

# Strategies for Extending Personal Protective Equipment Use

Although the use of personal protective equipment (PPE) is the most visible control used to prevent the spread of infection, it is only one of the infection, prevention, and control measures available and should not be relied on as a primary prevention strategy.

## Altering work practices to minimize patient contact may include the following:

- Isolating suspected and/or confirmed COVID-19 residents in cohorts.
- Assign dedicated teams of health care workers to provide care for residents with suspected or confirmed cases of COVID-19. Workers should not move between suspected or confirmed COVID-19 patients and non-COVID-19 patients.
- Restrict the number of health care workers from entering rooms of patients if they are not involved in providing direct care.
- Consider bundling activities to minimize the number of times a room is entered (check vital signs during medication administration). Plan which activities will be performed at the bedside.

## Considerations for Personal Protective Equipment use:

- Communicate PPE usage expectations and monitor use.
- Use a centralized process for PPE storage, management, and distribution. Use a central, managed location within each facility from which PPE supplies will be stored for distribution to areas where needed.
- Ensure appropriate use of PPE in all settings. Workers must engage in a full PPE risk and point-of-care assessment for all resident interactions.
- Cease all non-essential education and training activities requiring PPE. If training and education are required, consider using PPE that is beyond the manufacturer's designated shelf life.
- Ensure staff use diligent hand hygiene practices between glove changes, after doffing each individual piece of PPE, and before donning new PPE.
- Ensure that staff required to wear PPE have received education and training on donning and doffing procedures¹ to be followed. Do not dangle masks or eye protection around the neck or other areas that could be contaminated.

## **Additional Precautions:**

• In addition to using the appropriate PPE, frequent handwashing (using soap and water for at least 20 seconds) and respiratory hygiene (directing coughs/sneezes into your sleeve) should always be performed.

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## **Use of Personal Protective Equipment:**

Follow the guidelines and recommendations below to help ensure you are getting the most out of your organization's supply of PPE.

**Note:** Gloves have not been included in the tables below as the expectation is that they are changed after every resident interaction, followed by hand hygiene.

## **EXTEND ITS LIFE**

Wear your mask continuously, for as long as possible, and remove only when necessary.

If you have touched or adjusted your mask, perform hand hygiene immediately.

## **REMOVE & DISPOSE**

Masks are considered contaminated and should be replaced when they become moist, visibly soiled, or exposed to splashes of body fluids, chemicals, or infectious substances.

Replace your mask immediately if it is damaged.

Always remove and dispose of your mask before taking a break or eating, and at the end of your shift.

**TRAINING** Ensure that care workers who are required to wear PPE received appropriate education and training on donning and doffing procedures<sup>1</sup>.

#### **EXTEND ITS LIFE**

Wear your mask continuously, for as long as possible, and remove only when necessary.

If you have touched or adjusted your mask, perform hand hygiene immediately.

An expired N95 respirator can still be effective if the straps are intact, there are no visible signs of damage, and the wearer can successfully perform a seal check.

Note: A seal check should be performed every time a respirator is donned.

#### **REMOVE & DISPOSE**

Respirators are considered contaminated and should be replaced when they become moist, visibly soiled or exposed to splashes of body fluids, chemicals, or infectious substances.

Replace your respirator immediately if it is damaged.

Always remove your respiratory before taking a break or eating, and at the end of your shift.

Note: Used respirators that are not visibly soiled or dirty (i.e. makeup) can be stored in anticipation of approved re-sterilization methods that may become available.

**TRAINING** Care workers should receive training on the proper use of respirators, including donning and doffing, limitations on their use, and maintenance is essential for effective use of respiratory protection.

Note: N95 wearers must be fit tested every two years.

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#### EXTEND ITS LIFE

Wear a gown only when indicated by routine practices.

If you are staying with a cohort of residents who are on contact and droplet precautions for an extended period, wear your gown continuously for as long as possible. Remove your gown only when necessary.

#### **REMOVE & DISPOSE**

Gowns are considered contaminated and should be replaced when they become wet, soiled, or are exposed to splashes of body fluids, chemicals, or infectious substances.

Follow safe doffing and disposal/laundering procedures to prevent contamination of the surrounding environment.

**CLEAN & REUSE** Washable cotton gowns must be laundered and disinfected before being reused.

## **EXTEND ITS LIFE**

Wear your eye or face protection continuously, for as long as possible, and remove only when necessary.

