

ction

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PPE compliance: Monthly Audit Tool for Care Homes (Putting on and removing PPE)

- This Audit Tool should be used as a monthly rolling programme of audit of compliance with your PPE (Personal protective equipment) Policy. All staff should be assessed for putting on and removing PPE on at least an annual basis.
- All columns should be completed.
- Where possible, staff should be observed putting on and removing PPE in clinical situations.
- In the event of non-compliance, action plans should be produced and reviewed regularly.
- Completed audit tools should be kept locally for good practice assurance and as evidence for CQC inspections.

Personal protective equipment is one of the 'Standard infection control precautions'. PPE is worn to protect residents and staff to help prevent the risk of transmission of microorganisms when providing care, contamination of uniforms or clothing and contamination of the skin or mucous membranes, e.g. eyes, nose, mouth.

It is the responsibility of employers to ensure that the correct PPE is available. Staff are responsible to ensure that they wear the correct PPE.

| Name of assessor | Jol | ob title | |
|-------------------------------|-----|----------|--|
| Name of person being assessed | Jol | ob title | |
| Date of assessment | | | |

| Question | | Yes | No | N/A | Comment |
|----------|---|-----|----|-----|---------|
| 1. | Staff member is 'Bare below the elbows'. | | | | |
| 2. | Staff member can risk assess and identify the appropriate PPE to be worn: a) When there is a risk of contact with blood and/or body fluids (apron, gloves, and facial protection if risk of splashing)* b) When the resident has a confirmed or suspected infection (apron, gloves, and facial protection if droplet or airborne transmission)* c) When handling used and infected linen (apron, gloves, if risk of exposure to blood and/or body fluid or the resident has a confirmed or suspected infection, and facial protection if risk of splashing)* d) When cleaning a commode and/or commode pan (apron, gloves, and facial protection if risk of splashing)* | | | | |
| | * Note: When caring for residents in relation to COVID-19 or other emerging infections, any additional PPE advised in national guidance should be worn. | | | | |
| 3. | Staff member can identify the correct use of aprons applicable to their role. Carer: WHITE for clinical duties, e.g. personal hygiene, bed making GREEN for serving food and drinks Housekeeper/cleaner: In line with the 'National colour coding scheme for cleaning materials and equipment' (for aprons): RED for sluice, bathrooms, toilets, showers, basins and bathroom floors BLUE for general areas including lounges, offices, corridors and bedrooms GREEN for kitchen areas and food storage areas YELLOW for bedrooms when someone has an infection and is isolated in their own room | | | | |
| 4. | Staff member can demonstrate or describe the correct procedure and order for putting on PPE after risk assessing the task, i.e. 1. Wash hands or apply alcohol handrub, 2. Apply apron, 3. Apply face mask if required, 4. Apply eye protection if required, 5. Apply gloves. | | | | |
| 5. | Staff member can demonstrate or describe the correct procedure and order for removing PPE, i.e. 1. Remove gloves, 2. Remove apron, 3. Remove eye protection, 4. Remove face mask, 5. Clean hands. | | | | |
| 6. | Staff uniform or workwear is clean and fit for purpose. | | | | |
| 7. | Footwear is well maintained, visibly clean, non-slip and supports and covers the entire foot to avoid contamination. | | | | |
| 8. | Staff member can describe how to clean and disinfect reusable PPE, e.g. safety glasses, visor. | | | | |

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