
PERSONAL PROTECTIVE EQUIPMENT (PPE)

Mark Kepner-Clough, BSN, RN, WCC

ProCare Consultant/Policy Analyst – LeadingAge New York



TYPES OF PERSONAL PROTECTIVE EQUIPMENT (PPE)

- ▶ Gloves
- ▶ Gowns
- ▶ Eye shields/face shields
- ▶ Masks/N95 respirators



PROTECT YOURSELF WHEN USING PPE

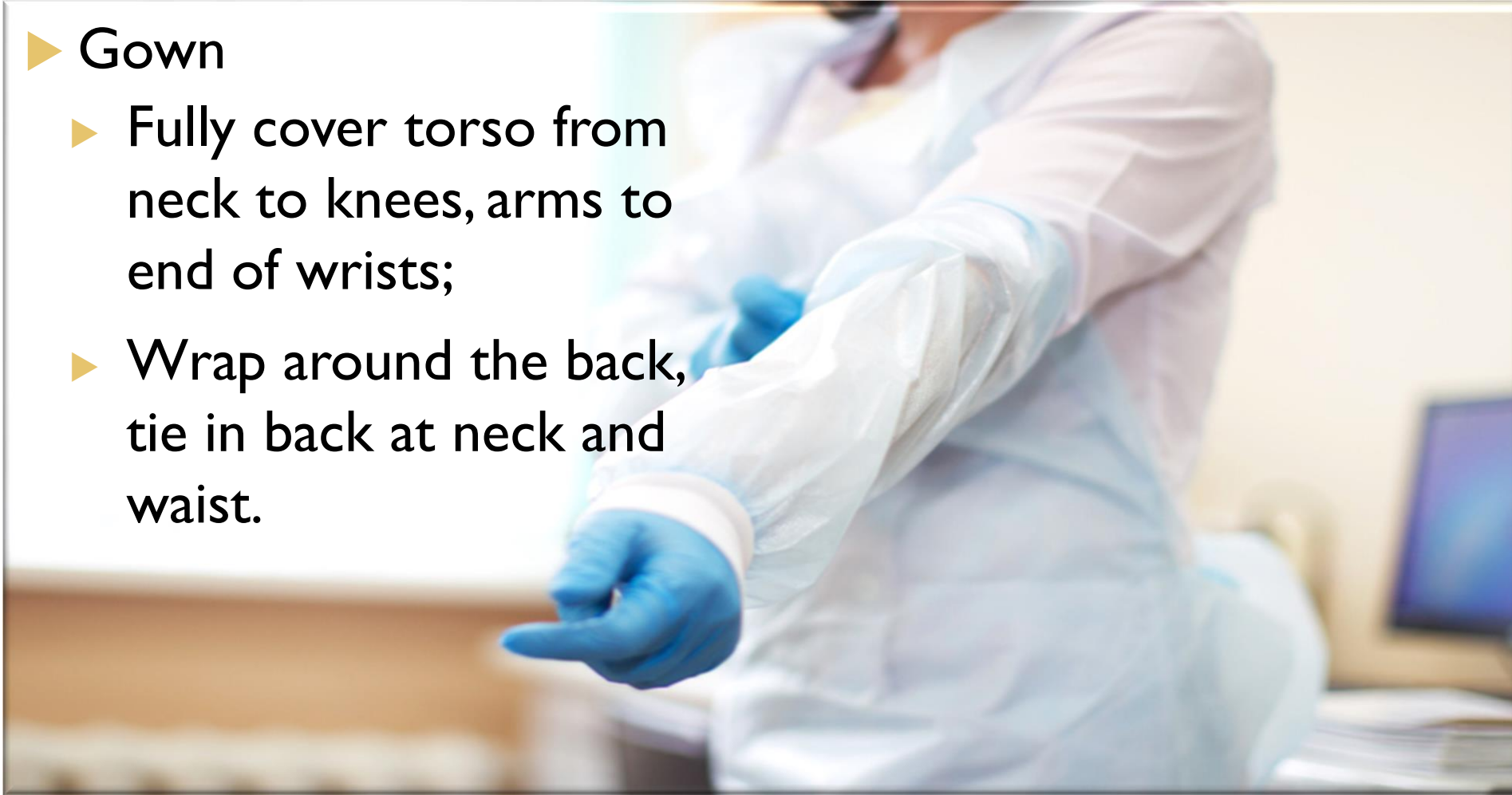


- ▶ Keep hands away from face;
- ▶ Limit surfaces touched;
- ▶ Change gloves when torn or heavily contaminated;
- ▶ Perform hand hygiene.

HOW TO APPLY PPE (DON)

▶ Gown

- ▶ Fully cover torso from neck to knees, arms to end of wrists;
- ▶ Wrap around the back, tie in back at neck and waist.



(continued)

HOW TO APPLY PPE (DON)

(CONTINUED)

- Mask or respirator
 - Secure ties or elastic bands at middle of head and neck;
 - Fit flexible band to nose bridge;
 - Fit snug to face and below chin;
 - Fit-check respirator.
- Goggles or face shield
 - Place over face and eyes and adjust to fit.
- Gloves
 - Extend to cover wrist of isolation gown.