If you have touched or adjusted your eye or face protection, perform hand hygiene immediately.

To dedicate re-usable eyewear to a specific staff member, label them and store in a plastic bag when not in use.

If your supply of face shields and goggles has been exhausted, safety glasses with side extensions that cover the side of the eyes may be used.

## **REMOVE & DISPOSE**

Eye and face protection are considered contaminated and should be replaced when they become exposed to splashes of body fluids, chemicals, or infectious substances.

If your eye or face protection becomes loose, obstructs your vision, or otherwise compromises your safety, replace them with something better fitting.

Always remove your eye or face protection before taking a break or eating, and at the end of your shift.

Follow safe procedures for removing eye and face protection to prevent contamination of eyes.

**CLEAN & REUSE** After doffing and performing hand hygiene, eye and face protection may be disinfected immediately OR placed in a designated sealed container for later cleaning.

When cleaning eye and face protection use a clean and disinfected surface. If clean eye protection is not being used right away, ensure it is stored properly to avoid recontamination.

**TRAINING** Providing staff with training on proper eye protection disinfection<sup>2</sup> will help reduce the spread of infection.

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Alternate PPE Suppliers. In the event you are experiencing shortages of supplies, please visit <a href="https://www.safecarebc.ca/covid19/alternative-suppliers">www.safecarebc.ca/covid19/alternative-suppliers</a> for a list of alternative suppliers who may be able to meet your needs.

**Ministry of Health Emergency Supplies.** Organizations that require emergency PPE can submit a request to the Ministry of Health online at <a href="https://www.safecarebc.ca/pperequest">www.safecarebc.ca/pperequest</a>.

## **ENDNOTES**

- 1. BC Centre for Disease Control. Personal Protective Equipment. <a href="http://www.bccdc.ca/health-professionals/clinical-resources/covid-19-care/infection-control/personal-protective-equipment">http://www.bccdc.ca/health-professionals/clinical-resources/covid-19-care/infection-control/personal-protective-equipment</a>
- 2. Vancouver Coastal Health Infection Control. Cleaning and Disinfection of Eye Protection. http://ipac.vch.ca/Documents/Cleaning%20and%20Disinfection/Cleaning%20Protective%20Eye wear.pdf

## **REFERENCES**

- BC Center for Disease Control & BC Ministry of Health. COVID-19: Emergency Prioritization in a Pandemic Personal Protective Equipment (PPE) Allocation Framework. <a href="https://www2.gov.bc.ca/assets/gov/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/covid-19/ppe\_allocation\_framework\_march\_25\_2020.pdf">https://www2.gov.bc.ca/assets/gov/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/covid-19/ppe\_allocation\_framework\_march\_25\_2020.pdf</a>
- BC Center for Disease Control & BC Ministry of Health. (2020, Mar 29). COVID-19: Personal Protective Equipment (PPE) Bulletin #1. <a href="https://www2.gov.bc.ca/assets/gov/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/covid-19/covid-19-pho-guidance-ppe-health-authority-staff.pdf">https://www2.gov.bc.ca/assets/gov/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/covid-19/covid-19-pho-guidance-ppe-health-authority-staff.pdf</a>
- World Health Organization. (2020, Feb 27). Rational use of personal protective equipment for coronavirus disease 2019 (COVID-19). <a href="https://apps.who.int/iris/bitstream/handle/10665/331215/">https://apps.who.int/iris/bitstream/handle/10665/331215/</a> <a href="https://apps.who.int/iris/bitstream/handle/10665/">https://apps.who.int/iris/bitstream/handle/10665/</a> <a href="h
- World Health Organization, (2020, Apr 6). Rational use of personal protective equipment for coronavirus disease (COVID-19) and considerations during severe shortages: interim guidance. <a href="https://apps.who.int/iris/bitstream/handle/10665/331695/WHO-2019-nCov-IPC\_PPE\_use-2020.3-eng.pdf?sequence=9&isAllowed=y">https://apps.who.int/iris/bitstream/handle/10665/331695/WHO-2019-nCov-IPC\_PPE\_use-2020.3-eng.pdf?sequence=9&isAllowed=y</a>

The most up-to-date version of this document is available electronically at: www.safecarebc.ca/extendingPPE

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