffing a respirator:
   1. The respirator should be removed immediately after exiting the room.
   2. Grasp the bottom ties or elastic of the respirator, then the ones at the top, and remove without touching the front.
   3. Discard in an appropriate container and perform hand hygiene.

*Goggles*

1. Wear goggles when:
   1. Wear goggles to protect the eyes from splashes or sprays of blood, or body fluids.
   2. Goggles should fit snuggly over and around the eyes.
2. Guidelines for goggle use:
   1. Personal glasses are not a substitute for protective eyewear.
3. When donning goggles:
   1. Place over face and eyes.
   2. Adjust to fit.
4. When doffing goggles:
   1. Remove goggles or face shiels from the back by lifting head band or earpieces.
   2. If reusable, disinfect according to disinfectant manufacturer instructions, allowing for adequate drying times, and return to supply stock.
   3. If disposable, discard in an appropriate container.

*Face Shields*

1. Wear a face shield when:
   1. Needing to protect the face, mouth, nose and eyes from splash or spray of blood or body fluids.
2. Guidelines for face shield use:
   1. Assure the face shield completely covers the face around the sides and below the chin.
3. When donning a face shield:
   1. Place over face and eyes.
   2. Adjust to fit.
4. When doffing a face shield:
   1. Remove face shield from the back by lifting head band or earpieces.
   2. If reusable, disinfect and return to supply stock.
   3. If disposable, discard in an appropriate container.

Putting on PPE (Donning) Should Occur in the Following Order:

1. Gown
2. Mask or respirator
3. Goggles or face shield
4. Gloves

Removal of PPE (Doffing) Should Occur in the Following Order:

1. Gloves
2. Goggles or face shield
3. Gown
4. Mask or respirator

Key Points of PPE Usage:

1. Wash hands or use an alcohol-based hand sanitizer immediately after removal of PPE. If any item of PPE becomes soiled or compromised, that item should be removed and disposed of according to center and policy guidelines, hand hygiene should be performed, and reapplication of necessary PPE should occur.
2. Accessibility of PPE:
   1. The center shall have the supplies necessary for adherence to proper PPE use. These supplies shall also be readily accessible in the participant care areas and other areas where use of PPE is indicated.
   2. PPE shall be available in appropriate sizes.
3. Key Points of PPE Usage:
   1. Keep hands away from your face when wearing PPE.
   2. Perform tasks from clean to dirty.
   3. Limit the surfaces you touch.
   4. Change PPE when torn or heavily contaminated.
   5. Remove PPE in a manner to avoid contaminating your skin or clothing.
   6. Perform hand hygiene following removal of PPE.
   7. PPE designated as single-use should not be reused.
4. Disposing of PPE:
   1. After use of PPE, dispose of your PPE according to center protocol. PPE that is free from visible contamination with blood or body fluids can be discarded in regular trash and PPE that is visibly contaminated with blood or body fluids is discarded in biohazard bags.
5. Staff Training and Competencies:
   1. Staff should be trained at time of hire and at least annually in the use of PPE. Training should include:
      1. How to recognize the different types of PPE available.
      2. How to select appropriate PPE based on the activity.
      3. How to appropriately don and doff PPE.

**Guidelines, Standards, and Resources for Policy/Procedure Development**

Policies and procedures on selection and use of PPE for standard precautions should be developed using evidence-based guidelines or national standards, such as resources from CDC and Virginia Department of Health. The following resources could be used for developing hand hygiene policies and procedures for your center:

* [Sequence for Putting on Personal Protective Equipment (PPE) | CDC](https://www.cdc.gov/hai/pdfs/ppe/PPE-Sequence.pdf)
* [Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings (2007) | CDC](https://www.cdc.gov/infectioncontrol/guidelines/isolation/index.html/Isolation2007.pdf)
* [Personal Protective Equipment Competency Validation | SPICE](https://spice.unc.edu/wp-content/uploads/2020/02/PPE-Competency-SPICErev-1-EC02272020.pdf)
* [PPE Poster (English and Spanish) | CDC](https://www.cdc.gov/hai/pdfs/ppe/ppeposter148.pdf)
* [2014 Donning and Doffing PPE Competency Validation Checklist | APIC](http://apic.org/Resource_/TinyMceFileManager/Topic-specific/Donning_and_Doffing_PPE_COMPETENCY_VALIDATION_CHECKLIST.pdf)

**Notes and Recommendations**

* Other participant care and center operation policies and procedures should reinforce the proper use of PPE by incorporating PPE as a critical step. Examples may include environmental cleaning, food delivery and respiratory hygiene.
* Additional considerations should be given by each center to the CDC guidelines for precautions and use of PPE as the standard of care while also maintaining the dignity and integrity of the center and its participants which is not an acute care facility.
* Additional considerations should be given to include who is tasked with maintaining adequate PPE supplies within the center and setting stock minimums or par levels for a stockpile of all PPE types, and how those stockpiles are maintained.
* For all staff and volunteer training, consider the use of quizzes/tests at the conclusion of training, competency validation/return demonstration of proper technique for donning/doffing of PPE in appropriate order, or teach back of content to ensure comprehension. See the poster sequence for putting on and removing PPE and PPE Sequence links under the Guidelines, Standards, and Resources section contained within this policy.
* Consider utilizing an auditing schedule for ongoing sustainment of this policy.