

<b>Status: Guideline:</b> offers direction and guidance on good practice, need not necessarily be strictly adhered to.	<b>Policy No: ICG 01</b> <b>Revision No: 0</b> <b>Date Approved: 01/03/11</b> <b>Review Date: 01/03/13</b>
<b>Title:</b> Guidelines for the Use of Personal Protective Clothing for Staff	
<b>Written by:</b> Clinical Practice Project Group	
<b>Approved by:</b> National Risk Management Committee	
<b>Cross Reference:</b> ICG 02, ICG 05	

### 1.0 Purpose

The purpose of these guidelines is to provide direction on the use of personal protective clothing to prevent cross infection and uphold standards of safe practice in Cheshire Ireland centres/services.

### 2.0 Scope

These guidelines refer to all Cheshire Ireland employees who require the use of protective clothing as indicated in providing a service to Cheshire Ireland service users.

### 3.0 Responsibility

- It is the responsibility of all staff who require the use of protective clothing to be familiar with and adhere to these guidelines.
- It is the responsibility of service managers to ensure staff are familiar with the guidelines and to monitor compliance.

### 4.0 Definitions

**Protective Clothing:** Is used in addition to normal clothing to protect both the service user and the staff member from potential risks of cross infection, and reduce the opportunities for the transmission of micro-organisms in services. The type of protective clothing worn must be based upon an assessment of the risk of transmission of micro-organisms to the service user, and the risk of contamination of the staff member's clothing and skin by the service user's blood, body fluids, secretions and excretions.

Protective clothing is not a substitute for safe practice but is complementary to it.

The aim of wearing protective clothing is:

- To protect susceptible service users from infection.
- To protect staff members from occupational exposure to blood and body fluids.

Protective clothing includes: Gloves, Aprons, Face Masks, Eye Protection.

## 5.0 Guidelines

- In line with a person centred approach, it is vital to engage with the service user prior to donning protective clothing to ensure they understand the reason for the use of the protective clothing.
- In relation to the use of protective clothing, staff will respect the rights of Cheshire service users to be treated with sensitivity and respect as individuals, and to have wishes and opinions in relation to the use of protective clothing considered fairly (Cheshire Ireland National Consumer Committee, 2004).
- Protective clothing should be easily accessible and available to staff in areas of centres/services where their use is indicated. They should be stored in clean dry areas away from any source of potential contamination or soiling.
- The need to use protective clothing should be based on a risk assessment of the task to be undertaken.
- Protective clothing should be worn as single-use items, for one procedure or episode of care only and then discarded.
- Hands should be washed thoroughly, even visibly clean hands after gloves have been removed.
- Hair restraints and beard restraints should be worn by all staff as appropriate. All wrist or hand jewellery (except plain wedding bands) must be removed.
- Only protective clothing visibly soiled with blood, or excreta, and protective clothing used with a service user who has a known or suspected pathogen, will be discarded in Healthcare Risk waste.

## 6.0 Guidelines in Relation to Gloves

### 6.1 The aim of wearing gloves is:

- To protect hands from becoming contaminated with organic matter and micro-organisms when exposed to blood, body fluids, secretions, excretions, mucous membranes, and non-intact skin.
- To protect user's hands from certain chemicals that may adversely affect the condition of the skin.

- To prevent the transmission of micro-organisms, which may be present on the hands of staff, to service users during invasive care procedures.
- **Wearing gloves is not a substitute for good hand washing.**

### **6.2 Factors to be considered before wearing gloves:**

- **The likelihood of exposure to blood, body fluids, secretions and excretions.**
- The potential for contact with non-intact skin and mucous membranes.
- The length of the procedure.
- Whether sterile or non-sterile gloves are required.
- Potential contact with any chemicals, drugs or other substances.
- To avoid potential damage to gloves during use, staff should keep nails short and avoid wearing rings, as these interfere with hand-washing, make glove donning more difficult and have the potential to tear the glove.
- In line with a person centred approach it is vital to engage with the service user prior to donning gloves, to ensure they understand the reason for the use of the gloves. Please see appendix for guidance on the usage of gloves.

