



## COVID-19 – PPE Guidance

### Introduction

Wherever possible, risks should be reduced to the lowest reasonably practicable level by taking preventative measures, in order of priority. Only after all measures have been tried and found ineffective in controlling risks to a reasonably practicable level, must personal protective equipment (PPE) be used

Where possible, all contact with members of the public should be carried out while maintaining social distancing measures – a distance of at least Two metres (Six feet). Where this is not possible, the principles for the Hierarchy of Risk should be applied, using measures such as physical barriers, alternative working practices and, as a final measure, the use of personal protective equipment (PPE) based on risk assessment, where other safe working systems alone may not be feasible or may be insufficient to mitigate the risk of transmission of COVID-19.

### General advice

Government health agencies have identified that there are two main routes by which COVID-19 may be transmitted:

- Infection can be spread to people through close contact (within Two metres) with infected individuals and respiratory droplets generated during coughing and sneezing
- It is also possible that someone may become infected by touching a surface, object or any part of an infected person that has been contaminated with respiratory secretions and then touching their own mouth, nose, or eyes (such as touching a contaminated door knob or shaking hands then touching their own face)

The infection risk from environmental contamination will decrease over time, but it is still unclear at what point there is no risk of transmission from contaminated materials and equipment;

The main control measures being urged by the Government are increased cleaning, including washing your hands thoroughly with soap and water more often than usual, use of alcohol-based hand gels and where possible, (Public Health England has advised that hand sanitisers should have 60% or higher alcohol content to be effective against the COVID-19 virus) , introducing Social Distancing by ensuring there is a separation distance of two metres between people.

Where it is not possible to maintain a two metre or more distance away from an individual, disposable gloves and a disposable plastic apron are recommended. Disposable gloves should be worn if physical contact is likely to be made with potentially contaminated areas or items.

The use of a fluid repellent surgical face mask is recommended and additional use of suitable eye protection (such as face visor or goggles) should be risk assessed when there is an anticipated risk of contamination with splashes, droplets of blood or body fluids.

Clean your hands thoroughly with soap and water or alcohol sanitiser before putting on and after taking off PPE. In all circumstances where some form of PPE is used, the safe removal of the PPE is a critical consideration to avoid self-contamination. Guidance on putting on and taking off PPE is available on the HSE [website](#). Use and dispose of all PPE according to the instructions and training provided by your employer or organisation.

*The current global stockpile of PPE is insufficient, particularly for medical masks and respirators; the supply of gowns and goggles is soon expected to be insufficient also. Surging global demand – driven not only by the number of COVID-19 cases but also by misinformation, panic buying, and stockpiling – will result in further shortages of PPE globally. The capacity to expand PPE production is limited, and the current demand for respirators and masks cannot be met, especially if widespread inappropriate use of PPE continues.* (Rational use of personal protective equipment (PPE) Interim guidance 19 March 2020, World health organisation) It is incumbent on all organisations to utilise PPE proportionally based on the risk posed for coronavirus disease.

The guidance below has been issued based on the information published by Public Health England on the 3<sup>rd</sup> May 2020 and will be updated accordingly.

## **Activities and Recommended PPE**

Assume all contact with unknown patients/victims are potentially infected. For medical/trauma type incidents default to specific guidance.

### **1. Aerosol Generating Procedures (AGP) CPR, Body recovery, Bariatric rescue, RTC dedicated casualty care etc.**

- 2 x pairs of Nitrile Gloves
- PHE recommended Face Mask or equivalent i.e. Respirator / BA Set\*
- The minimum of a FFP3 Face Mask is required for AGP.
- Fluid resistant coverall suit / disposable plastic Apron /Fire Kit \*
- Eye protection

**2. Activities requiring interaction with people where 2m CANNOT be maintained.** ring removal/medical gain entry/non-specific assisting ambulance

- Nitrile Gloves
- Fluid Resistant Surgical Mask (IIR type) or higher
- Fluid resistant coverall suit / disposable plastic Apron / Fire Kit only \*\*
- Eye protection

If practical a fluid resistant surgical face mask should be used on the patient/casualty to limit any spread of the virus.

**3. Non incident related PPE/RPE requirements - Doorstep delivery**

- Maintain a Two metre distance and remain outside property.
- Nitrile gloves

If entering property

- Fluid resistant surgical mask.
- Nitrile gloves.
- Eye protection.
- Fluid resistant coverall suit / disposable plastic Apron / Fire Kit
- Maintain distance of Two metres whenever possible.
- If Two metre distancing cannot be maintained request occupant wears a fluid resistant surgical mask.

