

Personal protective equipment (PPE) operational guidance

To be circulated to all police officers and staff

This guidance gives practical advice on how to maximize the protection of officers, staff and members of the public from COVID-19 while complying with the law.

Explanatory note to accompany **Personal Protective Equipment (PPE) operational guidance: practical scenarios**. Please read in conjunction with this document.

The recommendation in all scenarios is officers have PPE readily available and as a minimum that this is a fluid resistant surgical mask (IIR) and gloves (non-latex).

Leadership

It is imperative that supervisors ensure all their officers and staff have access to sufficient supplies of PPE and that it is used in accordance with this guidance. The threat of infection from COVID-19 remains high and we want everyone to protect themselves and others at all times. Supervisors should lead by example and monitor and check compliance with PPE training, the correct wearing and usage of PPE, following the force Infection Prevention Control Plan. Please note that some officers and staff may be exempt from wearing face coverings in law.

Operational scenarios

1. Double crewing or working in a confined space: In order to reduce the opportunities for asymptomatic, or pre-symptomatic infections between colleagues, or members of the public, a surgical Type IIR face mask should be worn in an enclosed space such as a vehicle or personnel carrier when social distancing cannot be achieved. Gloves (non-latex), apron and goggles should be readily available.
2. General patrol: Forces should triage calls for suspected or confirmed COVID-19 cases to give prior warning re: PPE requirements. This is currently happening in most forces. Officers and staff should expect that they may need to put on (don) PPE quickly in some situations and take reasonable precautions to enable this. **PPE should be 'readily available', for example on the officer's person rather than in the back of the car. Officer safety is paramount in responding to situations but proper consideration should be given to ensure that PPE is not wasted.**
3. Entering premises: On entering premises where there is no prior information or suggestion that those present are suspected or confirmed as having COVID-19 **officers should have PPE 'readily available' capable of being put on (donned) quickly prior to, or upon, entering using the NDM to risk assess each incident.** Officers should be aware that there is the possibility that infected occupants do not know that they are infected.

4. In the circumstance where 'close contact with the public is likely and social distancing is not available and there is a suspected risk of infection, or a person is symptomatic' **officers and staff should wear a fluid resistant surgical mask (IIR), gloves (non latex), disposable aprons, goggles.**
5. In cases of pre-planned activity such as cell extraction, warrants or known hazards associated with a violent person, **a local bespoke COVID NDM risk assessment should be undertaken to inform PPE requirement.**
6. In cases of spontaneous/dynamic COVID related incidents where access to PPE is not available or there is insufficient time to put on (don) PPE:
 - a. Inform a supervisor
 - b. submit a local injury on duty form which will allow H&S to consider a Riddor report and a COVID post incident procedure should follow with consideration of a COVID test through local occupational health.**
 - c. If contact was with a COVID-19 positive person, the Force must contact the local Health Protection Team (HPT)
7. **Stop and search remains an important power in the investigation and prevention of crime.** Uniform and plain clothes officers **should wear surgical mask and gloves**, subject to dynamic risk assessment, when carrying out stop and search activity. Officers must be mindful of how they clearly communicate as this activity will involve close contact with a member of the public who may have been shielding or may be at greater risk of infection from COVID 19. The public might understandably be worried about spread of infection if they are stop and searched so we must ensure strict compliance with hygiene and the wearing of PPE.
8. It is recommended that officers should carry a sufficient supply of clean Type IIR surgical masks to offer to a member of the public, if they do not have a face covering, prior to conducting stop and search procedures and arrest and detention.

