



Liverpool
City Council

Liverpool City Council

COVID-19: Personal Protective Equipment (PPE) Policy

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1 Introduction

- 1.1 The City Council is committed to ensuring the health, safety and welfare of all employees, for which there is a legal responsibility under the Health and Safety at Work etc. Act 1974 and is further detailed within the Management of Health and Safety at Work Regulations 1999.
- 1.2 The purpose of this policy is to assist in identifying and sourcing appropriate PPE for employees due to Covid 19.
- 1.3 This does not supercede the usual PPE required by different employees or sectors as part of their normal business.
- 1.4 This policy will be updated and amended where necessary in line with national Public Health Guidance.

2 Scope

- 2.1 This policy applies to all individuals employed by the Local Authority and to provider organisations involved in delivery of service on behalf of the Local Authority.
- 2.2 In addition, where appropriate, it applies to organisations to whom the LA is supplying or distributing PPE as part of the coronavirus emergency response.
- 2.3 All organisations and agencies in Liverpool are welcome to use this policy as appropriate for their own purpose.

3 COVID 19

3.1 COVID-19 is a new illness that can affect your lungs and airways. It's caused by a virus called coronavirus. For most people COVID-19 causes a mild illness.

3.2 Those who are at increased risk of severe illness from coronavirus (COVID-19) are:

- aged 70 or older (regardless of medical conditions)
- under 70 with an underlying health condition (ie anyone instructed to get a flu jab as an adult each year on medical grounds)
- Further information regarding vulnerable groups can be found [here](#)

3.3 The main route of transmission is from cough and sneeze droplets. These droplets fall on people in the vicinity and can be directly inhaled or picked up on the hands and transferred when someone touches their face.

3.4 Preventing the spread of the virus:

Hand hygiene

- Employees should wash hands regularly for at least 20 seconds with soap and warm water
- If soap and water is not available alcohol-based hand sanitizer should be used
- Hand hygiene is particularly important after using public transport, when arriving at work, before eating, when arriving and leaving people's homes and when you arrive home
- Employees need to familiarise themselves with offices within the locality of their visits, e.g. Children's Centres, Hubs, other Council Offices, where they will be able to wash their hands. If the employees own home is in close proximity then this should be used.

Respiratory Hygiene

- Cover your mouth and nose with a tissue or your sleeve (not your hands) when you cough or sneeze
- Put used tissues in the bin immediately and wash your hands afterwards

Environmental Hygiene

- It is important that employees maintain good hygiene levels at their desks including cleaning regularly touched surfaces such as telephones and keyboards
- It is important that employees maintain good hygiene levels in their company and private vehicles

Social distancing

- Whilst in the office managers must ensure that **all employees** sit at least two metres apart from each other and practice social distancing where practicable
- When out in public key workers should maintain a distance of two metres from other members of the public where practicable
- Employers should support employees to observe Government Guidance on social distancing where reasonably practicable. The guidance on Social Distancing is for guidance only not legally enforceable, as it is not covered by the Health Protection (Coronavirus, Restrictions) (England) Regulations 2020.

4 Use of PPE

- 4.1 PHE guidance is published at [COVID-19: Infection prevention and control guidance](#)
The evidence base is emerging and UK / PHE guidance (as well as international guidance) is under ongoing review. The guidance is based on the predominant modes of transmission – respiratory droplet and contact.
- 4.2 PPE should not be used except according to the table (Appendix A separate document). Inappropriate or unnecessary use of PPE may lead to inadequate supplies for employees who need it or are caring for symptomatic people.

- 4.3 The formal technical advice around PPE for use during the COVID-19 epidemic as set out in the table 1.0 (Appendix A) has been provided by PHE NW Scientific and Technical Advisory Cell (STAC) on the 31 March 2020. Please note that it will be updated in line with PHE national guidance as required.
- 4.4 The City Council will endeavour to inform employees and providers on updated PPE guidance at the earliest opportunity

5 Home Visits

5.1 The following procedure should be followed:

Assessing for COVID-19 symptomatic household members

- Each member of employee should phone prior to every home visit to establish whether any members of the household have experienced symptoms of COVID-19 (a new and continuous cough and/or high temperature) in the last 7 days.
- If there is no-one who has been symptomatic for COVID-19 in the household over the last 7 days the home visit can take place.
- If there is someone who has experienced symptoms in the last 7 days living in the household the employee should establish who is symptomatic and the date their symptoms started.
- If a person has been symptomatic in the last 7 days within the household the home visit should be delayed until 7 days after the onset of symptoms (using the latest date on symptom onset should multiple members of the household be symptomatic) unless the visit is deemed absolutely necessary (e.g. due to high risk safeguarding concerns)
- Information about symptomatic household members and date of symptom onset should be recorded.
- The employee should calculate the date that the next home visit can take place - for example if the household member became symptomatic on the Tuesday (day 1) home visits can take place from the next Tuesday (day 8).
- This procedure should be followed again even after the initial 7 day period to check whether any other household members have become symptomatic. If they have the date they became symptomatic should be established and a further 7 days from this date should be calculated before the home visit can take place.
- For households with symptomatic individual's alternative options for maintaining contact with service users should be used including, Skype, Zoom and FaceTime as well as talking through the window of the home.

