POLICY ON THE PROVISION & USE OF PERSONAL PROTECTIVE EQUIPMENT

August 2017

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1. Policy Statement

NHS Greater Glasgow & Clyde (NHSGG&C) attaches the greatest importance to the health, safety and well-being of its employees and all other persons liable to be affected by its activities.

NHSGG&C will take all reasonable steps to ensure the safety of all employees. Where necessary, following appropriate risk assessments being carried out, the organisation will provide suitable and effective Personal Protective Equipment (PPE). NHSGG&C will liaise with suppliers to ensure that all PPE is to a relevant standard and will inform and train employees on the safe use of PPE.

Where the use of PPE has been identified as an appropriate control measure through risk assessment, then it is the duty of staff to appropriately use the PPE as provided. If employees have any problems relating to the use of PPE, they should immediately inform their Line Manager or Head of Department so that steps can be taken to promptly address the situation.

NHSGG&C will, in consultation with staff representatives:

a) assess the provision and use of PPE which will include the assessment of its provision in the hierarchy of controls for example within The Control of Substances Hazardous to Health Regulations. (COSHH), Noise at Work Regulations.

b) carry out an assessment of how the use of PPE affects staff whilst wearing the PPE

c) take all reasonable steps to minimise the risks found from these assessments.
NHSGG&C will give information, instruction and training necessary to ensure the health and safety of all users of PPE.

The storage, cleaning, inspection and maintenance of PPE will be carried out in accordance with manufacturers recommendations.

2. **Scope of Policy Implementation**

This policy is written in support of the general statements and principles as set out in the NHSGG&C Health and Safety Policy.


3. **Roles and Responsibilities**

The framework of accountability and responsibility for managers and staff on the implementation of this policy follows that laid out within the Health and Safety Policy.

It is the responsibility of Health & Safety Management Manual Holders, Local Managers and Head of Departments to ensure that actions are in place to guarantee the implementation of the policy.

It is the Responsibility of all staff to appropriately use any PPE provided based on need following a suitable and sufficient risk assessment.

This policy cannot be read in isolation. Other Board policies give specific guidance and instruction on the appropriate selection and use of PPE. Examples would be COSHH Policy, Infection Control Manual / Guidance.

Specific advice can also be sought from specialist advisors within the Health and Safety Service, Occupational Health and Prevention and Control of Infection.

Specific Actions:

1. PPE must be suitable for the ways in which it will be used (by design, construction) and used only for that purpose.

2. PPE must be selected to suit work conditions.

3. It is the responsibility of employees who have been provided with PPE to wear it at all times when engaged in the work requiring the use of PPE.

4. Employees may only be allowed to undertake work activities requiring the use of PPE when adequate information, instruction, training and supervision has been provided. This should be identified via KSF and PDP processes and appropriately recorded. Any necessary update refresher training should be handled in a similar fashion and should be part of the Training Needs Analysis section of the appropriate Health and Safety Management Manual.
5. Employees must immediately report to their line manager when PPE is not fit for purpose, either through wear and tear or failure to fit properly. Near miss incidents/actual incidents involving PPE should also be reported utilising Datix.

6. Employees must report to line management where health concerns may impact on the selection of PPE. Occupational Health Services should be contacted in relation to any health concerns raised by the employee. Reference should be made to NHS Health Surveillance Policy –add link

4. Personal Protective Equipment - Definition

*Personal Protective Equipment at Work Regulations 1992 (as amended)*

In this policy PPE means “all equipment (including clothing affording protection against the weather) which is intended to be worn or held by a person at work and which protects him against one or more risks to his health or safety, and any additional or accessory designed to meet that objective.”

Uniforms are not classed as PPE.

Clothing provided solely for food hygiene is not classed as PPE.

5. Maintenance, replacement and record keeping.

It is the responsibility of Health & Safety Management Manual Holders/local managers to ensure that there is an adequate provision of PPE in both type, size and stock. That PPE is maintained (including replaced or cleaned as appropriate), in an efficient state, efficient working order and in good repair.

Written records regarding PPE are only required if the selection or maintenance of the PPE is complex e.g. when using respirators which require regular replacement of canisters. Maintenance free [disposable] PPE does not require written records of use.

6. Safety Action / Hazard Notices

NHSGG&C operates a centrally controlled distribution network for Safety Action and Hazard Notices. Key posts have been identified within the organisation to receive the notices and to decide on further local actions as required. On occasion these notices may refer to PPE and if so local assessments would need to be reviewed to reflect any new information. The Safety Action Notice Policy is available [here](#).

7. Risk Assessment

Before selecting PPE for any task a risk assessment of the task and any health and safety hazards which it may present must be undertaken by a competent person i.e someone
who has received training in NHSGGC Risk assessment Policy, processes and use of the approved documentation.

PPE is only required if the risks cannot be reduced by other means, such as by the following control measures:

1) Using a substance which is less hazardous.
2) Engineering solution (for example, use of Local Exhaust Ventilation to remove harmful biological agents, to remove dust from a workshop or nail dust from Podiatry Clinic or reduce chemical concentrations in the air).
3) Looking at alternative methods of carrying out the task. Is the present method definitely the only way?

On occasions use of PPE will be the appropriate method e.g.

1) To supplement other measures and reduce the likelihood of harm.
2) When carrying out an emergency procedure e.g. when clearing up a blood or chemical spillage.
3) When carrying out a task of short term duration e.g. when performing venepuncture.

As PPE is the last resort after all other control measures have been taken into account, it is important to ensure that users wear PPE at all times when carrying out the task (that has identified the use of PPE as a control).

Some examples of when PPE may be required follow:

7.1 HEAD PROTECTION (e.g. helmets, bump caps)
   a) Construction and building sites especially where work at height is taking place i.e. Roof work, scaffolding etc.
   b) Underground work including working in trenches, ducting and low ceiling areas.