Personal protective equipment (PPE) operational guidance: practical scenarios

Hygiene and PPE requirement	Inside duties			External/public facing duties	
	Cleaning of police, stations, cars and equipment	Contact with police colleagues and suppliers – Social distancing available	Social distancing not available – confined space	Contact with the public is likely – but with social distancing measures available	Close contact with the public is likely and social distancing is not available and there is a suspected risk of infection, or a person is symptomatic
Social distancing: first vital step in protection 	2 metres	2 metres	Aspire to achieve 2 metres separation or other physical measures	2 metres	2 metres unless closer contact is essential
Basic hygiene	■ Avoid touching eyes, nose and mouth ■ Wash hands for 20 seconds with soap and hot water and when not available use alcohol based hand sanitiser as often as possible, after incidents, and on return to station				
Fluid resistant surgical mask (IIR) 	 No	 No	 Yes	 No	 Yes
Disposable gloves (non-latex) 	 Yes	 No	Risk assess	 No	 Yes
Disposable aprons 	Risk assess	 No	 No	 No	 Yes
Goggles 	Risk assess	 No	Risk assess	 No	 Yes
Fluid repellent coverall/over-suit 	 No	 No	 No	 No	Risk assess

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Infection Prevention and Control (IPC)

All forces are required to hold an Infection Prevention and Control Plan. This will address three key areas:

1. the safe procedures for putting-on (donning) and taking off (doffing) of PPE
2. the wearing of PPE in specific circumstances – outlined in the this guidance
3. infection prevention in the workplace

Correct application of the force IPC may remove the need for officers to self-isolate after coming in to contact with someone who is COVID-19 positive. The below points outline Infection Protection and Control that all persons in the police service should be adhering to:

- Achieve two metre social distancing where possible. This provides the most effective first line of protection – consider crewing arrangements.
- Think practically – how can I maintain social distancing? Use the NDM when likely to have close contact with a member of the public. What are your alternatives to close contact? Be proactive to protect yourself and others.
- Disinfect the inside of police vehicles thoroughly at the start and end of every shift or with a change of crew – focus on steering wheel, handbrake, door handles, radio, data terminal and seat belt. Avoid touching eyes, nose and mouth. Use only force supplied surface disinfectants. Also take this action immediately after contact with a COVID suspected or COVID positive person.
- Increase cleaning of stations and 24/7 high usage/high footfall areas where officers/staff cannot easily leave their position during a shift – consider enhanced cleaning regime and regularity – use force supplied disinfectant and/or wipes.
- When on inside duty teams – disinfect equipment keyboards, mouse prior to use and at regular intervals throughout a shift using disinfectant and/or wipes provided. Take the initiative – if you think it needs cleaning – protect yourself and colleagues.
- Avoid entering someone's non-police premises unless it is absolutely essential to do so – consider phoning and/or speaking through window/door to maintain social distance.
- Put on and remove PPE using safe undressing, dressing protocols and disposal methods as identified in your safe PPE usage procedures and IPC plan. Officers and staff should be proficient in and follow PHE and equipment manufacturers guidance correctly for **putting on (donning)** and **taking off (doffing)** PPE as part of an infection prevention and control (IPC) protocol. If clothing becomes contaminated this must also be removed following your force advice in your force IPC plan.
- Wash hands with soap and water frequently, and always after wearing PPE, or if not possible due to location, use hand sanitiser. Due to the nature of policing, it is recommended that all officers carry sanitiser on their person at all times.
- Seal potentially contaminated disposable PPE in a double bag and dispose of it immediately in clinical waste (or, if not possible, store securely for 72 hours and dispose of it in normal waste).

- Fluid resistant surgical masks (IIR), FFP2 and FFP3 respirator masks, disposable gloves, aprons, and fluid repellent coveralls are all single use items. Goggles may be cleaned and use repeatedly, unless they are COVID-19 contaminated or suspected to be so.
- Face Shields, Visors and protective spectacles may be provided for certain duties, however they are not appropriate for contact with COVID-19 suspected or COVID-19 confirmed people. Goggles are the only eye protection suitable for these scenarios.

Additional notes

Masks – FFP 2 and 3 are only required in aerosol generating procedures such as invasive medical processes or by local risk assessment, which may include high intensity or prolonged physical contact with a suspect. Masks should be retained as contingency equipment for custody, forensics and DVI. They must be properly fitted to be effective.

Face covering guidance has been produced. Face coverings are not PPE but they are to be worn in specific scenarios. All officers have been provided with face coverings for operational use.

Face coverings are not medical grade masks.

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