Government of **Western Australia**
Department of **Health**

Advice for use of personal protective equipment for workers in community settings

The use of social distancing measures and routine infection control practices including good hand hygiene, in all settings, is the first line of defence for providing protection against coronavirus infection (COVID-19). The use of personal protective equipment (PPE) is to be used as an additional protection measure when indicated.

1. Purpose

This document contains advice on the usage of appropriate PPE during the COVID-19 pandemic for health care and non-health care workers working in community settings. This group includes, but is not limited to, WA Police (WAPOL), Department of Fire and Emergency Services (DFES), Department of Education, community pharmacies and pathology services, community service providers, for example. Separate advice has been provided for clinical workers and professional First Responders.

Organisations should consider how they can change normal business practices to avoid unnecessary contact with people. This includes measures such as phone call or video calls to replace in person visits. These measures should be considered before visiting a person and using PPE. If visits are required, social distancing practices should be maintained if possible, refer to section 4 for more information on social distancing.

This document has been developed to be consistent with national guidelines and will be updated to reflect changing circumstances; as such it is subject to change and re-issuing. The Western Australia (WA) Department of Health website will hold the latest version of this document and should be checked regularly to ensure workers have the most recent information. This document should be considered in the context of other public health advice.

2. Defining community transmission

This advice is guided by the extent of community transmission.

By the end of April 2020, WA had only experienced a small peak in cases, which occurred at the end of March. Most of these cases were associated with travel overseas. This was followed by a reduction to very low case numbers and no evidence of sustained community transmission.

Management of the pandemic will continue to focus on intensive case follow up and contact tracing with the aim of keeping the local transmission in the community at very low levels. If several cases occur in the community or a cluster or outbreak occurs, there are several

additional public health mitigation strategies that will be implemented in response including outbreak investigation, increase in targeted testing, review of social distancing measures and restrictions to normal community activity.

Community organisations will be aware of these changes if and when they occur and by keeping informed of developments, will be able to change their patterns of work and engagement with the community appropriately.

Widespread community transmission would occur when there is an increase in new case numbers to the extent that public health mitigation strategies, such as individual case follow up and contact tracing is unable to halt transmission, and the public health response is more likely to rely on the use of restrictions of activity to stop transmission.

3. Precautions to prevent the spread of infection

A range of precautions can assist with preventing the spread of infection.

Use of masks

For those individuals who are confirmed COVID-19, in self isolation as directed by public health or WAPOL or symptomatic, it is recommended they be provided with a surgical mask to wear during interaction with community workers.

Masks are effective for use on sick or unwell individuals e.g. when caring for a sick person with a respiratory disease and in general are not recommended for community interactions. General advice for use of masks in the community is available here.

Social distancing practices

Where practicable, principles of social distancing should be implemented. Review of business activities in the context of the COVID-19 climate should be considered. This could include:

- Avoid conducting in person visits if possible
- Telehealth appointments
- Contacting the client prior to any visit.

If an interaction can not be avoided the following social distancing principles should be adhered to. Social distancing guidelines are available here.

Hand Hygiene practices

Good hand hygiene practices should be adhered at all times. For more information refer to the National Hand Hygiene Initiative: Hand Hygiene in non-acute settings.

Routine infection prevention and control practices

Routine infection prevention and control practices should always be utilised as per your organisations policies and procedures. These practices assist in creating a safe working environment for you and the individuals you interact with. Your manager should be able to provide your organisation's policy/guidance on infection control. If your organisation does not have an existing policy or procedure contact your regulatory body or WA Department of Health.

Additional precautions for some clinical care

There may be some instances where certain types of care results in the generation of very small droplets of sputum (<5 microns). This could be the use of nebulisers, suctioning, CPAP or CPR/resuscitation. For staff performing these procedures they should refer to the

'Identification and use of PPE in the clinical setting during the coronavirus (COVID-19) pandemic policy' to guide additional PPE selection.

4. How to use the decision tree

This decision tree has been developed to provide workers in the community with support in determining PPE usage. This advice should be used in conjunction with any other (i.e. non-COVID-19 related) existing routine infection control practices.

This advice is designed to be applicable to all agencies and providers and is underpinned by the following principles:

- Protecting people and workers in the community is the highest priority.
- The PPE requirements for interactions must be proportional to the level and extent of community transmission and the level of contact.
- PPE should be used according to this guideline to ensure people and workers in the community are protected and PPE is available for all when required.

