

Personal Protective Equipment (PPE) Policy

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Ownership	Director of Estates and Facilities Management
Policy contact	Head of Health and Safety
Approval	Health and Safety Committee
Protective Marking	Public
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1 Introduction

- 1.1 There is a statutory requirement under the Personal Protective Equipment at Work Regulations 1992 (as amended 2002) for personal protective equipment (PPE) to be supplied and used at work wherever there are risks to health and safety that cannot be adequately controlled in other ways. Safe systems of work, control measures and engineering solutions should be put in place that minimises the use of PPE. Where PPE is needed it must be the most appropriate for the identified risk and should only be issued where it further reduces the level of risk, PPE is a safeguard of last resort as it only protects the individual wearer.
- 1.2 PPE is '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 individuals against one or more risks to their health or safety. (Regulation 2– PPE Regulations).

2 Purpose

- 2.1 The purpose of this policy is to set out the requirements for the selection, use and maintenance of PPE. It provides information and advice on the different types of PPE available as well as establishing procedures to minimise the risk of staff to latex allergy and dermatitis through the selection and use of gloves.

3 Scope

- 3.1 The policy applies to all staff employed by Goldsmiths, University of London and students. It should be noted that some PPE is not covered by the Personal Protective Equipment Regulations; Ear protection is covered under the Control of Noise at Work Regulations 2005 and respiratory protection is covered under the COSHH Regulations 2002 and Confined Spaces Regulations 1997. However, the advice given in this policy is still applicable, as the general principles of selecting and maintaining suitable PPE and training employees in its use are common to all regulations that refer to PPE.
- 3.2 The primary objective of this policy is to ensure that the legal requirements in the provision of PPE are outlined in more general terms.

4 Responsibilities, Accountabilities and Duties

4.1 Council

Council has specific accountability to ensure that responsibilities for Health and Safety, including the provision of suitable PPE are effectively assigned, accepted and managed at all levels in the University consistent with good practice. This duty is delegated to others within the University.

4.2 Senior Management Team

The Senior Management Team have delegated responsibility for the management of Health and Safety, including ensuring that there are suitable and sufficient arrangements and resources for PPE and to ensure this policy is implemented throughout the University. This is further delegated to line managers and supervisors.

4.3 Head of Health and Safety

The Head of Health and Safety will:

- Provide information and advice on PPE
- Follow up on any reported PPE / ill health-related incidents
- Report on any hazards, associated with any particular PPE, coming to light during use

4.4 Managers

Managers will, if required, seek advice from a suitably competent person to ensure any requirements related to PPE are implemented and:

- Conduct a workplace risk assessment to identify all workplace hazards which are of significant risk and review the possibilities of reducing the risks by means other than PPE usage.
- Identify the need for PPE.
- Research manufacturers and supplier's literature and in conjunction and co-operation with users, select suitable and appropriate equipment.
- Provide a suitable quantity with an appropriate stock level being maintained.
- Provide appropriate PPE cleaning arrangements / regimes where applicable.
- Provide all staff with instruction/training in correct usage, identification of wear and tear and any known faults together with any maintenance that may be required.

- Make provision so that users have suitable storage facilities for PPE.
- Audit and inspect PPE on a periodic basis and record the findings.
- Maintain records of issue and receipt for PPE and use PPE Personal Equipment Signature (PES) form for the employee to sign for the receipt of any issued PPE - see Appendix 1.
- As appropriate, ensure signage is posted in those areas where wearing of PPE is compulsory, e.g. Noise zones.
- Monitor any new PPE coming to the market, which may offer improved protection or acceptance to wear.
- Ensure that staff in areas where glove use is required are aware of and comply with the University's requirements for glove use through local induction, information, instruction and training, supervision and audit.
- Maintain adequate supplies of the type of gloves required which are appropriate to the tasks being carried out identified through risk assessment (see Appendix 2).
- Ensure staff are aware of the hazards of latex sensitisation based on the information contained within this policy and glove use (see section 5.5).
- Consideration of visitors to the area and requirement of PPE provision
- Ensure the PPE does not compromise the safety of staff or property when properly maintained and used

4.5 Procurement and Purchase Ledger

The Department is responsible for ensuring a block on any orders for latex gloves and for notifying the relevant department of any orders which have been raised for latex gloves.

