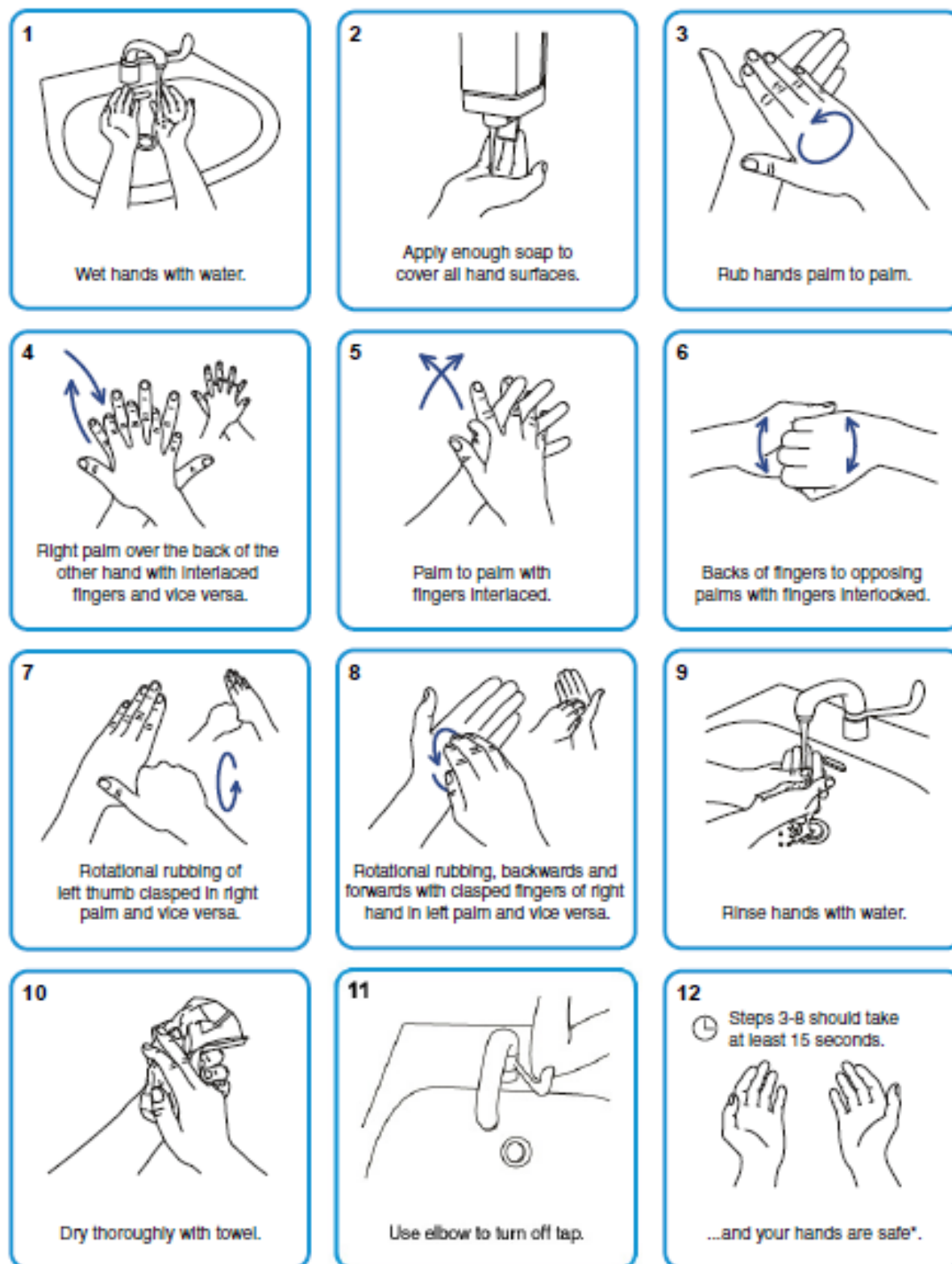


# Appendix 1

## Best Practice: how to hand wash

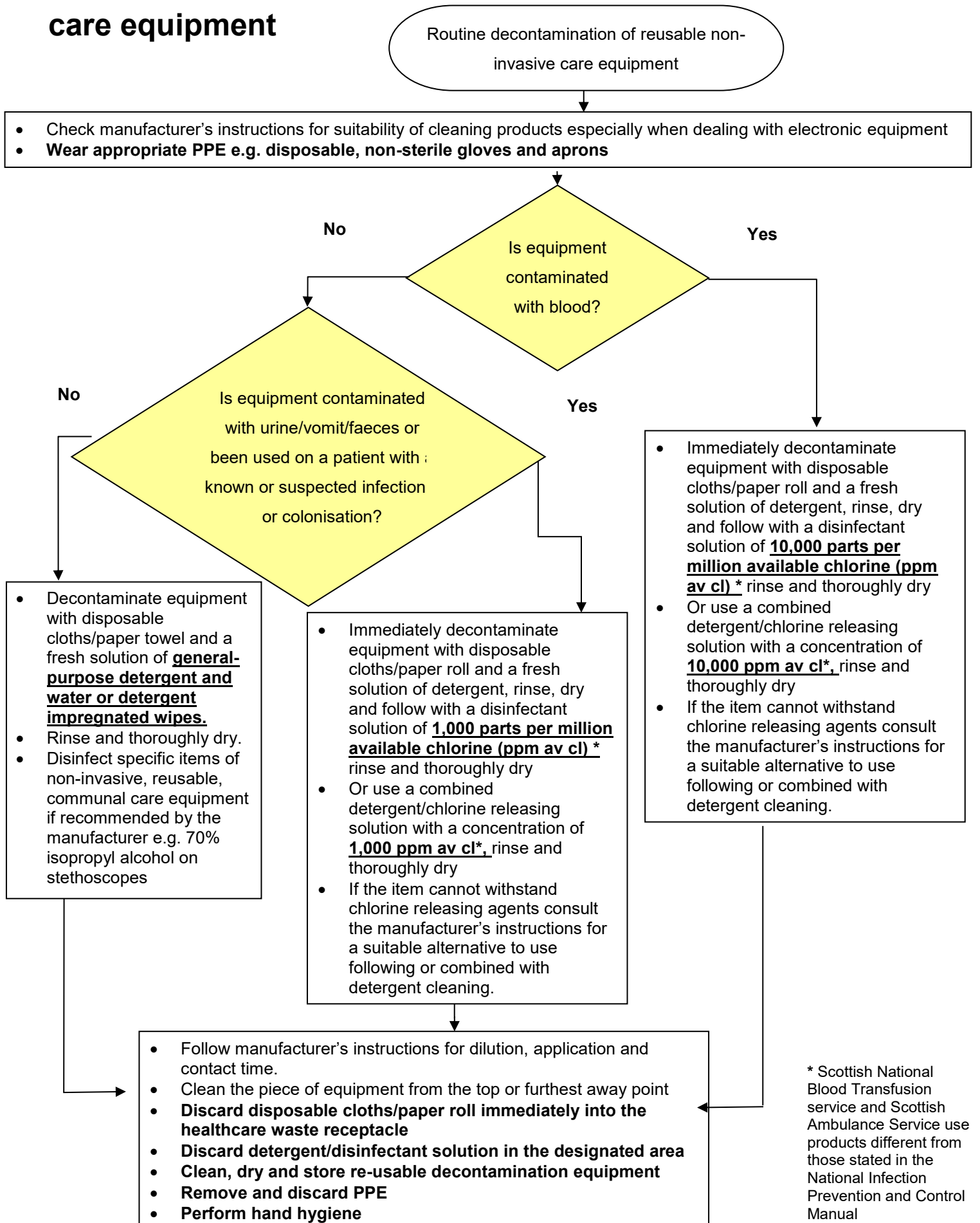
Steps 3-8 should take at least 15 seconds.



\*Any skin complaints should be referred to local occupational health or GP.

# Appendix 2

## Routine decontamination of reusable non-invasive patient care equipment



## Appendix 3

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

Setting	Context	Disposable Gloves	Disposable Plastic Apron	Disposable fluid-repellent coverall/gown	Surgical mask	Fluid-resistant (Type IIR) surgical mask	Filtering face piece respirator	Eye/face protection <sup>1</sup>
Any setting	Performing an aerosol generating procedure <sup>2</sup> on a possible or confirmed case <sup>3</sup>	✓ single use <sup>4</sup>	✗	✓ single use <sup>4</sup>	✗	✗	✓ single use <sup>4</sup>	✓ single use <sup>4</sup>
Primary care, ambulatory care, and other non emergency outpatient and other clinical settings e.g. optometry, dental, maternity, mental health	Direct patient care – possible or confirmed case(s) <sup>3</sup> (within 2 metres)	✓ single use <sup>4</sup>	✓ single use <sup>4</sup>	✗	✗	✓ single or sessional use <sup>4,5</sup>	✗	✓ single or sessional use <sup>4,5</sup>
	Working in reception/communal area with possible or confirmed case(s) <sup>3</sup> and unable to maintain 2 metres social distance <sup>6</sup>	✗	✗	✗	✗	✓ sessional use <sup>5</sup>	✗	✗
