

PPE use in Mental Health wards

This is a brief update to clarify the appropriate use of PPE in MH inpatient units. This guidance has been approved by NHS GG&C Infection Control. It is based on national infection prevention and control guidance, [available here](#) and last updated on 17.4.20.

There are four scenarios:

1. Working in an inpatient area with suspected (symptomatic) or confirmed cases – direct patient care (**within 2 metres**)
2. Working in an inpatient area with suspected (symptomatic) or confirmed cases (**not within 2 metres**)
3. Working with “people defined on medical grounds as extremely vulnerable from COVID-19” who require “shielding”– definitions available [here](#).
4. Working in an inpatient area without COVID-positive patients or suspected patients

That guidance can be summarised in the table below:

	Working on a ward with confirmed or suspected cases, and patients with “extreme medical vulnerability”	Working on a ward with no COVID cases
Direct care <2m	<p>Single use apron & gloves for episodes of direct care.</p> <p>Sessional use of fluid resistant surgical mask (FRSM) and eye protection.</p>	<p>Single-use gloves and apron as per usual care.</p> <p>Sessional use of FRS mask Risk assess sessional use of eye protection.</p>
Other care >2m	<p>Sessional use of FRS mask. Risk assess sessional use of eye protection.</p>	<p>Sessional use of FRS mask. Risk assess sessional use of eye protection.</p>

Please note:

- **NEW GUIDANCE**
Where patients are able to use them appropriately, they should be encouraged to wear face masks when in contact with other staff or patients, i.e. unless on their own in a single room.
- Staff should ensure that they are aware of PPE donning and doffing guidance available at [NHSGGC : Infection Prevention and Control](#) and watched the video at - https://www.youtube.com/watch?v=kKz_vNGsNhc&feature=youtu.be
- Once patients are ready for discharge from MH inpatient care, they can return home even if COVID-positive. They should implement self-isolation practices at home.

PPE use when performing CPR in COVID positive/suspected patients

1. Chest compressions and defibrillation as part of resuscitation are not considered Aerosol Generating Procedures (AGPs).
2. [First Responders](#) are required to don a fluid-resistant surgical mask and visor (and should also use gloves and aprons) prior to starting chest compressions and defibrillation. This equipment will be available on the resuscitation trolley.
3. First and subsequent responders should ONLY carry out chest compressions and/or defibrillation while wearing this equipment. No more intensive treatment should be undertaken with this level of PPE (e.g. using an airway, bag and mask is not appropriate).
4. First responders should maintain care until the arrival of second responders with [full respiratory protection](#). They will either be:
 - Paramedic/ambulance staff, or
 - Clinicians who have been **fitted** with and **trained** in the use of a Filtering Face Piece (FFP) Respirator
5. Only subsequent responders who attend wearing full respiratory PPE will be able to undertake any airway manoeuvres. In these circumstances, first responders need to leave the room and only return with full respiratory PPE.