

DEPARTMENT: Medical Affairs	POLICY DESCRIPTION: Personal Protective Equipment
APPROVED:	REVIEWED:
REPLACES:	RETIRED:
ADOPTED:	
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SCOPE: All ARH employees, Medical Staff, students, volunteers, patients, visitors and vendors at all ARH locations (i.e. Hospitals, Clinics, Home Health Agency, Home Care Stores, Sleep Clinics, Pharmacy, Office Buildings).

PURPOSE: In response to the COVID 19 pandemic this policy is to be put into place until further notice. It is to address the safety and protection of all individuals entering/visiting any ARH locations (i.e. hospital, clinic, office building, outpatient services etc.) as well as employees making in-home visits by reducing exposure risk. Appalachian Regional Healthcare is asking all individuals to wear appropriate/designated Personal Protective Equipment (PPE) throughout all ARH locations as outlined in this policy.

DEFINITIONS:

- **Universal Masking:** All employees, visitors, vendors, anyone that enters an ARH facility greater the 2 yrs. old must wear a face mask at all times.
- **Social Distancing:** Maintaining a minimum of 6 feet, as recommended by the CDC between yourself and other individuals outside your home.
- **Clinical Staff Screening at Entry Points:** All employees working location entrance assigned to screen all individuals entering.
- **Clinical Personnel:** All employees working in patient care areas at all ARH locations, including employees making in-home visits to patients.
- **Aerosol Generating Procedures:** Per CDC Definition:
 - Open suctioning of airways
 - Sputum induction
 - CPR
 - Endotracheal intubation and extubation
 - CPAP, BiPAP
 - Bronchoscopy
 - Manual Ventilation
 - Nebulizer administration
 - High flow O2 delivery
- **N95 Respirator:** Disposable half-filtering facepiece that filters out particles.
- **N100 Respirator:** Facepiece respirator that is reusable and has replaceable canisters, cartridges, or filters.
- **Non-Clinical Personnel:** All employees within any non-clinical area at all ARH locations.
- **Patients:** All patients both Inpatient/Outpatient services at all ARH locations (i.e. hospitals, clinics, pharmacy, home care stores, etc.).

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- **Visitors:** All individuals entering any ARH location to visit patients or employee.
- **Vendors:** All vendors at all ARH locations for any reason.

PROCEDURE:

- **Universal Masking:**
 - ***All employees, guest, vendors and others older than 2 yrs. old must wear their personal mask upon arrival to facility and while waiting to be screened at entry point.***
 - The type of mask required will be determined by your area of work; Clinical or Non-Clinical.
 - Employees working in Clinical areas and doing direct patient care are required to wear eye protection also.
 - Employee facemask when worn must be across the nose and mouth at all times (CANNOT drop below nose or chin). If you touch the mask during the wear time, hand hygiene must be performed immediately after contact with the mask.
 - ***Mask must be worn at all times where it is possible that the 6-foot minimum distance requirement cannot be maintained and sured. This includes but is not limited to highly populated spaces including elevators, hallways, nursing station, breezeways, and office spaces.***
 - ***See Attachment C*** for Daily Cleaning Instructions for Cloth Mask.
- **Social Distancing:**
 - Stay at least 6 feet (about 2 arms' length) from other people.
 - Do not gather in groups.
 - Stay out of crowded places and avoid mass gatherings
- **Clinical Staff Screening at Entry Points:**
 - A procedural mask will be given when entering the building, place the mask over your nose and mouth and leave in place (CANNOT drop below nose or chin)
 - Eye protection/face shield is issued by your supervisor for the individual checking temperatures.
 - The procedural mask must be worn across the nose and mouth at all times. If you the touch the mask during wear, hand hygiene must be performed immediately after contact with mask.