4.6 Staff

All University staff will:

- Co-operate with managers in any PPE selection process
- Sign for any issued PPE – see Appendix 1
- Wear/use the PPE correctly
- Carry out PPE maintenance and cleaning where necessary
- Store the PPE correctly
- Check all PPE for damage before use
- Report any defects or wear and tear
- Obtain a replacement for lost or damaged equipment
- Not misuse any PPE issued to them
- Inform managers if they suffer an adverse reaction or sensitivity when using PPE so that advice can be sought from Occupational Health and / or the staff member's GP.
- Report any reactions / incidents related to PPE use via the reporting system.

5 Procedure/Implementation

5.1 What types of PPE are available?

PPE should be regarded as a 'last line of defence' in terms of protecting against risks to health and safety. Although a risk assessment may identify PPE as being necessary, other means of control should be given preference, and wherever possible, PPE must not be relied upon as the sole means of protection.

PPE includes the following when they are worn for the protection of health and safety:

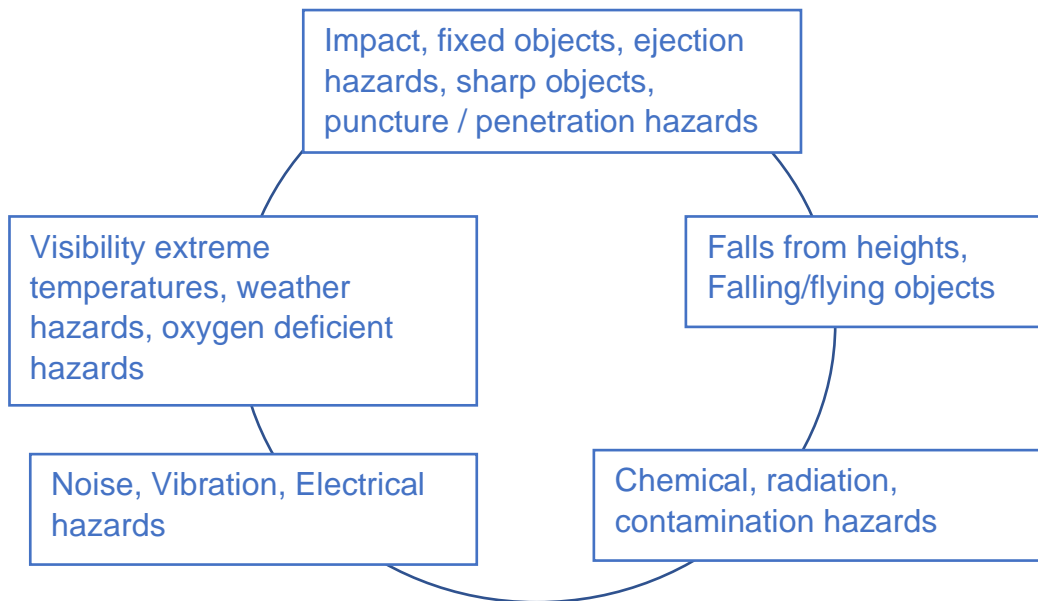
a) Protective clothing, such as:

- Aprons
- Clothing for adverse weather conditions – E.g. Coats, waterproof trousers.
- Gloves – see Appendix 2
- Safety footwear – E.g. With protective toe caps or for electrical hazards.
- Safety helmets
- High visibility vests etc

b) Protective Equipment, such as:

- Eye protectors – safety glasses or goggles
- Respiratory protective equipment (RPE) – ranging from dust masks to breathing apparatus
- Hearing protection – earmuffs and ear plugs
- Safety harnesses

There may be various types of hazards identified in the risk assessments indicating why PPE is required to be worn, such as:



5.2 PPE selection

PPE should be used if the risk assessment identifies it as an appropriate means of controlling exposure to risks, or if local rules stipulate its use. It must be suitable for its intended use. The assessment must take into account:

- The hazard it is intended to protect against
- The task to be undertaken. For example, whether the length of time or physical effort whilst wearing the PPE will be an issue.
- Fit requirements for the individual worker.
- Its compatibility with any other item of PPE to be worn at the same time.
- Whether the health of the person who will be wearing it has been taken into account e.g. Asthmatics.
- Whether wearing PPE increases the risk or creates new risks. E.g. Making communication more difficult.

