



<p>Team Name: Infection Prevention &amp; Control</p> <p>Team Lead: Director – Staff Development, Infection Prevention &amp; Control</p> <p>Approved by: Regional Lead – Acute Care &amp; Chief Nursing Officer</p>	<p>Reference Number: CLI.8011.PR.001</p> <p>Program Area: Infection Prevention &amp; Control</p> <p>Policy Section: Infection Prevention &amp; Control</p>
<p>Issue Date: May 3, 2021</p> <p>Review Date:</p> <p>Revision Date:</p>	<p>Subject: Personal Protective Equipment (PPE) Observer</p>

*Use of pre-printed documents: Users are to refer to the electronic version of this document located on the Southern Health-Santé Sud Health Provider Site to ensure the most current document is consulted.*

**PROCEDURE SUBJECT:**

Personal Protective Equipment (PPE) Observer

**PURPOSE:**

A PPE observer is a health care worker (HCW) selected and trained as a champion to observe and provide feedback to other members of the health care team as they are donning and doffing PPE. This role is intended to be part of a culture of safety and continuous quality improvement in infection prevention & control (IP&C) routine practices and additional precautions.

**DEFINITIONS:**

**Patient:** The term patient will include those receiving health care, including patients, clients and residents.

**Point-of-care:** Refers to the place where a patient receives health care from a health care worker (HCW) or other staff. Point-of-care incorporates three elements that occur together: the patient, the HCW and an interaction that could result in transmission of an infectious agent.

**Point of Care Risk Assessment** - A Point of Care Risk Assessment (PCRA) is an assessment to be performed before each interaction with each patient to ensure appropriate measures are used for providing safe care (i.e. Routine Practices and if necessary, Additional Precautions).

**Donning:** Putting on PPE

**Doffing:** Taking off PPE

**Hand hygiene:** A general term referring to any action of hand cleaning. Hand hygiene relates to the removal of visible soil and removal or killing of transient microorganisms from the hands. Hand hygiene may be accomplished using an alcohol based hand rub (ABHR) or soap and running water. Hand hygiene includes surgical hand antisepsis.

**Routine Practices:** The system of infection prevention and control practices to be used with all patients during all care to prevent and control transmission of microorganisms in all health care settings.

**Additional Precautions:** These are additional measures implemented when Routine Practices alone may not interrupt transmission of an infectious agent. They are used in addition to Routine Practices (not in place of) and are initiated based on condition and clinical presentation (syndrome) and on specific etiology (diagnosis).

#### **IMPORTANT POINTS TO CONSIDER:**

- PPE for the appropriate application of Routine Practices may include:
  - Gloves
  - Gowns
  - Facial protection:
    - Masks (procedure or surgical)
    - Eye protection (safety glasses or face shields)
    - Masks with visor attachment
- Hand hygiene:
  - Is critical for safety and a good method of pacing the donning and doffing process
  - With correctly applied alcohol-based hand rub (ABHR) kills germs in seconds
  - Done correctly with soap and water physically remove germs
- A HCW acting in a PPE observer role will not be delivering care directly to patients, but instead focuses on ensuring the safety of staff.
- A PPE observer:
  - Ensures infection prevention and control measures are followed and guides other members of the health care team as they don and doff PPE at patient point of care and other environments requiring additional precautions
  - Is knowledgeable about all PPE guidelines and correct donning and doffing procedures, including extended wear, management and disposal of used PPE
  - Is knowledgeable about the exposure management plan in the event of an unintentional break in procedure
  - Assists staff with practising point of care risk assessments
  - Monitors HCW interactions in the care environment for adherence to infection prevention and control measures and HCW fatigue which may lead to PPE breaches
  - Provides interactive guidance, education and constructive feedback to team members using supportive and encouraging communication

- PPE observer training (maximum 3 hours):
  - To include regional and provincial infection prevention and control PPE learning resources
  - To include an opportunity for practicing interactive observation, supportive/constructive communication and return demonstrations for donning and doffing PPE

## **PROCEDURE:**

### **Facility Leadership Role:**

- Select 2-3 HCWs per unit; maximum 5 HCWs per site to be trained as PPE observers
- Consider staff who:
  - Will be available during various shifts (days, evenings, and nights)
  - Understand basic principles of infection control and organism transmission
  - Have demonstrated critical thinking abilities, as well as the ability to provide appropriate guidance (think clearly and remain calm) at a fast pace and during stressful situations
  - Have demonstrated high attention to detail
- Ensure HCWs complete PPE observer training and maintain PPE observer competency
- Establish process for PPE observers to conduct and document at least 2 PPE observations per month
- Consider that observations occur on all shifts (days, evenings, nights, weekends)
- Consider increasing the frequency of observations during periods of outbreak
- Monitor the SH-SS Personal Protective Equipment (PPE) Observation Log (CLI.8011.PR.001.FORM.01) regarding action for staff follow up and education

### **PPE Observer Role:**

#### **1. Prepare for Observation**

- The physical space should be set up with safety as top priority.
- Survey donning & doffing areas.
- Conduct a risk assessment for factors that may lead to worker exposure to contaminants.
- Have a SH-SS Personal Protective Equipment (PPE) Donning and Doffing Observation Guide (CLI.8011.PR.001.SD.01) ready to use.

#### **2. Pre-Donning Briefing**

- Establish role clarity with HCW being observed; explain role is to help guide him/her through safe PPE donning/doffing.
- Provide suggestions to help staff identify and avoid potential protocol breaches.
- Ensure the correct equipment, supplies and people are present and everyone knows the process before beginning the task.
- Explain that interactive communication will occur throughout observation.
- Consider using red flag words (easy phrases that require everyone to stop and pay attention) for situations such as a breach in protocol.

### **3. Donning**

- Guide HCW according to Personal Protective Equipment (PPE) Donning and Doffing Observation Guide (CLI.8011.PR.001.SD.01).
- Identify breaches of protocol and possible points of contamination (for example-jewelry or cell phone).
- Use closed-loop communication to provide feedback (e.g., whenever you need to give direction have the healthcare worker repeat the command back, so there are no misunderstandings).
- Since donning PPE is considered a clean process, assistance can be provided to HCW as necessary.
- Continually scan HCW's PPE and the environment for possible contamination risks.

### **4. Pre-Doffing Preparation & Briefing**

- Maintain awareness of the situation and anticipate needs.
- Scan doffing area without entering.
- Ensure an appropriately maintained and not over-filled laundry bag and/or waste container is available.
- All other equipment and supplies necessary for doffing should also be available and in good working order (e.g., a table area for cleaning of equipment).
- The doffing process begins when it is recognized that HCW needs to exit the patient care space or zone.
- Remind HCW to wait for your instructions before beginning the doffing protocol.
- Remind HCW not to touch any other exposed body parts during the process.
- Review the order and activities on the PPE Donning and Doffing Observation Guide.

### **5. Doffing**

- Remember not to physically assist HCW after they have had contact with an isolated patient or patient environment.
- Use the Personal Protective Equipment (PPE) Donning and Doffing Observation Guide (CLI.8011.PR.001.SD.01) to provide step-by-step instructions.
- Use closed-loop communication throughout the process.
- Have a post exposure plan in place in case there is a PPE breach while providing care (e.g., notifying supervisor or designate and seeking Occupational Health screening).

### **6. Summary & Questions**

- Review learning opportunities.
- Answer questions.
- Involve other team members in follow up as necessary (e.g., supervisor or designate, educator).

### **7. Documentation**

- Record observation on SH-SS Personal Protective Equipment (PPE) Observation Log (CLI.8011.PR.001.FORM.01).

**SUPPORTING DOCUMENTS:**

[CLI.8011.PR.001.SD.01](#) SH-SS Personal Protective Equipment (PPE) Donning and Doffing Observation Guide

[CLI.8011.PR.001.FORM.01](#) Personal Protective Equipment (PPE) Observation Log  
Log

**REFERENCES:**

<https://sharedhealthmb.ca/files/covid-19-ppe-observer-training.pdf>

<https://sharedhealthmb.ca/files/covid-19-ppe-donning-doffing-checklist.pdf>

<https://sharedhealthmb.ca/files/covid-19-ppe-observer-reference.pdf>

<https://sharedhealthmb.ca/files/ppe-provincial-requirements-faqs.pdf>

<https://www.gov.mb.ca/health/publichealth/cdc/docs/ipc/rpap.pdf>

<https://sharedhealthmb.ca/files/routine-practices-protocol.pdf>

[CLI.8011.PL.001 Hand-Hygiene-Policy](#)