



PERSONAL PROTECTIVE EQUIPMENT POLICY

Revised April 2013

Personal Protective Equipment

Care Home Name: Wellbeing Residential Group

Infection control is the name given to a wide range of policies, procedures and techniques intended to prevent the spread of infectious diseases amongst staff, service users and communities. All of the staff working in the Wellbeing residential care home is at risk of infection or of spreading infection, especially if their role brings them into contact with blood or bodily fluids like urine, faeces, vomit or sputum. Such substances may well contain pathogens which can be spread if staffs do not take adequate precautions.

Policy Statement

Wellbeing Residential Group believes that adherence to strict guidelines on infection control is of paramount importance in ensuring the safety of both service users and staff. It also believes that good, basic hygiene is the most powerful weapon against infection, particularly with respect to cleaning, the wearing of protective clothing and hand washing.

The home adheres fully to the new outcomes Essential Standards of Quality and Safety which consist of 28 regulations and its associated outcomes. They are set out by the Health and Social Care Act 2008 for regulated activities.

Aim

The aim of the Well Being Residential Group is to prevent the spread of infection amongst staff, service users and the local community.

Goals

The goals of Wellbeing Residential Group are to ensure the following.

1. Service users, their families and staff are as safe as possible from acquiring infections at the home.
2. All staff at the home are aware of and put into practice the basic principles of infection control.

Personnel

- a. The manager is the infection control lead for the home.
- b. Other infection control personnel in the home are: the senior team
- c. The manager is responsible for infection control risk assessment and staff training.
- d. Domestic, care and catering staff are responsible for the cleaning and hygiene of the home.

Legal Considerations and Statutory Guidance

Wellbeing Residential will adhere to the following infection control legislation.

1. The Health and Safety at Work, etc Act 1974 and the Public Health Infectious Diseases Regulations 1988 which place a duty on the home to prevent the spread of infection.
2. The Reporting of Incidents, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR) which places a duty on the home to report outbreaks of certain diseases as well as accidents such as needle-stick accidents.
3. The Control of Substances Hazardous to Health Regulations 1999 (COSHH) which places a duty on the home to ensure that potentially infectious materials within the home are identified as hazards and dealt with accordingly.
4. The Environmental Protection Act 1990 which makes it the responsibility of the home to dispose of clinical waste safely.

The Use Of Personal Protective Equipment

In consultation with staff and their representatives, the home will:

- identify, as part of its risk assessment programme, the need for any PPE
- carry out an assessment of proposed PPE to determine whether or not it is suitable
- take any necessary measures to remedy any risks found as a result of the assessment
- replace, modify or repair PPE to meet statutory obligations, as necessary and at no cost to the employee
- inform every employee of any risks that may remain
- ensure that staff are trained to use PPE correctly
- re-assess, as necessary, any substances used, or work processes that have changed

Disposable Gloves and Aprons

The hands of staff are likely to be the most common means of transmission of infection from one service user to another unless basic precautions are taken, ie careful hand washing between contacts and the correct use of protective clothing such as disposable gloves (sterile and non-sterile) and disposable aprons.

Disposable gloves and disposable aprons are provided for staff who are at risk of coming into direct contact with body fluids.

1. Sterile gloves will be provided for clinical procedures such as the following (only when previously agreed by specialist and training has been given):
 - a. applying dressings
 - b. wound care
 - c. catheterization
 - d. suturing

2. **Non-sterile gloves are provided for non-clinical procedures such as the following:**
 - a. **washing dirty or used instruments**
 - b. **clearing up blood or bodily fluids or spillages**
 - c. **handling disinfectants**
 - d. **inserting suppositories or enemas**
 - e. **emptying catheter bags**
 - f. **performing mouth care**

3. **Gloves should be worn at all times during these procedures and disposed of immediately after the procedure or contact is finished.**
4. **Gloves should always be changed between service users.**
5. **On no account should staff attempt to wash and reuse gloves.**

Plastic disposable aprons are also provided for use by care assistants and domestic staff. Aprons should be used in all of the above procedures and should be changed between contacts with individual service users, especially where service users are known to be colonised/ infected with MRSA or other possibly infectious illnesses.

The responsibility for ordering and ensuring that supplies of gloves and aprons are readily available and accessible lies with the management team. When running low on PPE it is the responsibility of the team to make the management team aware, so as not to run out.

In this home gloves and aprons are usually supplied by Newline Essex.

Maintenance

All PPE should be adequately maintained by the home. PPE will be repaired, replaced or modified as required.

Where a problem arises with the use of PPE, staff must inform a responsible person immediately, ie a senior, line manager or the care home manager. The manager will take immediate steps to investigate. In all such cases, the risk assessment will be reviewed and the PPE replaced, repaired or modified.

Training

All new staff should be encouraged to read the care home's health and safety policies as part of their induction process. Where new staff are required to use specific items of PPE they should be trained in all aspects of its use.

Signed: _____

Date: _____

Policy Review date: _____