



UNISON Coronavirus COVID-19

Advice for Members in Community and Voluntary Organisations

Personal Protective Equipment and coronavirus

What protective equipment should I be getting from my employer?

Where a risk assessment shows a need for PPE, the equipment you will get depends on what you do, with whom and where you are working.

For many staff, this will consist of items such as gloves and aprons. Those more at risk may require masks and face/eye protection.

PPE issued in relation to COVID-19 should only be issued when the risk assessment shows it is necessary.

PPE will largely be concentrated on those caring for patients with symptoms or cleaning premises contaminated by droplets/body fluids that may contain the virus.

This will allow PPE to be concentrated on those that require it. It is important that you are trained in its use.

Incorrect use of PPE may be putting yourselves, colleagues, family and friends at additional risk. The virus lives longer on plastics than ordinary clothes, so if not correctly used and disposed of items such as masks can become vessels for spreading infection.

For other staff, unless the risk assessment shows otherwise, measures such as working from home, workplace adjustments and following government guidelines on social distancing and self-isolation are the most effective preventive measures.

All PPE issued to prevent the spread of COVID 19 should be:

- correctly fitted, taking into account any impairment or health condition, as well as body shape
- located close to the point of use
- stored to prevent contamination in a clean/dry area until required for use (expiry dates must be adhered to)
- single-use only
- changed immediately after each patient and/or following completion of a procedure or task
- disposed of after use into the correct waste bin/stream.

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Protective equipment for those caring for patients who have COVID 19 symptoms.

Many of you will be looking after patients and residents who are displaying COVID 19 symptoms.

The NHS and the UK's Health Protection Authorities [have agreed guidance](#) on the protective equipment required for staff working in settings that may contain patients with COVID-19. These are contained in easy to read charts for:

1. [Healthcare workers working in a secondary care \(such as NHS Hospitals\) clinical context](#) (PDF)
2. [Primary, outpatient, and community care \(including residential and homecare settings\)](#) (PDF)
3. [Ambulance, paramedics, first responders and pharmacists](#) (PDF)

It also contains [this visual aid](#) which you may find helpful.

Where there are problems with the supply of equipment your manager should contact the NHS Supplies dedicated employer hotline who should be able to resolve the situation.

Please note that Social Workers, Personal Carers/Assistants, Unpaid/informal carers, Palliative Care, Non-Residential Substance Misuse, Retirement and Private Healthcare facilities do not currently get their PPE from NHS Supplies.

Some of these organisations should have their own alternative suppliers. [Contact your branch](#) if you are not getting the PPE you require.

Personal Carers can ask their Local Authority Care Service or Clinical Commissioning Group for assistance. Again, [contact your branch](#) if you need help in doing this.

UNISON is continuing to argue for comprehensive provision covering all services.



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Cleaning

If your job involves cleaning premises where there have been possible or confirmed cases, you should as a minimum be provided with disposable gloves and an apron.

Where a higher level of contamination may have been present, for example cleaning rooms that have been slept in by suspected sufferers of COVID 19, where there is visible contamination with body fluids), then surgical face masks and eye protection should be considered.

Removing and donning protective clothing and equipment

We all have a responsibility to wash our hands. However when you have been using any sort of protective equipment it is particularly important after you have been wearing it, and that you comply with any instruction provided by your employer.

It is also important comply with instructions on how to remove the equipment, keeping it away from your face and ensuring you do so as far away from colleagues, patients and residents so that you avoid the possibility of splashing.

Staff uniforms/clothes

The appropriate use of personal equipment will protect staff uniform from contamination in most circumstances.

However where you are working in COVID 19 infected areas employers should consider, if not already provided, measures such as financial support (tax relief may be available otherwise), changing rooms, additional uniforms and laundry services (if not already provided).

