Define the Infection Prevention and Control (IPC) 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.

Purpose (provides background to explain the rationale for the policy/procedure)

To describe the use of PPE to prevent exposure to blood, body fluids, or potentially infectious materials during resident care activities. Proper selection and use of PPE is an element of Standard Precautions and an important strategy for preventing the transmission of pathogens to residents, staff, and visitors.

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

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 potential for exposure, regardless of a resident’s suspected or confirmed infection status.

To protect our residents, visitors, and staff, our facility promotes appropriate PPE use when working within the facility.

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

For the purpose of this policy, “staff” will be used to refer to all staff who have contact with residents and/or their environments, including but not limited to Registered Nurses (RN), Nurse Practitioners (NP), Licensed Practical Nurses (LPN), Certified Nursing Assistants (CNA), Physicians (MD/DO), Physician Assistants (PA), Respiratory Therapists (RT), Rehabilitation Therapists (e.g., Physical or Occupational Therapy), External Consultants (e.g., Pharmacy Services, Laboratory Services, Wound Care Services, Podiatrists), Case Management, Environmental Services, Dietary Services, paramedics, students and volunteers.

Policy Content Considerations

1. Types of PPE and factors influencing PPE selection: type of exposure anticipated (e.g., splash/spray versus touch), durability, appropriateness for the task, and fit.
2. Indications for PPE use:
   a. Gloves should be worn when direct contact with blood, body fluids, mucous membranes, nonintact skin, or potentially contaminated surfaces or equipment is anticipated.
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b. Gowns should be worn to protect arms, exposed body areas, and clothing from contamination with blood, body fluids, and other potentially infectious material.

c. 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.

d. Respiratory protection (e.g., fit-tested, National Institute for Occupational Safety and Health (NIOSH)-approved N95 or higher-level respirator) should be worn to prevent inhalation of pathogens transmitted by the airborne route.

3. Guidance on proper use (e.g., do’s and don’ts).

4. Maintaining adequate PPE supplies in appropriate facility locations including who is tasked with maintaining supplies and how it should be performed (e.g., accessibility of PPE, frequency of checking supply levels)

Procedure Content Considerations (outline the steps/supplies to perform the practice)

1. Identifies appropriate PPE for the task.

2. Identifies when and how PPE should be donned and doffed (i.e., removed) during a task.

An example of the steps for safely donning and doffing PPE is available at https://www.cdc.gov/hai/pdfs/ppe/PPE-Sequence.pdf.

Other resident care policies and procedures should reinforce proper use of PPE by incorporating PPE as a critical step.

Examples of resident care policies/procedures that might incorporate PPE selection and use include:

- Wound care activities such as irrigating a wound (addressing use of gown, gloves, face mask, goggles or a face shield).
- Performing phlebotomy (blood draws) (addressing use of gloves)
- Respiratory care activities such as suctioning oral secretions (addressing use of gloves, facemask, goggles, or a face shield).
  - PPE selection may depend on whether an open or closed suction is being used.
- Room cleaning by Environmental Services or any other staff (addressing use of gown, gloves, and situations when facemask, goggles or a face shield may be needed).
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- The environment may be a reservoir for pathogens (e.g., norovirus). Address considerations for selecting the proper PPE to minimize staff exposure to these pathogens.
  - Assisting with resident personal care activities like bathing or toileting (addressing use of gown and gloves).
  - Managing residents with bladder and bowel incontinence, including diarrhea (addressing use of gown and gloves).
  - Responding to an emergency in a resident’s room where uncontrolled blood and other body fluids exposure may occur (addressing use of gloves, fluid-resistant gown, facemask, goggles, or a face shield).

Guidelines, Standards, and Resources for Policy/Procedure Development

The selection and proper use of PPE during resident care activities should be incorporated into all resident care activities. Policies and procedures should be developed using evidence-based guidelines or national standards, such as resources from the Centers for Disease Control and Prevention (CDC). Please refer to the following resources for developing policies and procedures on the selection and proper use of PPE during resident care activities in your facility:

- Occupational Safety and Health Administration (OSHA) standards for PPE and respiratory protection: