



COVID-19 PPE for Frontline Staff

It is important for those who work with the public to understand how to protect their health and that of the people they serve while at work. This document provides guidance for staff on ways to protect themselves, behaviors and personal protective equipment.

What is COVID-19?

The 2019 novel coronavirus causes the disease now called COVID-19. Coronaviruses (CoV) are a large family of viruses a few of which cause human infection and illness ranging from the common cold to more severe diseases. Symptoms of COVID-19 include a fever, cough, and shortness of breath.

How is COVID-19 spread?

COVID-19 spreads from person to person. This occurs when:

1. An infected person coughs or sneezes and produces respiratory droplets that are inhaled by a person that is nearby (within 6 feet) or when people are in close face to face contact (within 6 feet) for longer than 10 minutes.
2. A person touches a surface or object recently contaminated by the COVID-19 virus and then touches their own mouth, nose, or eyes.

How to prevent spread of COVID-19

1. Practice universal precautions.
2. Keep surfaces and high-touch areas clean.
3. Take measures to reduce close person-to-person interaction as much as possible.
4. Use personal protective equipment (PPE) when other measures cannot be used and if appropriate to the task.

How to clean surfaces and high-touch areas

- An environmental surface is generally safe 20-30 minutes after contamination with an enveloped virus, once secretions have dried, but cleaning provides an extra measure of safety.
- Routine cleaning works well. General disinfection is not needed; routine sanitation is sufficient.
- Clean work surfaces with general household cleaners following label directions:
 - At the start of the workday
 - At the end of the workday
 - Between each client where possible
 - Any time the surface is visibly soiled

Universal Standard Precautions

Everyone should follow these basic strategies to reduce your risk of exposure to the virus:

- **Social distancing**

Social distancing is limiting your contact with other individuals by not gathering in groups and by meeting/interacting with as few people as possible. When you do interact, keep a separation of 6 feet or more.

- Encourage your clients to practice social distancing
- Avoid close contact with people who are sick
- It is appropriate to ask someone how they feel and if they have respiratory symptoms
- Stay home when you are sick
- Avoid hugs and handshakes

- Maintain distance from others with whom you are speaking – at least a few feet though coughs and sneezes can spread the virus up to 6 feet
- **Hand hygiene**
 - Encourage your clients to practice proper hand hygiene
 - Avoid touching your eyes, nose, and mouth with unwashed hands
 - Wash your hands frequently throughout the day, including:
 - When you arrive at work and at home
 - After each use of the restroom
 - Before and after close interaction with a client
 - Any time your hands are visibly soiled
 - Before and after you cook
 - Before and after you eat
 - Any other time you feel you need to do so!
 - How to wash your hands properly:
 1. Wet your hands
 2. Apply soap (liquid or clean soap bar)
 3. Rub your hands together to make a lather and scrub for at least 20 seconds, making sure to wash your palms, the back of your hands, wrists, between fingers, under fingernails
 4. Rinse well
 5. Dry hands with paper towel
 - Use alcohol-based hand sanitizers with at least 60% alcohol when water and soap are not available,
 - Thoroughly wet all areas of the front and back of both hands with the sanitizer and rub in until dry
- **Respiratory hygiene (cough etiquette)**
 - Practice and encourage your clients to practice proper respiratory hygiene
 - Do not cough or sneeze into your hand. Cough or sneeze into disposable tissues. If these are not available, use your arm or elbow (not your hand) to cover your cough or sneeze. Encourage others to do the same.
 - As you cough or sneeze into a tissue or your arm, cough or sneeze in a direction away from others.
 - Wash your hands after coughing or sneezing
 - Use a mask if you are coughing or sneezing

Personal Protective Equipment (PPE)

Personal protective equipment is what you use when there are no other methods of avoiding exposure to infection.

COVID-19 is transmitted by respiratory droplets. In *healthcare settings* droplet precautions include a surgical type face mask, gloves, gown and eye-shield. Higher levels of respiratory protection (such as an N-95 respirator) should only be utilized when fine aerosols are generated (specimen collection, respiratory tract suctioning, intubation, etc.).

The use of personal protective equipment outside of healthcare settings is dependent upon the nature of the work and contact with others. Generally, those individuals who are not health care providers

working directly with a known or suspected case of COVID-19 should follow the universal standard precautions described above. Those who have frequent close contact with large numbers of clients outside of healthcare facilities (community engagement, shelter intake, screening sites, etc.) and members of law enforcement who may have very close contact with others or may come into contact with bodily fluids during the course of an encounter should make use of the following CDC-recommended PPE guidelines when the situation suggests it is necessary:

Type of Work	Recommended PPE				
	Gloves	Facemask* (surgical type)	Respirator (N-95 or higher level – see note)	Gown	Goggles / Face Shield
Short frequent contact with general population (Example: desk/intake staff)	Optional	Optional	No	No	No
Longer/closer contact (Example: personal care services)	Yes	Yes	No	No	No
Law Enforcement minimal contact (Example: security guard doing screening)	Optional	Optional	No	No	No
Law Enforcement close contact (see below) (Example: physical confrontation/arrest likely)	Yes	Yes	No	Yes	Yes

* Use of homemade masks: In settings where facemasks are not available, homemade masks (e.g., bandana, scarf) for care of patients with COVID-19 can be used as long as they cover the mouth and nose; are made of intact, close weave cloth; and allow comfortable breathing. However, homemade masks are not considered PPE, since their capability to protect is unknown. Caution should be exercised when considering this option. Homemade masks should ideally be used in combination with a face shield that covers the entire front (that extends to the chin or below) and sides of the face.

NOTE: If you are involved in a situation such as a resuscitation that might result in establishing an airway or intubation, or that might result in an individual of unknown infection status who might be generating an unusual amount of potentially aerosolized secretions, and you cannot move 6 feet away, exchanging the surgical type mask for a N-95 type respirator may be indicated.

How to put on, use, take off and dispose of a mask (WHO Mask Instructions)

- Before putting on a mask, clean hands with alcohol-based hand sanitizer or soap and water.
- Cover mouth and nose with mask and make sure there are no gaps between your face and the mask.
- Avoid touching the mask while using it; if you do, clean your hands with alcohol-based hand sanitizer or soap and water.
- Replace the mask with a new one as soon as it is damp; do not re-use single-use masks.
- To remove the mask: remove it from behind (do not touch the front of mask); discard immediately in a closed bin; clean hands with alcohol-based hand sanitizer or soap and water.

How to wear and take off gloves (CDC PPE Sequence)

- Gloves are not a substitute for handwashing.

1. If your task requires gloves, wash your hands (see hand hygiene above) prior to putting on gloves
 2. Wash your hands immediately after removing gloves.
- Change gloves and wash your hands if:
 1. gloves become damaged
 2. gloves become visibly soiled with blood or body fluids following a task
 3. changing tasks to work with non-soiled items.
 - Never wear the same pair of gloves in the care of more than one client.
 - Carefully remove gloves to prevent hand contamination:
 1. The outer part of gloves is contaminated! If your hands get contaminated during glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
 2. Using a gloved hand, grasp the palm area of the other gloved hand and peel off the first glove
 3. Hold removed glove in the still-gloved hand
 4. Slide fingers of ungloved hand under the remaining glove at the wrist and peel off second glove, inverting it over the first glove
 5. Discard both gloves in the trash.

PPE Special Consideration for Law Enforcement

Law enforcement personnel who must make close contact with individuals confirmed or suspected to have COVID-19 should follow universal precautions and utilize appropriate PPE.

The minimum PPE recommended is:

- A single pair of disposable examination gloves.
- Disposable isolation gown or single use/disposable coveralls. If unable to wear a disposable gown or coveralls because it limits access to duty belt and gear, ensure duty belt and gear are disinfected after contact with individual.
- A surgical type mask, fitting closely to the face
- Eye protection (i.e., goggles or disposable face shield that fully covers the front and sides of the face). Clean and disinfect duty belt and gear prior to reuse using a household cleaning spray or wipe, according to the product label.
 - Follow standard operating procedures for the containment and disposal of used PPE.
 - Follow standard operating procedures for containing and laundering clothes. Avoid shaking the clothes.

If you come into contact with a person's bodily fluids/secretions of a client (blood, sputum, etc.), please notify your supervisor immediately.