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- When removing your face mask, perform hand hygiene, untie the mask or remove by grasping the elastic straps or ear loops being careful not to touch the front of the mask, fold outer surface inward against itself to reduce contact with the other surface during storage. Perform Hand Hygiene
 - To put your procedural face mask on again, obtain mask and open your procedural mask using the ear loops or ties. Assess for damage, visible dirt, or moisture and if found, discard the personal procedural mask and obtain a new one from your supervisor. If the mask has no visible concerns, place mask on face, and perform hand hygiene.
- **Clinical Personnel:**
 - All employees must wear their own personal mask upon arrival to work and while in line awaiting screening. Once proper screening is complete and employee is permitted to enter, they will be issued a procedural mask to change into for the scheduled shift.
 - When caring for any patient not in COVID/PUI isolation, your procedural mask provided at screening can be worn room to room and may be worn when accessing supplies, med room, patient care, and common areas such as the nursing station, lounge, etc.
 - If you are in direct close contact with a patient, eye protection must be worn (goggles, face shield, mask with shield are acceptable) along with face mask.
 - Follow required PPE when caring for PUI or COVID-19 patients. Discard and obtain a new procedural mask whenever the mask becomes:
 - Visibly soiled
 - Wet or damp either inside, outside, or both
 - Torn in any way
 - Unable to be kept in place over nose and mouth for any reason.
 - If the mask is touched at any time while wearing it, hand hygiene must be performed immediately after doing so.
 - When taking a break to eat or drink, perform hand hygiene. To remove the mask, untie mask or remove by grasping the elastic straps or ear loops being careful not to touch the front of the mask, fold outer surface inward against itself to reduce contact with the other surface during storage. Perform hand hygiene before eating and drinking

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- To put mask on again, obtain your mask; open your procedural mask using the ear loops or ties. Assess for damage, visible dirt, or moisture and if found, discard the mask and obtain a new one from your supervisor. If the mask has no visible concerns, place the mask on face, perform hand hygiene.
 - Mask should be worn out of building and discarded at end of your shift.

- **Clinical Personnel with PUI/COVID-19 Positive Patients and Aerosol Generating Procedure:**
 - ***N95 Respirator Reuse/N100 Respirator Reuse Procedure:***
 - **See Infection Control Altered Standards of Care Policy: Response to Novel Pathogens of Public Health Concern & Related Critical Supply Shortages**
 - **See Attachment A** for CDC Donning and Doffing PPE Sequence
 - **See Attachment B** for N95 Decontamination Instructions
 - **During any aerosol generating procedures in PUI/COVID positive patients all employees must wear an N95 respirator and eye protection or an N100 respirator and eye protection along with gown and gloves.**

- **Home Health Personnel:**
 - Call patient morning of scheduled visit to screen patient for appropriate PPE usage during visit.
 - Enter an electronic screening into Meditech.
 - **See Attachment B** for N95 Decontamination Instructions

- **Non-Clinical Personnel:**
 - Following the universal masking process: A clean cloth mask can be worn.
 - **See Attachment C** for Daily Cleaning Instructions for Cloth Mask.
 - **Facial mask may be removed only when alone, in a closed-door office, eating- 6 feet away from other individuals or alone on break.**
 - Your facemask when worn must be across the nose and mouth at all times (CANNOT drop below nose or chin). If you touch the mask during the wear time, hand hygiene must be performed immediately after contact with mask.

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- If you remove your face mask from your face, untie mask or remove by grasping the elastic straps or ear loops, fold outer surface inward against itself to reduce contact with the other surface during storage. Perform hand hygiene
- To put your face mask on again, obtain your mask, open your personal face mask using the ear loops or grabbing ties. Assess for damage, visible dirt, or moisture and if found, discard the mask and obtain a new one from your supervisor. If your personal face mask has no visible concerns, place mask on face, and perform hand hygiene.

- **Patients:**

- Patients must wear their own face mask upon arrival to any ARH location and maintain a 6 feet social distance from other individuals throughout the duration of time in all ARH locations.
- Patients will be screened for proper PPE at the designated entrance prior to being permitted into the location.
- Instruct patients to perform proper hand hygiene when putting on or removing mask.
- Patients being discharged must wear a mask during transport or escort of exiting the facility and getting into vehicle.

- **Visitors:**

- Visitors must wear their own face mask upon arrival to any ARH location and maintain a 6 feet social distance from other individuals throughout the duration of time in all ARH locations.
- Visitors will be screened for proper PPE at the designated entrance prior to being permitted into the location.
- Instruct visitors to perform proper hand hygiene when putting on or removing mask.