UNISON CVOB advise our members and reps to raise concerns over lack of PPE with their managers to contact the hotline as a matter of urgency. The contact details to provide to your managers are as follows;

Call PPE helpline on 0800 915 9964 or email supplydisruptionsservice@nhsbsa.nhs.uk

[Visit UNISON's Site for PPE information](#)

[Visit UNISON's website for more coronavirus advice](#)

[View Public Health England advice on PPE](#)

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COVID-19 Safe ways of working

A visual guide to safe PPE

General contact with confirmed or suspected COVID-19 cases	Aerosol Generating Procedures
<p>Eye protection to be worn on risk assessment</p>	<p>Eye protection eye shield, goggles or visor</p>
<p>Fluid resistant surgical mask</p>	<p>FFP3 or FFP2 respirator</p>
<p>Disposable apron</p>	<p>Long sleeved fluid repellent gown</p>
<p>Gloves</p>	<p>Gloves</p>
<p>Wash your hands before and after patient contact and after removing some or all of your PPE</p>	
<p>Clean all the equipment that you are using according to local policies</p>	
<p>Use the appropriate PPE for the situation you are working in (General / AGPs or High risk areas)</p>	
<p>Take off your PPE safely</p>	
<p>Take breaks and hydrate yourself regularly</p>	

For more information on infection prevention and control of COVID-19 please visit:
www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control

Recommended PPE for healthcare workers by secondary care inpatient clinical setting, NHS and independent sector

Setting	Context	Disposable Gloves	Disposable Plastic Apron	Disposable fluid-resistant gown	Surgical mask	Fluid-resistant (Type IIR) surgical mask	Filtering face piece respirator	Eye/face protection ¹
Acute hospital inpatient and emergency departments, mental health, learning disability, autism, dental and maternity settings	Performing a single aerosol generating procedure ² on a possible or confirmed case ³ in any setting outside a higher risk acute care area ⁴	✓ single use ⁵	✗	✓ single use ⁵	✗	✗	✓ single use ⁵	✓ single use ⁵
	Working in a higher risk acute care area ⁴ with possible or confirmed case(s) ³	✓ single use ⁵	✓ single use ⁵	✓ sessional use ⁶	✗	✗	✓ sessional use ⁶	✓ sessional use ⁶
	Working in an inpatient, maternity, radiology area with possible or confirmed case(s) ³ – direct patient care (within 2 metres)	✓ single use ⁵	✓ single use ⁵	✗	✗	✓ sessional use ⁶	✗	✓ sessional use ⁶
	Working in an inpatient area with possible or confirmed case(s) ³ (not within 2 metres)	✗	✗	✗	✗	✓ sessional use ⁶	✗	✓ risk assess sessional use ^{6,7}
	Working in an emergency department/acute assessment area with possible or confirmed case(s) ³ – direct patient care (within 2 metres)	✓ single use ⁵	✓ single use ⁵	✗	✗	✓ sessional use ⁶	✗	✓ sessional use ⁶
	All individuals transferring possible or confirmed case(s) ³ (within 2 metres)	✓ single use ⁵	✓ single use ⁵	✗	✗	✓ single or sessional use ^{5,6}	✗	✓ risk assess single or sessional use ^{5,6,7}
	Operating theatre with possible or confirmed case(s) ³ – no AGPs ²	✓ single use ⁵	✓ single use ⁵	✓ risk assess single use ^{5,7}	✗	✓ single or sessional use ^{5,6}	✗	✓ single or sessional use ^{5,6}
	Labour ward/area – 2nd/3rd stage labour vaginal delivery (no AGPs ²) – possible or confirmed case ³	✓ single use ⁵	✓ single use ⁵	✓ single use ²	✗	✓ single or sessional use ^{5,6}	✗	✓ single or sessional use ^{5,6}
	Inpatient care to any individuals in the extremely vulnerable group undergoing shielding ⁸	✓ single use ⁵	✓ single use ⁵	✗	✓ single use ⁵	✗	✗	✗