7.2 EYE PROTECTION (e.g. visors, goggles)
   a) Working with abrasive wheels or any machinery likely to eject particles e.g. orthotic workshop or engineer's workshop.
   b) During welding operations.
   c) Handling corrosive or irritant hazardous chemical substances.
   d) Radiation
   e) body fluids (for example, spitting from patients)

7.3 HAND/WRIST/ARM PROTECTION (e.g. gloves, gauntlets)
   a) Where there is a risk of dermatitis or damage to skin tissues e.g. handling chemicals, hot surfaces.
b] Where there is a risk of cuts, abrasions or exposure to infection. The Infection Control PPE manual should be used to determine the use of a particular type of glove, from the range available.

c] Where articles maybe hot, cold or sharp e.g. in hospital kitchens.

d] Where there is a risk of electrical shock, e.g. during maintenance work.

e] During outdoor work, e.g. grounds maintenance.

7.4 RESPIRATORY PROTECTION e.g. (disposable respirators)

a] Where there is a risk of dust, fibres, contaminated air e.g. nail dust in Podiatry surgery, and grinding activities.

b] Where there is a risk of contamination by gases or vapours

c] Where there is a risk of oxygen deficiency when full line breathing apparatus should be used.

d] Where there is a risk of contact with airborne biological hazards e.g. aerosol generating procedures on patients with H1N1

7.5 FOOT PROTECTION (e.g. toe or mid sole protection)

a] To prevent injury from falling objects e.g. stores and portering staff.

b] when working with sharps or industrial equipment

7.6 BODY PROTECTION (e.g. body warmer, high viz tabard)

a] Warm clothing when working outdoors in low temperatures or in a coldstore.

b] Cut resistant clothing when using butcher's knives.

c] High visibility clothing when working near traffic e.g. on or near roadways, including within hospital grounds.

d] Lead coats and other forms of Radiation Protection equipment

The above list contains examples only and is not exhaustive. Appendix 1 provides a list of considerations that should be reviewed before PPE is provided.

8. Respiratory Protective Equipment (RPE)

8.1 Guidance Notes

The inhalation of harmful dusts, mists, fumes, gases, vapours, etc. is recognised as a major health hazard in today’s working environment. It is important that we remember that
Respiratory Protective Equipment is the last line of defence and should not be considered unless the possibilities of engineering out or substituting the material involved are considered first.

Employees working in jobs were they may be at risk from an airborne contaminant[s] should be provided with the appropriate type of RPE. The type of protection provided should meet the relevant EN Standard for that device and should be suitable for the job/environment.

It is the duty of employees who have been provided with RPE to wear it at all times when engaged in the work requiring RPE to be used.

N.B. Advice

The selection and use of RPE is a complicated subject so it is important that problems associated with dust, mist, fumes, gases, vapours and oxygen deficiency should be referred to the Occupational Hygienist within the Health and Safety Service who will provide guidance on specific problems or on activities not covered in these guidelines.

- AcuteHealthSafety.North@ggc.scot.nhs.uk
- AcuteHealthSafety.SouthAndClyde@ggc.scot.nhs.uk
- Health&Safety.Facilities@ggc.scot.nhs.uk
- HealthandSafety.Partnerships@ggc.scot.nhs.uk

8.2 Selection Of Respiratory Protective Equipment

Before consideration can be given to the selection of the correct RPE, an assessment should be made of the workplace, to identify the materials present, if they are hazardous, and what their potential health effects are.

From this an estimate of the potential levels of contaminant should be made, usually by monitoring the employee’s exposure (seek guidance from Occupational Hygienist) Levels at the workplace should be compared with published acceptable levels, Workplace Exposure limits (WEL). (Consider providing info on where to access WEL) If the exposure is over the WEL, then control measures must be introduced to reduce employee exposure. RPE may be considered as one of the methods of controlling an individual’s exposure.

If a material has a WEL the employee must not, under any circumstances, be exposed to levels above the WEL. A WEL is the maximum concentration, averaged over a reference period, which may be hazardous by inhalation.

Employers must take all reasonable precautions to ensure exposure is kept as far below the WEL as is practicable.

RPE works on one of two basic principals, either:

1. filtering out contaminants from the contaminated air, or
2. by supplying air from uncontaminated source.

The EN standard sets out the performance limits and details the information that must be supplied to the user.

Once a device is correctly selected, consideration must be given to the proper introduction to its users. They must be given adequate education on its use and the hazards it will protect against. Instruction should also be given to ensure that the device is fitted in accordance with the manufacturer’s instructions. It would therefore be advisable to consider suppliers who supply adequate training in the proper use and care.
Appendix 1

CHECKLIST
When considering the use of PPE the checklist given below should be considered. These points are provided to assist in the completion of a suitable and sufficient risk assessment and not as an alternative.

- Is it appropriate for the task? 
  YES / NO
- Is it of the right type? 
  YES / NO
- It is comfortable enough? 
  YES / NO
- Does it impair visibility or communication? 
  YES / NO
- Does it interfere with the wearing of other PPE? 
  YES / NO
- Does it fit - Is the size right? 
  YES / NO
- Has adequate training been given on its use? 
  YES / NO
- Is it inspected for wear and tear? 
  YES / NO
- Is it properly maintained? 
  YES / NO
- Is there suitable storage when not in use? 
  YES / NO
- Are there procedures for reporting losses or defects? 
  YES / NO
- Have staff been involved in the selection of the PPE? 
  YES / NO
- Is PPE required under any specific risk assessment e.g. COSHH, IRR 99 (Radiation Regs), Control of Infection. If so refer to it for guidance. 
  YES / NO