All PPE must conform to an approved standard. Compliance with the standard is identified in the UK by marking items with the CE kite mark, in accordance with the Personal Protective Equipment Regulations 2002. Only BE/EN Standard equipment that is marked in this way is approved for use by staff.

When assessing whether PPE is suitable, Risk Assessors will need to specify on the risk assessment, what type of PPE should be worn. For

example, nitrile rubber gloves BS EN 374, eye protection to EN 166 34B, not just 'gloves and goggles'.

5.3 PPE limitations

- Effective protection is only achieved by using PPE that is suitable for the hazard which it is supposed to protect against. It must be correctly fitted, maintained and properly used.
- PPE protects only the person wearing it, whereas measures controlling the risks at source can protect everyone in the workplace.
- PPE may restrict the wearer to some extent by limiting mobility, visibility or by requiring additional weight to be carried.
- Some items of PPE have limited life-spans such as respiratory protection and hard hats and therefore these should be recorded as part of the PPE inspection. Expired PPE must be replaced. Information on life spans can be obtained from the manufacturer's guidance which accompanies the PPE.
- Latex gloves can cause skin allergies in some users. Such gloves should not be used in the University.

5.4 PPE storage

PPE must be stored in a location that does not put the equipment at risk of being damaged or contaminated by damp, sunlight or harmful substances such as solvents.

If PPE becomes contaminated it should be stored separately from ordinary clothing and where necessary be labelled.

5.5 Latex allergy and dermatitis

The Health and Safety Executive (HSE) consider that work related dermatitis is a significant cause of work-related ill health, particularly in healthcare working environments. This can include irritant dermatitis due to known sensitiser hazards (substances that may cause an allergy) such as latex.

Latex is a natural product obtained from the Rubber Tree (*Hevea brasiliensis*) that is used in the manufacture of many medical products commonly used in healthcare settings, including gloves. It is recognised as a sensitiser and a substance 'hazardous to health' as defined by the Control of Substances Hazardous to Health 2002 (COSHH) Regulations. Associated health problems include:

- Type 1 Latex Allergy - an immediate hypersensitivity reaction characterised by rash, conjunctivitis, rhinitis, asthma and occasionally difficulty in breathing and life-threatening anaphylaxis.

- Type IV Latex Allergy - rash often developing hours after exposure. It may be due to latex proteins or chemical residues added in latex processing. This reaction predisposes individuals to developing Type 1 allergy.

As a result of knowledge and developments connected with the use of latex gloves these will not be used within the University. Purchasing and Purchase Ledger will therefore place a block to prevent the ordering of any supplies of latex gloves. A range of gloves made from alternative materials is available. Appendix 2 provides details.

Any skin allergies to PPE resulting in dermatitis should be reported using the Incident Reporting System and reported to the Health and Safety Executive (HSE) under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR). Occupational dermatitis is a reportable disease under RIDDOR. Staff reporting skin reactions should be referred to Occupational Health.

6 Training Implications

- 6.1 Suitable training and information should be provided to staff about the correct use and storage of PPE. Records should be kept of PPE issued to staff including training in the correct use of the specific PPE issued. Training should be provided by line managers or supervisors (where they are competent to do so) when any new equipment is issued, except where equipment is replaced with an identical product.

7 Monitoring Arrangements

Area for monitoring	How	Who by	Frequency	Reported to
PPE risk assessments	During health and safety workplace inspections	Managers / Safety Team	In accordance with the inspection regime	Health & Safety Committee
Wearing/non-wearing of PPE	Random checks	Managers	Random	Health & Safety Committee

The correct use of gloves	Observation & audit	All designated managers and Safety Team	Random	Random
Non Latex glove purchasing	Monitoring of orders	Procurement and Purchase Ledger	All designated managers / Heads of Departments	On receipt of latex gloves orders

8 Equality Impact Assessment Screening

- 8.1 The completed Equality Impact Assessment for this Policy has been published: gold.ac.uk/media/docs/estates/PPE-Policy-Equality-Analysis.pdf

9 Links to any associated documents

- 9.1 This policy should be read and implemented in association with the following policies:
- COSHH - Control of Substances Hazardous to Health Guidance
 - Accident Reporting Guidance
 - Procurement Handbook

10 References

- Control of Substances Hazardous to Health Regulations 2002 (as amended)
- Control of Noise at Work Regulations 2005
- The Personal Protective Equipment at Work Regulations 1992
- The Personal Protective Equipment Regulations 2002
- Confined Spaces Regulations 1997
- The Reporting of Injuries Diseases and Dangerous Occurrences Regulations 2013

11 Appendices

Appendix 1 PPE Personal Equipment Signature (PES) Form

Appendix 2 Glove Materials

Document history

Version	Date	Details	Author	Approved
1.0	26 June 2020	First Version	Jeanette Batten	Not approved

LOCAL PERSONAL PROTECTIVE EQUIPMENT SIGNATURE (PES) FORM

(To be completed on receipt or on first day of employment, to be held in personnel file or PPE file.)