Table 1

1. This may be single or reusable face/eye protection/full face visor or goggles.
 2. The full list of aerosol generating procedures (AGPs) is within the COVID-19 IPC guidance [note APGs are undergoing a further review at present].
 3. A case is any individual meeting case definition for a possible or confirmed case: <https://www.gov.uk/government/publications/wuhan-novel-coronavirus-initial-investigation-of-possible-cases/investigation-and-initial-clinical-management-of-possible-cases-of-wuhan-novel-coronavirus-wn-cov-infection>
 4. Higher risk acute areas include: ICU/HDUs; ED resuscitation areas; wards with non-invasive ventilation; operating theatres; endoscopy units for upper Respiratory, ENT or upper GI endoscopy; and other clinical areas where AGPs are regularly performed.
 5. Single use refers to disposal of PPE or decontamination of reusable items e.g. eye protection or respirator, after each patient and/or following completion of a procedure, task, or session; dispose or decontaminate reusable items after each patient contact as per Standard Infection Control Precautions (SICPs).
 6. A session refers to a period of time where a healthcare worker is undertaking duties in a specific care setting/exposure environment e.g. on a ward round; providing ongoing care for inpatients. A session ends when the healthcare worker leaves the care setting/exposure environment. Sessional use should always be risk assessed and considered where there are high rates of hospital cases. PPE should be disposed of after each session or earlier if damaged, soiled, or uncomfortable.
 7. Risk assessed use refers to utilising PPE when there is an anticipated/likely risk of contamination with splashes, droplets of blood or body fluids.
 8. For explanation of shielding and definition of extremely vulnerable groups see guidance: <https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19>

Patient use of PPE: In cohort wards, communal waiting areas and during transportation, it is recommended that suspected or confirmed cases wear a surgical face mask if this can be tolerated. The aim of this is to minimise the dispersal of respiratory secretions, reduce both direct transmission risk and environmental contamination. A surgical face mask should not be worn by patients if there is potential for their clinical care to be compromised (e.g. when receiving oxygen therapy).

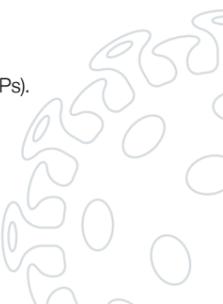


Recommended PPE for primary, outpatient and community care by setting, NHS and independent sector

Setting	Context	Disposable Gloves	Disposable Plastic Apron	Disposable fluid-repellent coverall/gown	Surgical mask	Fluid-resistant (Type IIR) surgical mask	Filtering face piece respirator	Eye/face protection ¹
Any setting	Performing an aerosol generating procedure ² on a possible or confirmed case ³	✓ single use ⁴	✗	✓ single use ⁴	✗	✗	✓ single use ⁴	✓ single use ⁴
Primary care, ambulatory care, and other non emergency outpatient and other clinical settings e.g. optometry, dental, maternity, mental health	Direct patient care – possible or confirmed case(s) ³ (within 2 metres)	✓ single use ⁴	✓ single use ⁴	✗	✗	✓ single or sessional use ^{4,5}	✗	✓ single or sessional use ^{4,5}
	Working in reception/communal area with possible or confirmed case(s) ³ and unable to maintain 2 metres social distance ⁶	✗	✗	✗	✗	✓ sessional use ⁵	✗	✗
Individuals own home (current place of residence)	Direct care to any member of the household where any member of the household is a possible or confirmed case ^{3,7}	✓ single use ⁴	✓ single use ⁴	✗	✗	✓ single or sessional use ^{4,5}	✗	✓ risk assess single or sessional use ^{4,5,8}
	Direct care or visit to any individuals in the extremely vulnerable group or where a member of the household is within the extremely vulnerable group undergoing shielding ⁹	✓ single use ⁴	✓ single use ⁴	✗	✓ single use ⁴	✗	✗	✗
	Home birth where any member of the household is a possible or confirmed case ^{3,7}	✓ single use ⁴	✓ single use ⁴	✓ single use ⁴	✗	✓ single or sessional use ^{4,5}	✗	✓ single or sessional use ^{4,5}
Community-care home, mental health inpatients and other overnight care facilities e.g. learning disability, hospices, prison healthcare	Facility with possible or confirmed case(s) ³ – and direct resident care (within 2 metres)	✓ single use ⁴	✓ single use ⁴	✗	✗	✓ sessional use ⁵	✗	risk assess sessional use ^{5,8}
Any setting	Collection of nasopharyngeal swab(s)	✓ single use ⁴	✓ single or sessional use ^{4,5}	✗	✗	✓ single or sessional use ^{4,5}	✗	✓ single or sessional use ^{4,5}