- **Vendors:**

- Vendors must wear their own face mask upon arrival to any ARH location and maintain a 6 feet social distance from other individuals throughout the duration of time in all ARH locations.
- Vendors will be screened for proper PPE at the designated entrance prior to being permitted into the location.
- Instruct vendors to perform proper hand hygiene when putting on or removing mask.

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WEBSITES:

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/decontamination-reuse-respirators.html>

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/using-ppe.html>

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/respirators-strategy/index.html>

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html>

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/social-distancing.html>

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Attachment A:

1. How to Put On (Don) PPE Gear

More than one donning method may be acceptable. Training and practice using your healthcare facility's procedure is critical. Below is one example of donning.

2. **Identify and gather the proper PPE to don.** Ensure choice of gown size is correct (based on training).
3. **Perform hand hygiene using hand sanitizer.**
4. **Put on isolation gown.** Tie all of the ties on the gown. Assistance may be needed by other healthcare personnel.
5. **Put on NIOSH-approved N95 filtering facepiece respirator or higher (use a facemask if a respirator is not available).** If the respirator has a nosepiece, it should be fitted to the nose with both hands, not bent or tented. Do not pinch the nosepiece with one hand. Respirator/facemask should be extended under chin. Both your mouth and nose should be protected. Do not wear respirator or facemask under your chin or store in scrubs pocket between patients. *
 - o **Respirator:** Respirator straps should be placed on crown of head (top strap) and base of neck (bottom strap). Perform a user seal check each time you put on the respirator.
 - o **Facemask:** Mask ties should be secured on crown of head (top tie) and base of neck (bottom tie). If mask has loops, hook them appropriately around your ears.
6. **Put on face shield or goggles.** Face shields provide full face coverage. Goggles also provide excellent protection for eyes, but fogging is common.
7. **Perform hand hygiene before putting on gloves.** Gloves should cover the cuff (wrist) of gown.
8. **Healthcare personnel may now enter patient room.**

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9. How to Take Off (Doff) PPE Gear

More than one doffing method may be acceptable. Training and practice using your healthcare facility's procedure is critical. Below is one example of doffing.

1. **Remove gloves.** Ensure glove removal does not cause additional contamination of hands. Gloves can be removed using more than one technique (e.g., glove-in-glove or bird beak).
2. **Remove gown.** Untie all ties (or unsnap all buttons). Some gown ties can be broken rather than untied. Do so in gentle manner, avoiding a forceful movement. Reach up to the shoulders and carefully pull gown down and away from the body. Rolling the gown down is an acceptable approach. Dispose in trash receptacle. *
3. **Healthcare personnel may now exit patient room.**
4. **Perform hand hygiene.**
5. **Remove face shield or goggles.** Carefully remove face shield or goggles by grabbing the strap and pulling upwards and away from head. Do not touch the front of face shield or goggles.
6. **Remove and discard respirator (or facemask if used instead of respirator).**
Do not touch the front of the respirator or facemask. *
 - **Respirator:** Remove the bottom strap by touching only the strap and bring it carefully over the head. Grasp the top strap and bring it carefully over the head, and then pull the respirator away from the face without touching the front of the respirator.
 - **Facemask:** Carefully untie (or unhook from the ears) and pull away from face without touching the front.
7. **Perform hand hygiene after removing the respirator/facemask and before putting it on again if your workplace is practicing reuse. ***

** Facilities implementing reuse or extended use of PPE will need to adjust their donning and doffing procedures to accommodate those practices.*

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Use Personal Protective Equipment (PPE) When Caring for Patients with Confirmed or Suspected COVID-19

Before caring for patients with confirmed or suspected COVID-19, healthcare personnel (HCP) must:

- **Receive comprehensive training** on when and what PPE is necessary, how to don (put on) and doff (take off) PPE, limitations of PPE, and proper care, maintenance, and disposal of PPE.
- **Demonstrate competency** in performing appropriate infection control practices and procedures.

