



Practice Briefs

Why is it important to have Personal Protective Equipment (PPE) at or near patient/resident rooms?

PPE should be available for staff use at all times, when contact with any blood or body fluid is anticipated, to ensure staff are compliant with standard precautions. Standard precautions are meant to reduce the risk of transmission of bloodborne and other pathogens from both recognized and unrecognized sources. They are the basic level of infection control precautions which are to be used, as a minimum, in the care of all patients¹. Standard precautions require physical barriers, such as gowns, gloves, face masks and eye protection, to protect staff from any splashes or sprays of blood or body fluids. With ill patients/residents, such as patients/residents who are vomiting, have uncontrolled diarrhea, have respiratory symptoms, or are bleeding, staff need to apply the appropriate PPE to be compliant with standard precautions. The PPE should be placed at or near the point of use. This is one of the elements assessed in both CMS and CDC survey form².

If PPE is stored down the hall and around the corner, most staff will not be able to retrieve it in an emergent situation. ICAP recommends that PPE be stored at the bedside or just outside the room, in a safe manner. You can purchase a box to store PPE in which can be attached to the wall outside of a patient/resident room. Locations of stored PPE should be reviewed with all staff so that they will know where to retrieve it when needed. PPE use should be a part of annual training along with Bloodborne Pathogen training, and staff should know how to properly don and doff PPE. Supplies necessary for adherence to personal protective equipment recommendations specified under Standard and Transmission-based Precautions (e.g., gloves, gowns, mouth, eye, nose, and face protection) should be available and located near point of use. Ensuring staff have PPE available in a convenient location is optimal for their protection, and that of patients/residents.

References:

1. Centers for Medicare & Medicaid Services, Hospital Infection Control Worksheet (n.d.), retrieved September 08, 2017, from <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/Survey-and-Cert-Letter-15-12-Attachment-1.pdf>
2. Emergencies preparedness, response – World Health Organization CH-1211 Geneva, Switzerland (n.d.). Retrieved September 08, 2017, from <http://www.who.int/csr/en/>

ICAP is a cooperative effort of UNMC/Nebraska Medicine and the Nebraska Department of Health and Human Services. "ICAP Practice Briefs" are intended to provide evidence-based guidance on infection prevention issues; check linked references directly for the most current and more detailed information.