Individuals own home (current place of residence)	Direct care to any member of the household where any member of the household is a possible or confirmed case <sup>3,7</sup>	✓ single use <sup>4</sup>	✓ single use <sup>4</sup>	✗	✗	✓ single or sessional use <sup>4,5</sup>	✗	✓ risk assess single or sessional use <sup>4,5,8</sup>
	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 <sup>9</sup>	✓ single use <sup>4</sup>	✓ single use <sup>4</sup>	✗	✓ single use <sup>4</sup>	✗	✗	✗
	Home birth where any member of the household is a possible or confirmed case <sup>3,7</sup>	✓ single use <sup>4</sup>	✓ single use <sup>4</sup>	✓ single use <sup>4</sup>	✗	✓ single or sessional use <sup>4,5</sup>	✗	✓ single or sessional use <sup>4,5</sup>
Community and social care, care home, mental health inpatients and other overnight care facilities e.g. learning disability, hospices, prison healthcare	Facility with possible or confirmed case(s) <sup>3</sup> – and direct resident care (within 2 metres)	✓ single use <sup>4</sup>	✓ single use <sup>4</sup>	✗	✗	✓ sessional use <sup>5</sup>	✗	risk assess sessional use <sup>5,8</sup>
Any setting	Collection of nasopharyngeal swab(s)	✓ single use <sup>4</sup>	✓ single or sessional use <sup>4,5</sup>	✗	✗	✓ single or sessional use <sup>4,5</sup>	✗	✓ single or sessional use <sup>4,5</sup>