UNIVERSAL EYE PROTECTION

- Universal use of eye protection by healthcare personnel is strongly recommended for all patient interactions, in addition to face masks.
- Face shields or goggles should be used. Standard eyeglasses are not personal protective equipment (PPE) and do not constitute sufficient eye protection.
- COVID-Specific Eye-Protection Points:
 - Wearing both face masks and eye protection provides better protection for healthcare personnel who might unknowingly encounter asymptomatic, pre-symptomatic, or symptomatic but undiagnosed patients or residents with COVID-19.
 - The use of eye protection, in addition to face masks, might prevent some exposures that would otherwise require healthcare worker furlough (i.e. when a healthcare worker is in contact with a person with COVID-19 who was not wearing a face mask).

HOW TO REMOVE PPE (DOFF)

- Gloves: Outside of gloves is contaminated!
 - Grasp outside of glove with opposite gloved hand, peel off;
 - Hold removed glove in gloved hand;
 - Slide fingers of ungloved hand under remaining glove at wrist;
 - Peel glove off over first glove;
 - Discard gloves in waste container.

(continued)

HOW TO REMOVE PPE (DOFF)

(CONTINUED)

- Goggles/face shield: lift from back by lifting head band or earpieces
- If reusable place in appropriate container otherwise discard in waste container
- Gown front and sleeves are contaminated!
 - Unfasten ties;
 - Pull away from neck and shoulders, touching inside of gown only;
 - Turn gown inside out;
 - Fold or roll into a bundle and discard.



(continued)

HOW TO REMOVE PPE (DOFF)

(CONTINUED)

- Mask/Respirator: Front of mask/respirator is contaminated!

DO NOT TOUCH!

- Grasp bottom, then top ties or elastics and remove;
- Discard in waste container.

(continued)

HOW TO REMOVE PPE (DOFF) (continued)

<https://www.cdc.gov/hai/pdfs/ppe/PPE-Sequence.pdf>

OSHA RESPIRATORY PROTECTION STANDARD (N95 MASKS)

- Program Manager
- Risk Assessment
- Respiratory Selection
- Written Program
- Medical Qualification
- Training
- Fit Testing
- Ongoing Respirator Inspection/Cleaning/Monitoring/Storage
- Evaluation

<https://www.osha.gov/respiratory-protection/general>

RESPIRATOR SELECTION

- Higher risk=higher level of protection based on risk assessment
- NIOSH approved
- User comfort and practicality

MEDICAL QUALIFICATION

- Performed by or other licensed health care professional
- Can be accomplished by medical questionnaire
- Some may require a full medical examination
- Confidential
- Opportunity to discuss questionnaire & medical examination with MD
- Health care professional must consider type and conditions of respirator use

<https://www.osha.gov/sites/default/files/publications/OSHA3789info.pdf>

TRAINING

- Why a respirator is needed and how improper fit/usage/maintenance can compromise effect
- Respirator limitations and capabilities
- Emergency usage
- How to inspect, don, doff, and check face seal (blow or puff test)
- Maintenance and storage
- Medical signs/symptoms impacting respirator use

TRAINING (CONTINUED)

- Must be understandable
- Received before use in the workplace
- Provided annually and with any noticed knowledge gaps

FIT TESTING

- Any new respirator manufacturer, type
- Size specific
- Quantitative or qualitative use to check fit
- Re-tested annually
- Must use OSHA accepted protocols
- No facial hair or other condition that would prevent good respirator seal
- Must be capable of performing user seal check with each use

SUPPLIES AND RESOURCES

- Alcohol-based hand sanitizer for hand hygiene is available in every resident room (ideally both inside and outside of the room) and other resident care and common areas (e.g., outside dining hall, in therapy gym);
- Sinks are well-stocked with soap and paper towels for hand washing;
- Signs are posted immediately outside of resident rooms indicating appropriate IPC precautions and required personal protective equipment (PPE);

(continued)

SUPPLIES AND RESOURCES (CONTINUED)

- Facility provides tissues and facemasks for coughing people near entrances and in common areas with no-touch receptacles for disposal;
- Necessary PPE is available immediately outside of the resident room and in other areas where resident care is provided;
- Facilities should have supplies of facemasks, respirators (if available and the facility has a respiratory protection program with trained, medically cleared, and fit-tested HCP), gowns, gloves and eye protection (i.e., face shield or goggles);

(continued)

SUPPLIES AND RESOURCES (CONTINUED)

- Trash disposal bins should be positioned near the exit inside of the resident room to make it easy for staff to discard PPE after removal, prior to exiting the room or before providing care for another resident in the same room;
- Facility ensures HCP have access to EPA-registered hospital-grade disinfectants to allow for frequent cleaning of high-touch surfaces and shared resident care equipment.

WHEN TO USE PPE

- Resident on isolation precautions:
 - Contact precautions, Droplet precautions, Negative pressure precautions (which are rare in LTC setting)
- Anytime there is a sign on resident door or unit door indicating PPE is to be worn
- When nurse/nurse manager/DNS, etc advises you PPE is to be worn
- During declared pandemic when governing health authority (LHD/SHD) declare PPE is to be worn for safety and health of residents/staff

QUESTIONS?

THANK YOU

Mark Kepner-Clough, BSN, RN,
WCC

Mkepner-clough@leadingagency.org

518-867-8865