Remember:

- PPE must be donned correctly before entering the patient area (e.g., isolation room, unit if cohorting).
- PPE must remain in place and be worn correctly for the duration of work in potentially contaminated areas. PPE should not be adjusted (e.g., retying gown, adjusting respirator/facemask) during patient care.
- PPE must be removed slowly and deliberately in a sequence that prevents self-contamination. A step-by-step process should be developed and used during training and patient care.

Preferred PPE – Use N95 or Higher Respirator



Acceptable Alternative PPE – Use Facemask



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Use Personal Protective Equipment (PPE) When Caring for Patients with Confirmed or Suspected COVID-19

Before caring for patients with confirmed or suspected COVID-19, healthcare personnel (HCP) must:

- **Receive comprehensive training** on when and what PPE is necessary, how to don (put on) and doff (take off) PPE, limitations of PPE, and proper care, maintenance, and disposal of PPE.
- **Demonstrate competency** in performing appropriate infection control practices and procedures.

Remember:

- PPE must be donned correctly before entering the patient area (e.g., isolation room, unit if cohorting).
- PPE must remain in place and be worn correctly for the duration of work in potentially contaminated areas. PPE should not be adjusted (e.g., retying gown, adjusting respirator/facemask) during patient care.
- PPE must be removed slowly and deliberately in a sequence that prevents self-contamination. A step-by-step process should be developed and used during training and patient care.

Preferred PPE – Use N95 or Higher Respirator



Acceptable Alternative PPE – Use Facemask



Donning (putting on the gear):

More than one donning method may be acceptable. Training and practice using your healthcare facility's procedure is critical. Below is one example of donning.

1. **Identify and gather the proper PPE to don.** Ensure choice of gown size is correct (based on training).
2. **Perform hand hygiene using hand sanitizer.**
3. **Put on isolation gown.** Tie all of the ties on the gown. Assistance may be needed by another HCP.
4. **Put on NIOSH-approved N95 filtering facepiece respirator or higher (use a facemask if a respirator is not available).**
 - If the respirator has a nosepiece, it should be fitted to the nose with both hands, not just one or the other. Do not pinch the nosepiece with one hand. Respirator/facemask should be extended under chin. Both your mouth and nose should be protected. Do not wear respirator/facemask under your chin or store in scrub pocket between patients.*
 - **Respirator:** Respirator straps should be placed on crown of head (top strap) and base of neck (bottom strap). Perform a user seal check each time you put on the respirator.
 - **Facemask:** Mask ties should be secured on crown of head (top tie) and base of neck (bottom tie). If mask has loops, hook them appropriately around your ears.
5. **Put on face shield or goggles.** Face shields provide full face coverage. Goggles also provide excellent protection for eyes, but fogging is common.
6. **Perform hand hygiene before putting on gloves.** Gloves should cover the cuff (wrists) of gown.
7. **HCP may now enter patient room.**

Doffing (taking off the gear):

More than one doffing method may be acceptable. Training and practice using your healthcare facility's procedure is critical. Below is one example of doffing.

1. **Remove gloves.** Ensure glove removal does not cause additional contamination of hands. Gloves can be removed using more than one technique (e.g., glove-in-glove or hand leak).
2. **Remove gown.** Unfasten all ties (or unroll all bottoms). Some gown ties can be broken rather than untied. Do so in gentle manner, avoiding a forceful movement. Reach up to the shoulders and carefully pull gown down and away from the body. Rolling the gown down is an acceptable approach. Dispose in trash receptacle.*
3. **HCP may now exit patient room.**
4. **Perform hand hygiene.**
5. **Remove face shield or goggles.** Carefully remove face shield or goggles by grabbing the strap and pulling upwards and away from head. Do not touch the front of face shield or goggles.
6. **Remove and discard respirator (or facemask if used instead of respirator).*** Do not touch the front of the respirator or facemask.
 - **Respirator:** Remove the bottom strap by touching only the strap and bring it carefully over the head. Grasp the top strap and bring it carefully over the head, and then pull the respirator away from the face without touching the front of the respirator.
 - **Facemask:** Carefully untie (or unhook from the ears) and pull away from face without touching the front.
7. **Perform hand hygiene after removing the respirator/facemask and before putting it on again if your workplace is practicing reuse.**



*Facilities implementing reuse or extended use of PPE will need to adjust their donning and doffing procedure to accommodate these practices.