**4. Day to day duties whilst on Station, travelling in the appliance.**

- Maintain the Two metre social distancing rule when reasonably practicable.
- Whilst carrying out day to day tasks on Station there is no requirement to wear additional PPE or RPE.
- Whilst travelling in the fire appliance to and from incidents there is no requirement to wear any additional PPE or RPE other than that worn to deal with the incident you're attending.
- If you have been contaminated at the incident and cannot fully decontaminate at scene, suitable PPE/RPE should be worn while returning to Station prior to decontamination.

\* **Requires immediate decontamination after use**

\*\* **Consider decontamination after use subject to intervention made**

## **Additional considerations**

The descriptors above detail the level of PPE that is recommended by the NFCC in relation to COVID-19, based on the most recent PHE guidance. This guidance should be adopted by FRS staff as a minimum for the care of all possible COVID-19 cases; a dynamic risk assessment should be carried out to determine if a higher level or additional PPE is required.

Although not recommended, should any Service seek to reduce the level of protection provided, any deviation should be subject of a suitable and sufficient risk assessment.

The NFCC recognise that a risk-assessed alternative may be substituted in some cases i.e. fire kit as an alternative to coverall suit with appropriate decontamination procedures adopted.

Equally should the specified PPE be unavailable, a risk-assessed alternative level of PPE may be substituted i.e. Breathing Apparatus or Respirator with fire kit or fluid repellent coveralls.

The NFCC acknowledge that some services may wish to default to an alternative level of protection on occasion, again subject to a suitable and sufficient risk assessment.

## **Face Coverings**

The NFCC acknowledges the position taken by government in relation to face coverings and welcomes the government's attempts to limit any impact on PPE for front line workers.

The NFCC also notes the differentiation between contact with members of the public (people that staff do not normally meet\*) and colleagues (people that they regularly come into contact with\*) as a way of determining the advice about the suitable utilisation of a face covering when in contact with others.

The NFCC acknowledges the difference between the workplace and other public places where people could meet in an enclosed space and where social distancing might not be able to be maintained.

This statement also reflects the fact that, unlike other service providers the use of public transport when in work is not required/integral to the role being undertaken.

There is clear a differentiation between a face covering and a face mask (personal protective equipment) and these protective measures should not be confused within the workplace.

As such the NFCC position is clear that the use of face coverings when travelling to and from work is at the discretion of the individual.

When in the workplace face coverings are not advised or instructed, social distancing should be practiced. Where close contact with the public is unavoidable then the NFCC guidance on Personal Protective Equipment (PPE) for front line workers should be applied.

## **Notes**

The differential between the public (people that staff do not normally meet\*) and people in the workplace (people that they regularly come into contact with\*) has been formed on the basis that within the workplace the safeguards and control measures applied to minimise the spread of the virus are known - and the individuals who are in the workplace are known to have applied those measures when making themselves available for work.

As per previous NFCC guidance PPE should be available to crews/individuals when travelling on fire engines or in vehicles in the event that someone becomes unwell with C19 symptoms.

The use of Perspex separation on fire engines as a means of creating separation is not recommended given the nature of the work undertaken, the safety design of the vehicle and the impact on the exchange of key risk critical information whilst on route to an incident.

The wearing of a face covering is an individual choice - face coverings are not PPE.

Should an individual wish to wear a face covering in the workplace that will be for local determination – subject to a suitable and sufficient risk assessment being in place given the risk critical nature of the role.

NFCC PPE Guidance reflects the guidance provided by PHE on PPE during COVID 19 \* *As referenced within government recovery and workplace guidance 11<sup>TH</sup> May 2020*

## Appendix 1

Context	PPE (fire kit)	Nitrile Gloves	Double Nitrile Gloves	Fluid resistant coverall suit/ Disposable Apron	Fluid resistant Surgical Mask (IIR) FRS (or higher)	FFP3 Mask	Eye Protection	Surgical Mask (IIR) Casualty (if practical)
Aerosol Generating Procedures (AGP) (CPR, Body recovery, Bariatric rescue, RTC dedicated casualty care etc)	✓	✗	✓	✓	✗	✓	✓	✓
Activities requiring interaction with people confirmed or suspected of having COVID19 where a distance of 2m <b>CAN</b> be maintained. (Ring removal, Medical forced entry)	✓	✓	✗	✓	✓ If entering property	✗	✗	✓
Non incident related PPE/RPE requirements (Doorstep delivery) Maintain 2m Distance	✗	✓	✗	✗	✗	✗	✗	✗
Non incident related PPE/RPE requirements - Doorstep delivery Entering the property (2M Distancing where possible)	✗	✓	✗	✓	✓	✗	✓	✓