### **6.3 Glove Donning and Removal**

Techniques for donning sterile and non-sterile gloves differ. Sterile gloves are put on after hand-washing and gowning. This procedure is not described here but is described in the guideline for wound dressing. The procedure for donning non-sterile gloves does not require strict sterility, although hands should be first washed and dried well (Ref: Guidelines for Hand Hygiene, ICG 02).

#### **Glove Donning:**

- Take a glove from the dispenser or package. Hold the wrist end of the glove open and ease the fingers of the other hand inside.
- Gently pull the wrist end of the glove while easing the hand into the glove.
- Apply the next glove to the other hand using the same procedure.

#### **Glove Removal:**

- Once the procedure is completed, gloves should be removed carefully to avoid contaminating the hands or environment.
- Take the wrist end of one glove and gently pull the glove down the hand, turning it inside out.

- Continue to grasp the first glove and with the un-gloved hand, pull the other glove from the wrist so that it too is inside out, and covers the first glove.
- Place both gloves in a healthcare waste bin if soiled with blood or excreta from a service user, who is an infection control risk.
- **ALWAYS WASH AND DRY HANDS THOROUGHLY FOLLOWING GLOVE REMOVAL.**

### **7.0 Guidelines in Relation to Aprons:**

Staff should wear single use plastic apron:

- When clothing is likely to have direct contact with blood or body fluids.
- When clothing is likely to become wet or soiled.
- For **direct** contact with a service user, or their environment, who at the time may represent an infection control risk.

### **8.0 Guidelines in Relation to Face Masks and Eye Protection:**

- Face masks and eye protection will be worn where there is a risk of blood, body fluids, secretions or excretions splashing into the face and eyes (NICE, 2003).
- After use face masks and eye protection will be placed in a healthcare waste bin, if soiled with blood/body fluids or excreta, or if the service user's condition may represent an infection control risk.

### **9.0 Infection Control Measures related to Handling Food:**

- All staff handling food should wear suitable, clean and appropriate outer clothing. Hair should be kept neat and tidy.
- Where vomiting occurs in a food handling area, exposed food should be disposed of. The area should be cleaned and subsequently disinfected with a freshly prepared hypochlorite-based cleaner (Bleach/chlorine, according to manufacturer's instructions).

### **Troubleshooting:**

- Staff should change and not wear their work clothes outside the service if they have had direct contact with blood or body fluids at work.
- Staff should not come to work if they have diarrhoea

## 10.0 References

Ayliffe, J (2000) *Control of Hospital Infection* (4<sup>th</sup> Ed) Arnold, New York.

ICNA Publication (April 2002) *Personal Protective Clothing Principles and Guidance*.

*Infection Control* (2003) *Journal of Hospital Infection*, Vol 55, Supp. 2 December.

NICE – National Institute for Clinical Excellence (June 2003) *Infection Control, Prevention of Healthcare-Associated Infection in Primary and Community Care (No.1) Standard Principles*. [www.nice.org.uk](http://www.nice.org.uk).

*NHS Scotland Policy Guidance on Prevention, Control and Management of Infection Control*.

2011 [www.scotland.gov.uk/Publications/2008/08/08120000/1](http://www.scotland.gov.uk/Publications/2008/08/08120000/1)

*National Standards for the Prevention and Control of Healthcare Associated Infections*. May 2009 HIQA

## 11.0 Appendices

### Glove Usage

	<b>Procedure</b>	<b>Glove</b>
1.	Blood/body fluids	Non-sterile Glove
2.	Clinical Spillages	Non-sterile Glove
3.	Emptying catheter bags	Non-sterile Glove
4.	Emptying bedpans / urinals	Non-sterile Glove
5.	Fouled linen	Non-sterile Glove
6.	Intermittent catheterisation	Non-sterile Glove
7.	Intimate personal care	Non-sterile Glove
8.	Intravenous drugs	Non-sterile Glove
9.	Isolated service users	Non-sterile Glove
10.	Insertion of suppositories	Non-sterile Glove
11.	Mouth care	Non-sterile Glove
12.	PEG Management	Non-sterile Glove
14.	PR examination	Non-sterile Glove
15.	Suctioning	Non-sterile Glove
16.	Urinary catheterisation	Sterile Glove
17.	Dressing procedures	Sterile Glove