Visiting a household that does not contain symptomatic individuals during the

Government stay at home period:

- On arrival at the home you should check again whether any household members are symptomatic for COVID-19
- Ask if you can wash your hands as you enter the property. This should be for at least 20 seconds using soap and warm water. Paper towels will be supplied to all employees for drying hands and turning off taps, these can be disposed of in the service users home
- As far as is practical maintain social distancing within the home (staying 2 metres away from members of the household)
- Prior to leaving you should ask if you can wash your hands again for 20 seconds using soap and warm water
- If you have touched further surfaces before exiting the home use alcohol hand sanitiser once you have left the home
- If you cannot access soap and water you should use alcohol based hand sanitiser when you arrive and after you leave the property
- Good respiratory hygiene should also be practiced in the home
- If it becomes apparent that someone within the household is symptomatic during the visit leave the household immediately
- Use hand sanitiser to clean your hands
- Travel to the nearest council office or your own home to wash your hands for 20 seconds with soap and warm water
- Employees do not need to go home unless they develop symptoms

Visiting a household with a symptomatic COVID-19 individual:

- This visit should only take place in exceptional circumstances when deemed necessary e.g. high risk safeguarding concerns that are potentially requiring the removal of the children. In Adults Social Care a risk assessment / plan with Team Leader or Community Manager should be agreed prior to the visit.
- Before entering a household containing someone who is symptomatic for COVID-19 you should clean your hands and place the required PPE items on in a particular order as outlined in appendix a
- The PPE process should begin with you cleaning your hands with alcohol based hand sanitiser, the disposable apron should then be put on first, then the disposable fluid repellent surgical mask, finally you should put on disposable gloves
- Once you have left the home and before you enter your car you should remove the PPE in the order outlined in appendix b, remove and dispose of the gloves first and then clean your hands with alcohol based hand sanitiser, then remove

and dispose of the apron and clean your hands again with alcohol based hand sanitiser then remove and dispose of your mask and clean your hands again with alcohol based hand sanitiser

- Removed PPE must be put into a plastic rubbish bag and then double bagged. If you are on duty and coming back to the office then this bag can then be put in the clinical waste bins which can be found at Venture Place, Edge, Altcross and Parklands. If working from home then store the bag in a suitable location for 72 hours and then put in your normal waste bin.
- The employee should then travel to the nearest office, children's centre or home to wash their hands for at least 20 seconds with soap and warm water.
- All employees will be provided with a small supply of PPE for use in these exceptional circumstances. This includes disposable gloves, disposable aprons, disposable fluid repellent masks and bin bags to dispose of this equipment
- Before this equipment is supplied to employees they are required to watch the Public Health England guidance video on how to put on and remove PPE <https://www.youtube.com/watch?v=eANIs-Jdi2s>
- Guidance on how to put on PPE can be found in appendix a
- Guidance on how to remove PPE can be found in appendix b

6 Sourcing and Ordering PPE

6.1 A new order process has been agreed for sourcing PPE during this period.

6.2 All orders will now be placed centrally by the Commercial Procurement Unit as a number of options with regards to sourcing and ordering of stock have been established.

6.3 Options include direct links to NHS Supply Chain, an agreed "mutual aid" process with Liverpool University Teaching Hospitals and LCC's own contracted suppliers and any new potential new sources of supply.

6.4 The following process is in place for all PPE related ordering

- For LCC email direct to CommercialProcurement@liverpool.gov.uk using the order pro-forma clearly stating name, contact details, a list of requirements including quantity, delivery location and cost code by 2pm each day.

- For independent providers email direct to PPE@pss.org.uk using 'PPE Order' as the subject of the email and include the order pro-forma attached clearly stating your name, contact details, a list of your requirements including quantity, delivery location and a contact name and number by 2pm each day
- All requirements will be collated and any stock made available from any of the sources detailed above will be delivered to a central point within the authority from where it will be distributed based on need/priority.

6.5 Managers will be advised what available stocks there are and what you can expect to receive as soon as this information is made available

7 Further Information

7.1 [NHS Coronavirus guidance for clinicians](#)

7.2 The WHO guidance is at <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/technical-guidance/infection-prevention-and-control>

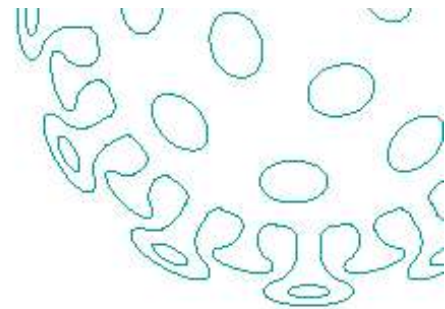
7.3 European Guidance is at <https://www.ecdc.europa.eu/sites/default/files/documents/COVID-19-infection-prevention-and-control-healthcare-settings-march-2020.pdf>

7.4 The UK Royal Colleges have been issuing their own guidance on advice on PPE - so there are some discrepancies in the advice. NW STAC needs to clear that PHE advice on this is the definitive advice, and it is most aligned with WHO advice. A helpful clarification letter was issued by the NHS on 28th March 2020 re this (<https://www.ulh.nhs.uk/content/uploads/2020/03/personal-protection-equipment-letter-28-march-2020.pdf>), but the full guidance on PPE is still being awaited. This document will be reviewed and update as soon as the national PPE guidance is released.

Appendix B



Public Health
England



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/eANIs-Jdi2s>

Pre-donning instructions:

- Ensure healthcare worker hydrated
- Remove jewellery
- Tie hair back
- 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.



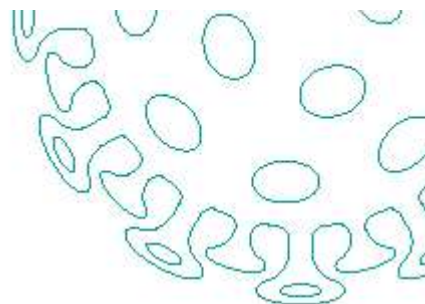
*For the PPE guide for AGPs please see: www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control

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Appendix C



Public Health
England



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/eANIs-Jdi2s>

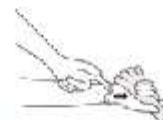
PPE should be removed in an order that minimises the risk of self-contamination

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 doffing guide to PPE for AGPs see:

www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control

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