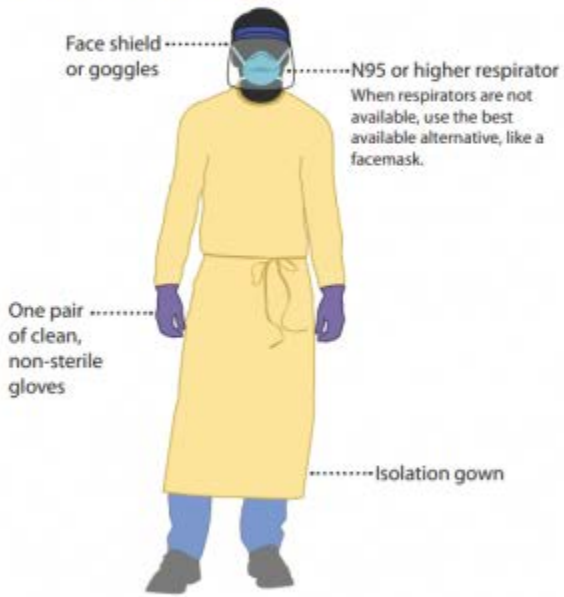
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COVID-19 Personal Protective Equipment (PPE) for Healthcare Personnel

Preferred PPE – Use N95 or Higher Respirator



Acceptable Alternative PPE – Use Facemask



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Attachment B:

Response to Novel Pathogen Public Health Crisis: N95 Decontamination Process

Because COVID-19 pathogens can live up to 72 hours on an N95 mask, per CDC recommendations, ARH will extend reuse of N95 masks in a cyclical manner for decontaminating process of N95. Process is as follows:

Always wear a full face shield or goggles for eye protection and to protect N95 mask.

- Frontline HCWs will receive a quantity of five (5) N95 masks and (5) paper bags. Place your name on the strap of each mask.
- Each mask will be placed in a separate paper bag, each bag to be labeled #1-5. Also, label each bag with your name.
- On your first day of work, use the mask labeled #1 in all Aerosol Generating Procedures for the duration of your shift. At the end of the workday, place your mask back in the bag labeled #1.
- On your next day of work, use mask labeled #2. You will continue the same process as outlined above until you have used all masks labeled #1-5.
- Mask/bag labeled #1 can be worn only after day 5 of mask usage.
- Masks will be stored in paper bags and stored in the appropriate areas according to your supervisor's instructions.
- Avoid touching the inside of the respirator and use clean gloves when donning a used N95 respirator and performing a user seal check. **Always do hand hygiene before and after touching any PPE around your face**
- **Always inspect mask for damages, seal check, ability to breathe through prior to wearing. If at any point mask becomes damaged, soiled, and hard to breathe through discard the mask and get a new one.**
- **Any N95 mask wore during an aerosol generating procedure is to be removed after the procedure and placed in a paper bag for decontamination period.**

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Attachment C:

Cloth face coverings should be washed after each use.

- How to Clean

Washing Machine

- You can include your face covering with your regular laundry.
- Use regular laundry detergent and the warmest appropriate water setting for the cloth used to make the face covering.

Washing by Hand

- Prepare a bleach solution by mixing:
 - 5 tablespoons (1/3rd cup) household bleach per gallon of room temperature water or
 - 4 teaspoons household bleach per quart of room temperature water
- Check the label to see if your bleach is intended for disinfection. Some bleach products, such as those designed for safe use on colored clothing, may not be suitable for disinfection. Ensure the bleach product is not past its expiration date. Never mix household bleach with ammonia or any other cleanser.
- Soak the face covering in the bleach solution for 5 minutes.
- Rinse thoroughly with cool or room temperature water.

Make sure to completely dry cloth face covering after washing.

- How to Dry

Dryer

- Use the highest heat setting and leave in the dryer until completely dry

Air Dry

- Lay flat and allow to completely dry. If possible, place the cloth face covering in direct sunlight.