PPE recommended in the setting of a COVID-19 pandemic should be used **in addition** to any routine PPE recommendations, policy and procedures:

- Confirmed COVID-19 case (a client with laboratory-confirmed SARS-CoV-2 infection).
- Person currently in self-isolation directed by Public Health or WAPOL (e.g. following contact of a case).
- Symptomatic person who displays symptoms or complains of symptoms (e.g. cough, fever, shortness of breath, sore throat).
- All other people in context of limited community transmission.
- All other people in context of widespread community transmission.
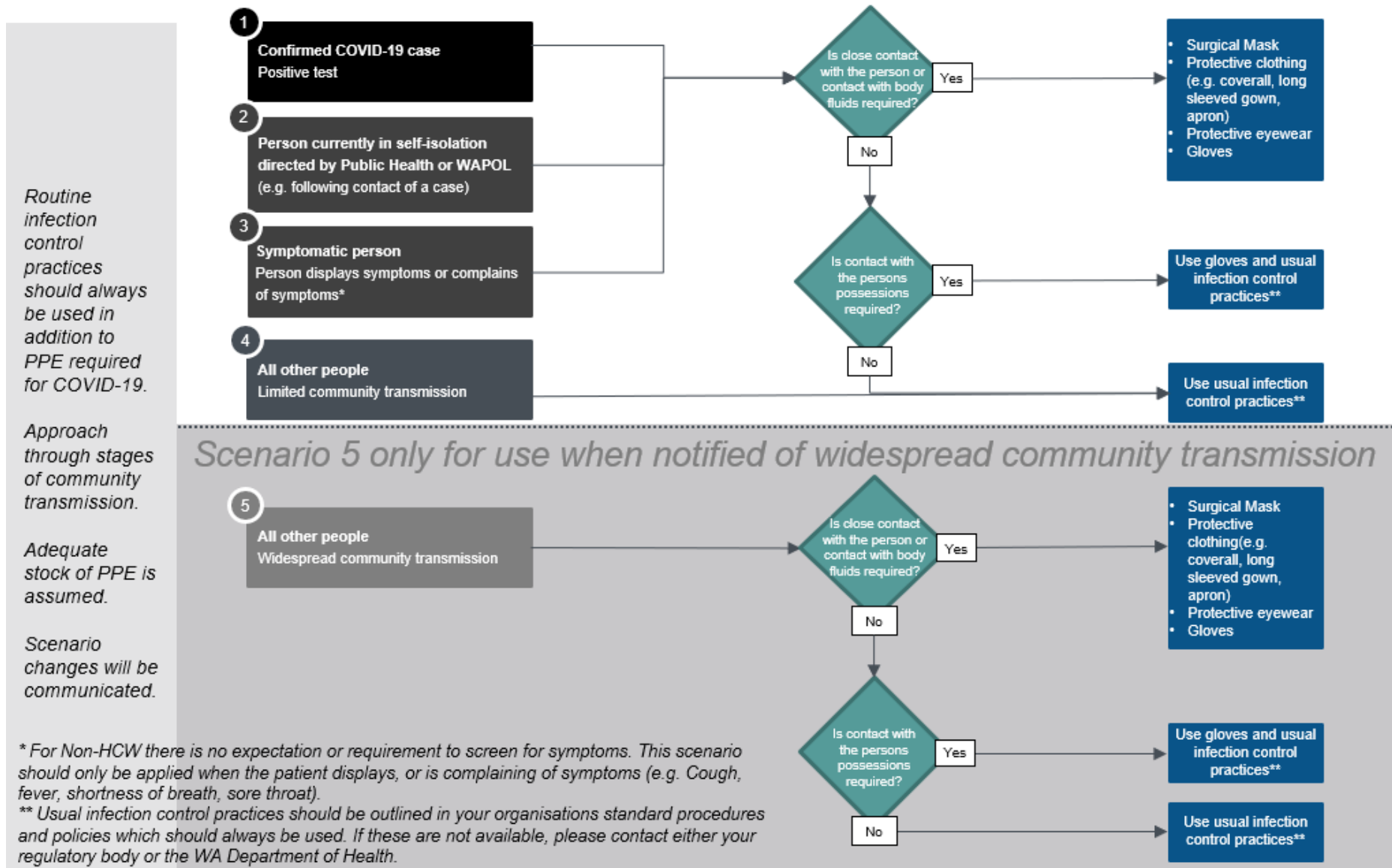
There are three categories of exposure the workers in community-settings must consider during the pandemic:

- Situations requiring a worker to have close contact with a person*.
- Situations requiring a worker to have contact with a person's possessions.
- Situations requiring a worker to have contact with a person's body fluids (e.g. blood, urine, vomit).

