Throughout the month of June we have been out and about across the organisation carrying out infection prevention and control (IPC) observational visits, engaging with ambulance staff at Hospital Emergency Departments and ambulance stations. We observed hand hygiene practices, the use of personal protective equipment (PPE), management of waste/linen in the ambulance, cleaning of patient equipment and vehicle cleaning. These observational visits provided us with opportunities to connect with many of you to hear how you are getting on during COVID-19 and discuss any current issues and concerns in relation to infection control.

IPC observational visits provide us with valuable opportunities to engage with many of you during the course of your work, discuss the challenges you face and observe for ourselves how IPC practices are being undertaken to keep everyone safe.

What were the positives associated with the visits?

- Many staff were observed adhering to IPC best practice during interactions with patients, promoting safe and effective care.
- Staff undertook hand hygiene opportunities in line with the World Health Organisation 5 Moments for Hand Hygiene.
- Staff carried out hand hygiene practices in line with 7 steps for hand hygiene, inclusive of bare forearms.
- Staff fingernails were observed to be clean and short with no evidence of false nails/gel nails or nail polish being worn.
- Many staff were bare below the elbow whilst undertaking clinical interventions with patients or when carrying out hand hygiene practices.
- Staff were observed to thoroughly clean and decontaminate patient equipment and the environment (ambulance interior) following patient transfers.
All of the above interventions help to keep our patients, our colleagues, our families and ourselves safe during the course of our work activities. One area of concern that has been identified through these visits was related to the need to wear Level 2 PPE when in direct contact within two metres of ALL patients (unless aerosol generating procedures were being undertaken, in which case Level 3 PPE should be worn). On some occasions there were observations undertaken where staff were not wearing aprons. This was discussed with staff at the time as we wanted to ensure that staff understood the rationale for having to wear an apron.

The primary role of PPE is to protect the user and reduce opportunities for transmission of microorganisms. Disposable aprons provide a physical barrier between the wearer’s uniform and the patient/ environment and should reduce contamination of uniform or clothing. Not wearing a disposable apron potentially exposes an individual to harmful microorganisms when their uniform comes into direct contact with the patient, their surroundings or equipment. We cannot see the microorganisms which reside quite happily on/in people and surfaces, however, they can be a source of transmission of infection.

Level 2 PPE consists of the following:-
• A single use disposable apron;
• A fluid repellent surgical mask;
• Single use disposable gloves; and,
• Where there is potential for splash to your face and mucous membranes – eye/face protection

As the ‘lockdown’ begins to lift, life and work are starting to feel more normal, it is during this time that we may forget the important messages associated with COVID-19. Please remember to keep these key messages at the forefront of your mind, where necessary let’s keep supporting and reminding each other too.

**Keep going with:**
• Hand hygiene which should be extended to the forearms
• Decontamination of the environment and equipment as explained in the NIAS COVID-19 Operational Guidance Document
• Use of PPE – to include aprons for level 2 please!
• Not coming to work if you or a member of your household has any signs or symptoms of COVID-19 and leaving work if you become symptomatic in the work place

If you have any questions about this information please contact the Infection Prevention and Control Team on 07717 781954.