Table 2

- This may be single or reusable face/eye protection/full face visor or goggles.
- The full list of aerosol generating procedures (AGPs) is within the IPC guidance [note APGs are undergoing a further review at present].
- A case is any individual meeting case definition for a possible or confirmed case: <https://www.gov.uk/government/publications/wuhan-novel-coronavirus-initial-investigation-of-possible-cases/investigation-and-initial-clinical-management-of-possible-cases-of-wuhan-novel-coronavirus-wn-cov-infection>
- Single use refers to disposal of PPE or decontamination of reusable items e.g. eye protection or respirator, after each patient and/or following completion of a procedure, task, or session; dispose or decontaminate reusable items after each patient contact as per Standard Infection Control Precautions (SICPs).
- A single session refers to a period of time where a health care worker is undertaking duties in a specific care setting/exposure environment e.g. on a ward round; providing ongoing care for inpatients. A session ends when the health care worker leaves the care setting/exposure environment. Sessional use should always be risk assessed and considered where there are high rates of hospital cases. PPE should be disposed of after each session or earlier if damaged, soiled, or uncomfortable.
- Non clinical staff should maintain 2m social distancing, through marking out a controlled distance; sessional use should always be risk assessed and considered where there are high rates of community cases.
- Initial risk assessment should take place by phone prior to entering the premises or at 2 metres social distance on entering; where the health or social care worker assesses that an individual is symptomatic with suspected/confirmed cases appropriate PPE should be put on prior to providing care.
- Risk assessed use refers to utilising PPE when there is an anticipated/likely risk of contamination with splashes, droplets or blood or body fluids.
- For explanation of shielding and definition of extremely vulnerable groups see guidance: <https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19>

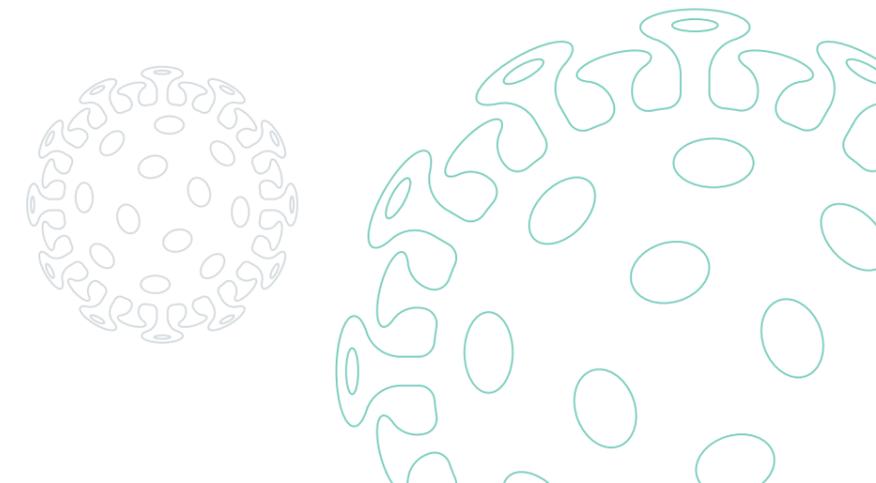


Recommended PPE for ambulance staff, paramedics, first responders, other patient transport services and pharmacy staff

Setting	Context	Disposable Gloves	Disposable Plastic Apron	Disposable fluid-repellent coverall/gown	Surgical mask	Fluid-resistant (Type IIR) surgical mask	Filtering face piece respirator	Eye/face protection ¹
Ambulance staff/paramedic/first responders/pre-hospital critical care/ Helicopter Emergency Medical Service/ hospital transport services	Performing an aerosol generating procedure e.g. intubation, suctioning ² on a possible or confirmed case(s) ³	✓ single use ⁴	✗	✓ single use coverall ⁴	✗	✗	✓ single use ²	✓ single use ⁴
	Direct patient care –possible or confirmed case(s) ³ (within 2 metres)	✓ single use ⁴	✓ single use ⁴	✗	✗	✓ single use ⁴	✗	✓ single use ⁴
	Driver conveying possible or confirmed case(s) ³ in vehicle with a bulkhead, no anticipated direct care ⁷	✗	✗	✗	✗	✗	✗	✗
	Driver conveying possible or confirmed case(s) ³ in vehicle without a bulkhead, no direct patient care and within 2 metres ⁷	✗	✗	✗	✗	✓ single or sessional use ^{4,5}	✗	✗
Pharmacy staff/workers	Working in an area with possible or confirmed case(s) ³ and unable to maintain 2 metres social distance ⁶	✗	✗	✗	✗	✓ sessional use ⁵	✗	✗
	Working in an area with possible or confirmed case(s) ³ and able to maintain social distancing	✗	✗	✗	✗	✗	✗	✗