PLEASE USE BLOCK CAPITALS

Name.....

Post.....Department.....

In accordance with the PPE Policy this local form is to be signed to acknowledge that I (the above named) have been afforded the provision, recording of issue, training, storage location and process for maintenance and disposal of PPE.

The form applies to all staff who are employed in a role which may require the issue of PPE and covers all PPE, which includes:

PPE	Issued	Training		Stored	Maint/Di sp	Size	Remarks
Hearing Protection							
Eye Protection							
Head Protection							
Gloves							
Aprons							
Clothing							
Footwear							
Respirators							
Special to role PPE							

This form is to be used in conjunction with risk assessments identifying all activities carried out by staff where PPE is required.

Signed _____ Dated _____

GLOVE MATERIALS

All examination gloves are single use only and as such must be discarded after use. Examination gloves must not be washed between use as damage may go undetected.

Some gloves, usually used outside of clinical settings, are designed to be re-used. For example, more robust rubber gloves used for domestic or catering activities or leather or textile gloves used in maintenance or gardening activities. Rubber gloves should be checked before use for discolouration, cracking or damage and disposed of if damaged or contaminated on the inside. These types of rubber gloves should be washed after use to remove decontamination. Alcohol hand gel / rub must not be used to decontaminate rubber or gloves

All gloves have a use by date and this must be checked prior to the use of gloves. Gloves that have gone beyond their use by date must be disposed of and not used.

The glove of first choice will be non-latex.

SYNTHETIC RUBBER

The most commonly used type is nitrile. Nitrile is the accepted material choice for gloves used in healthcare due to the strength barrier properties. A concern for many years has been the risk of impaired dexterity due to muscle fatigue where gloves are worn for a prolonged period of time but the stretch ability of these gloves has continued to be improved by manufacturers. Residual accelerants in nitrile or other synthetic rubbers may also cause Type IV allergic response in some wearers, although accelerator free gloves are now available. Accelerators are the chemicals used in the glove manufacturing process to help make gloves more durable and elastic. Unfortunately, chemical accelerators are also some of the most common causes of allergic reactions.

LATEX – only to be used in exceptional circumstances

Natural rubber latex (NRL) provides excellent protection against blood borne viruses which for many years has made it the material of choice for gloves when dealing with blood and blood stained body fluids.

The use of latex gloves in healthcare and therefore staff exposure to NRL has increased since the mid 1980's. Although allergy to natural NRL remains rare it can produce reactions ranging from non-allergenic irritation to allergy which is a key disadvantage.

There will be areas of healthcare where it continues to be appropriate to use NRL gloves, mainly where invasive surgery takes place. In such circumstances a risk assessment would be required to indicate the choice of glove.

VINYL

Vinyl gloves are looser fitting than either Nitrile or NRL but due to degradation with use they have a higher leakage rate and therefore a greater risk of skin contamination. It should also be noted disposal of vinyl gloves by incineration can lead to pollution through release of toxins.

POLYTHENE

Only used in catering.

GLOVE SELECTION

Glove selection is to be decided based on a risk assessment of the activities to be undertaken. Five areas should be considered:

1. Substance(s) being handled
2. Other hand hazards. Eg. Risk of puncture wounds or cuts.
3. Type and duration of contact. Eg. Worn for long periods or intermittently?
4. The wearer in terms of size and comfort
5. The task and how robust the glove needs to be. (HSE, 2018)

Manufacturers should be able to provide guidance on the best glove for use with a particular hazards.

Glove selection in general clinical settings:

- Non-sterile synthetic rubber e.g. Nitrile gloves should be worn for procedures where there is risk of exposure to blood or body fluids.
- Sterile synthetic rubber e.g. Nitrile gloves should be used for procedures where a sterile field and high barrier protection is required.