

CORONAVIRUS (COVID-19)

COVID Update 4

19 April 2020



Key Update: PPE Supply Update COVID-19

There has been a lot of media reports recently regarding availability of PPE specifically gowns in the hospital setting. PPE is designed for staff protection, but it is important to note that the level of protection provided is dependent on the outcome of a thorough risk assessment in relation to the type of hazard, including the routes of transmission and the activity being performed.

For EEAST we do not use the gowns reported in the media and have confirmed stock, which is reviewed daily, for the next 72 hours.

Please continue to use our PPE stocks appropriately and support our colleagues across the NHS.

Our guidance is in line with PHE and the HSE:

- Where level 2 PPE must be worn when providing direct patient contact and decontaminating equipment, that includes plastic aprons
- If there is a significant risk of extensive splashing from blood or other bodily fluids, during AGP, then coveralls should be worn, our Trust uses fluid repellent coverall suits along with other level 3 PPE.
- Protective measures should be undertaken as part of your dynamic risk assessment that can include use of a surgical mask on your patient or considering your position when assessing/treating.
- PPE needs to be used along with other practices for improved effectiveness such as hand hygiene, decontamination and linen disposal.
- For larger, unexpected contamination such as blood splash on your uniform this should be changed as soon as possible.

Background to Gowns:

As per PHE guidance, it is appropriate for long sleeved gowns or coveralls to be worn during high risk procedures and/or in high-risk settings. These settings may include ICU or resuscitation areas, however, ambulance staff conveying a patient into a high-risk area **are not required** to change or upgrade their PPE for the purposes of patient transfer and handover in these environments.

There is little and/or weak evidence to support the use of gowns/coveralls instead of aprons for direct patient contact, unless there is risk of large bodily fluid contamination.

There are pro's and con's to both non-sleeved aprons and gowns/coveralls, which is why the risk of gross contamination is a factor in the choice to use an apron. Evidence suggests that contamination of a healthcare worker can occur during the doffing process. As highlighted by the HSE, gowns/coveralls are more difficult to doff, potentially increasing risk of contamination post patient contact/conveyance, whilst providing only marginally more uniform cover.

References:

<https://www.hse.gov.uk/news/assets/docs/face-mask-equivalence-aprons-gown-eye-protection.pdf>

<https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control/covid-19-personal-protective-equipment-ppe#summary-of-ppe-recommendations-for-health-and-social-care-workers>