Table 3

- This may be single or reusable face/eye protection/full face visor or goggles.
- The full list of aerosol generating procedures (AGPs) is within the IPC guidance [note APGs are undergoing a further review at present].
- A case is any individual meeting case definition for a possible or confirmed case: <https://www.gov.uk/government/publications/wuhan-novel-coronavirus-initial-investigation-of-possible-cases/investigation-and-initial-clinical-management-of-possible-cases-of-wuhan-novel-coronavirus-wn-cov-infection>
- Single use refers to disposal of PPE or decontamination of reusable items e.g. eye protection or respirator, after each patient and/or following completion of a procedure, task, or session; dispose or decontaminate reusable items after each patient contact as per Standard Infection Control Precautions (SICPs).
- A single session refers to a period of time where a health care worker is undertaking duties in a specific care setting/exposure environment e.g. on a ward round; providing ongoing care for inpatients. A session ends when the health care worker leaves the care setting/exposure environment. Sessional use should always be risk assessed and considered where there are high rates of hospital cases. PPE should be disposed of after each session or earlier if damaged, soiled, or uncomfortable.
- Non clinical staff should maintain 2m social distancing, through marking out a controlled distance; sessional use should always be risk assessed and considered where there are high rates of community cases.
- In communal waiting areas and during transportation, it is recommended that suspected or confirmed cases wear a surgical face mask if this can be tolerated. The aim of this is to minimise the dispersal of respiratory secretions, reduce both direct transmission risk and environmental contamination. A surgical facemask should not be worn by patients if there is potential for their clinical care to be compromised (e.g. when receiving oxygen therapy).



Additional considerations, in addition to standard infection prevention and control precautions,

where there is sustained transmission of COVID-19, taking into account individual risk assessment for this new and emerging pathogen, NHS and independent sector

Setting	Context	Disposable Gloves	Disposable Plastic Apron	Disposable fluid-repellent coverall/gown	Surgical mask	Fluid-resistant (Type IIR) surgical mask	Filtering face piece respirator	Eye/face protection ¹
Any setting	Direct patient/resident care assessing an individual that is not currently a possible or confirmed case ² (within 2 metres)	✓ single use ³	✓ single use ³	✗	✗	✓ risk assess sessional use ^{4,5}	✗	✓ risk assess sessional use ^{4,5}
Any setting	Performing an aerosol generating procedure ⁶ on an individual that is not currently a possible or confirmed case ²	✓ single use ³	✗	✓ single use ³	✗	✗	✓ single use ³	✓ single use ³

Table 4

- This may be single or reusable face/eye protection/full face visor or goggles.
- A case is any individual meeting case definition for a possible or confirmed case: <https://www.gov.uk/government/publications/wuhan-novel-coronavirus-initial-investigation-of-possible-cases/investigation-and-initial-clinical-management-of-possible-cases-of-wuhan-novel-coronavirus-wn-cov-infection>
- Single use refers to disposal of PPE or decontamination of reusable items e.g. eye protection or respirator, after each patient and/or following completion of a procedure, task, or session; dispose or decontaminate reusable items after each patient contact as per Standard Infection Control Precautions (SICPs).
- Risk assess refers to utilising PPE when there is an anticipated/likely risk of contamination with splashes, droplets of blood or body fluids. **Where staff consider there is a risk to themselves or the individuals they are caring for they should wear a fluid repellent surgical mask with or without eye protection as determined by the individual staff member for the care episode/single session.**
- A single session refers to a period of time where a health care worker is undertaking duties in a specific care setting/exposure environment e.g. on a ward round; providing ongoing care for inpatients. A session ends when the health care worker leaves the care setting/exposure environment. Sessional use should always be risk assessed and consider the risk of infection to and from patients, residents and health and care workers where COVID-19 is circulating in the community and hospitals. PPE should be disposed of after each session or earlier if damaged, soiled, or uncomfortable.
- The full list of aerosol generating procedures (AGPs) is within the IPC guidance [note APGs are undergoing a further review at present].