Table 2

- This may be single or reusable face/eye protection/full face visor or goggles.
- The list of aerosol generating procedures (AGPs) is included in section 8.1 at: [www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control/covid-19-personal-protective-equipment-ppe](https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control/covid-19-personal-protective-equipment-ppe). (Note APGs are undergoing a further review at present)
- A case is any individual meeting case definition for a possible or confirmed case: <https://www.gov.uk/government/publications/wuhan-novel-coronavirus-initial-investigation-of-possible-cases/investigation-and-initial-clinical-management-of-possible-cases-of-wuhan-novel-coronavirus-wn-cov-infection>
- Single use refers to disposal of PPE or decontamination of reusable items e.g. eye protection or respirator, after each patient and/or following completion of a procedure, task, or session; dispose or decontaminate reusable items after each patient contact as per Standard Infection Control Precautions (SICPs).
- A single session refers to a period of time where a health care worker is undertaking duties in a specific care setting/exposure environment e.g. on a ward round; providing ongoing care for inpatients. A session ends when the health care worker leaves the care setting/exposure environment. Sessional 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.
- Non clinical staff should maintain 2m social distancing, through marking out a controlled distance; sessional use should always be risk assessed and considered where there are high rates of community cases.
- Initial risk assessment should take place by phone prior to entering the premises or at 2 metres social distance on entering; where the health or social care worker assesses that an individual is symptomatic with suspected/confirmed cases appropriate PPE should be put on prior to providing care.
- Risk assessed use refers to utilising PPE when there is an anticipated/likely risk of contamination with splashes, droplets or blood or body fluids.
- For explanation of shielding and definition of extremely vulnerable groups see guidance: <https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19>



# Putting on personal protective equipment (PPE) for non-aerosol generating procedures (AGPs)\*

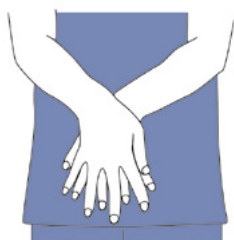
Please see donning and doffing video to support this guidance: [https://youtu.be/-GncQ\\_ed-9w](https://youtu.be/-GncQ_ed-9w)

### Pre-donning instructions:

- Ensure healthcare worker hydrated
- Tie hair back
- Remove jewellery
- Check PPE in the correct size is available

1

Perform hand hygiene before putting on PPE.



2

Put on apron and tie at waist.



3

Put on facemask – position upper straps on the crown of your head, lower strap at nape of neck.



4

With both hands, mould the metal strap over the bridge of your nose.



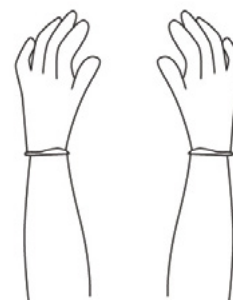
5

Don eye protection if required.



6

Put on gloves.



\*For the PPE guide for AGPS please see:

[www.gov.uk/government/publications/covid-19-personal-protective-equipment-use-for-aerosol-generating-procedures](https://www.gov.uk/government/publications/covid-19-personal-protective-equipment-use-for-aerosol-generating-procedures)



# Taking off personal protective equipment (PPE) for non-aerosol generating procedures (AGPs)\*

Please see donning and doffing video to support this guidance: [https://youtu.be/-GncQ\\_ed-9w](https://youtu.be/-GncQ_ed-9w)

- 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 patient's room or cohort area

- 1** Remove gloves. Grasp the outside of glove with the opposite gloved hand; peel off. Hold the removed glove in the remaining gloved hand.



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.



- 2** Clean hands.



- 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.



- 4** Remove eye protection if worn. Use both hands to handle the straps by pulling away from face and discard.



- 5** Clean hands.



- 6** Remove facemask once your clinical work is completed.



Untie or break bottom ties, followed by top ties or elastic, and remove by handling the ties only. Lean forward slightly. Discard. DO NOT reuse once removed.

- 7** Clean hands with soap and water.



\*For the PPE guide for AGPS please see:

[www.gov.uk/government/publications/covid-19-personal-protective-equipment-use-for-aerosol-generating-procedures](https://www.gov.uk/government/publications/covid-19-personal-protective-equipment-use-for-aerosol-generating-procedures)