 *Close contact is defined as:

- A situation requiring contact within 1.5 metres for greater than or equal to 15 minutes <u>or</u>
- Sharing the same enclosed space for greater than or equal to two hours (e.g. shared cell/vehicle).

Below is the decision tree diagram.

Routine infection control practices should always be used in addition to PPE required for COVID-19.

Approach through stages of community transmission.

Adequate stock of PPE is assumed.

Scenario changes will be communicated.

1. Confirmed COVID-19 case
Positive test

2. Person currently in self-isolation directed by Public Health or WAPOL (e.g. following contact of a case)

3. Symptomatic person
Person displays symptoms or complains of symptoms*

4. All other people
Limited community transmission

Is close contact with the person or contact with body fluids required?
Yes → • Surgical Mask • Protective clothing (e.g. coverall, long sleeved gown, apron) • Protective eyewear • Gloves
No ↓

Is contact with the persons possessions required?
Yes → Use gloves and usual infection control practices**
No ↓

Use usual infection control practices**

Scenario 5 only for use when notified of widespread community transmission

5. All other people
Widespread community transmission

Is close contact with the person or contact with body fluids required?
Yes → • Surgical Mask • Protective clothing(e.g. coverall, long sleeved gown, apron) • Protective eyewear • Gloves
No ↓

Is contact with the persons possessions required?
Yes → Use gloves and usual infection control practices**
No → Use usual infection control practices**

* For Non-HCW there is no expectation or requirement to screen for symptoms. This scenario should only be applied when the patient displays, or is complaining of symptoms (e.g. Cough, fever, shortness of breath, sore throat).
** Usual infection control practices should be outlined in your organisations standard procedures and policies which should always be used. If these are not available, please contact either your regulatory body or the WA Department of Health.

A table summary guide to the Decision Tree is provided below.

	Routine infection control precautions**	Surgical mask	Eye protection	Gloves	Fluid resistant long-sleeved gown, coverall or plastic apron
In limited community transmission					
Close contact with person or their body fluids who is a confirmed COVID-19 case or a person self-isolation as directed by Public Health or WAPOL or symptomatic* person	✔	✔	✔	✔	✔
Contact with possessions of a confirmed COVID-19 or a person in self isolation as directed by Public Health or WAPOL or symptomatic* person	✔	✘	✘	✔	✘
All other people in the context of limited community transmission	✔	✘	✘	✘	✘
In widespread community transmission					
Close contact or contact with body fluids	✔	✔	✔	✔	✔
Contact only with a persons' possessions	✔	✘	✘	✔	✘
All other scenarios when you do not have close contact or contact with possessions or body fluids	✔	✘	✘	✘	✘

* For Non-HCW there is no expectation or requirement to screen for symptoms. This scenario should only be applied when the patient displays, or is complaining of symptoms (e.g. Cough, fever, shortness of breath, sore throat).

** Routine infection control practices should be outlined in your organisations standard procedures and policies which should always be used. If these are not available, please contact either your regulatory body or the WA Department of Health.

NOTE: If the worker is undertaking a procedure that generates very small droplets of sputum (<5 microns), follow the guidelines for these procedures, 'Identification and use of PPE in the clinical setting during the coronavirus (COVID-19) pandemic policy' to guide additional PPE selection.

5. Correct sequencing for putting on and taking off PPE

PPE is only protective when used correctly. Training is imperative to ensure staff members follow the correct processes and to ensure PPE is put on (donning) and taken off (doffing) in the correct order. An infographic is available here.

Disposal of PPE
Used PPE should be contained in a plastic bag, tied securely and disposed of in the general waste stream. Perform effective hand hygiene after handling the general waste.

Conservation of PPE
Globally, there are difficulties being experienced in sourcing PPE. As such, it is important that PPE only be used when required and the appropriate PPE is selected based on the needs as outlined in the decision tree.

6. Adoption for local policy

The Department of Health supports this advice being used as part of organisation's PPE policies.

7. Resources

Resources related to this advice and other COVID-19 related information is available on the Department of Health website. Regular review of the website is recommended to ensure you are accessing the most up to date information which will be updated regularly.

Enquires relating to this advice can be sent to covid19.healthoperations@health.wa.gov.au.

Further health information, including clinic locations, is on http://www.healthywa.wa.gov.au.

Information and advice on the novel coronavirus called COVID-19 for the community and businesses in WA is available at https://www.wa.gov.au/government/coronavirus-covid-19.

Detailed information for health professionals (including infection control, social distancing, cleaning, etc.) can be found here: https://ww2.health.wa.gov.au/Articles/A_E/Coronavirus.

Last updated 30 April 2020

**This document can be made available in alternative formats
on request for a person with disability.**

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