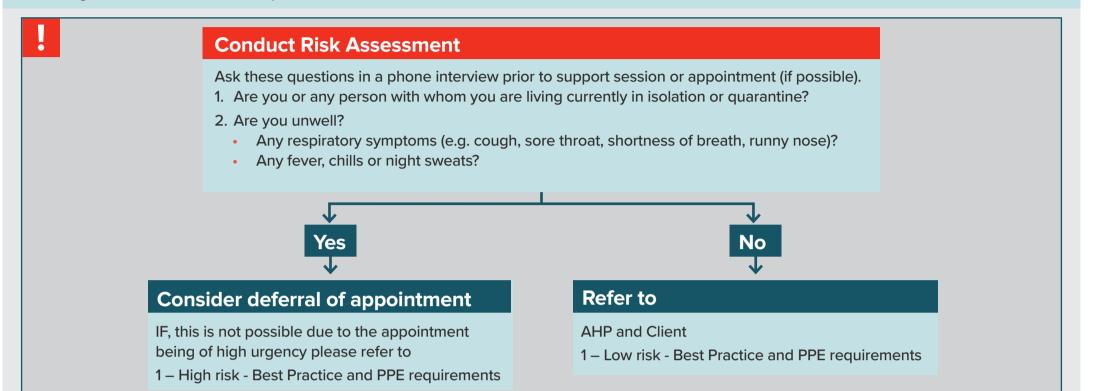
For Allied Health Professionals – in a non-hospital setting

This guide is intended for Allied Health Professionals (AHP) who are required to treat people in a home or community care setting. This is a recommendation only and your specific industry standards for PPE should also be adhered to. Allied Health Professionals in a hospital setting can refer to the COVID_19 Personal Protective Equipment (PPE) Matrix and Infection Control Recommendations. This information is based on the best available evidence consistent with current recommendations from the Australian Government Department of Health and the Communicable Diseases Network Australia (CDNA) Series of National Guidelines. Information is subject to change as national advice is updated.



1 – AHP – High Risk - Best Practice and PPE Requirements

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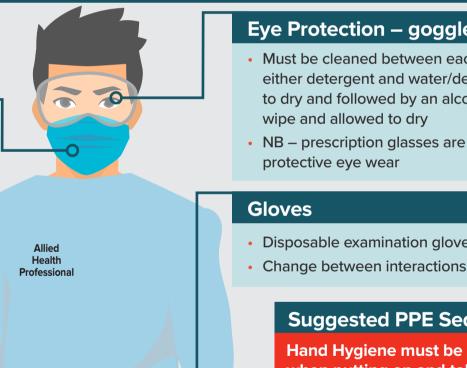
Worker to ensure that they are well and PPE is in place PRIOR to providing their PPE client with PPE.

Surgical Mask

- Change between interactions (one use only)
- Change if soiled, wet, damaged or contaminated (sneezed or coughed on/in)
- Mask must not be left around neck
- Wearers should not touch the front of the mask
- Hand hygiene to be performed upon touching or discarding a used mask

Disposable Gown – Long Sleeve

- Put on the gown so that your front and arms are fully covered and gown opening is at the back
- Fasten ties at the neck and at the back



Eye Protection – goggles or face shield

- Must be cleaned between each interaction with either detergent and water/detergent wipe, allowed to dry and followed by an alcohol or disinfectant
- NB prescription glasses are not considered
- Disposable examination gloves
- Change between interactions (single use only)

Suggested PPE Sequence*

Hand Hygiene must be performed when putting on and taking off PPE.

Putting on PPE Taking off PPE

1 Hand hygiene Gloves

- Tuck gown cuffs under gloves
- Dispose of gown between interactions (single use only)

Waste

Waste, including PPE, generated during the course of clinical care should be disposed of as clinical waste. All non-visibly soiled PPE (e.g. no blood, faeces or body fluids) not used in the course of clinical care, can be bagged and discarded into general waste.



1 – Client – High Risk - Best Practice and PPE Requirements

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Surgical Mask

- Change if soiled, wet, damaged or contaminated (sneezed or coughed in/on)
- Mask must not be left around neck
- Dispose of mask in general waste •
- Wearers should not touch the front of the mask
- Hand hygiene to be performed upon touching or discarding a used mask



If client transport required

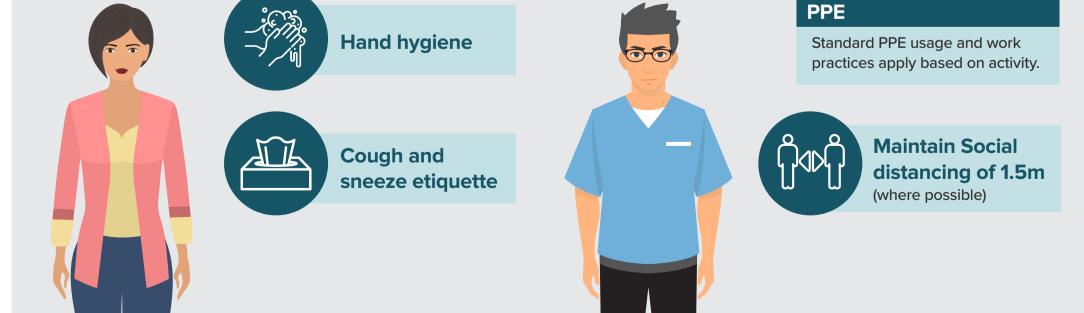
- All occupants to perform hand hygiene
- Client and driver to wear surgical mask
- Client to sit in rear passenger side seat
- After transport wipe down touched surfaces in vehicle with detergent/disinfectant wipe
- Ensure air conditioning is set to external airflow rather than to recirculation, OR
- You may choose to have the vehicle's windows open (where appropriate, not detrimental to health and wellbeing, and where this does not pose any risk)

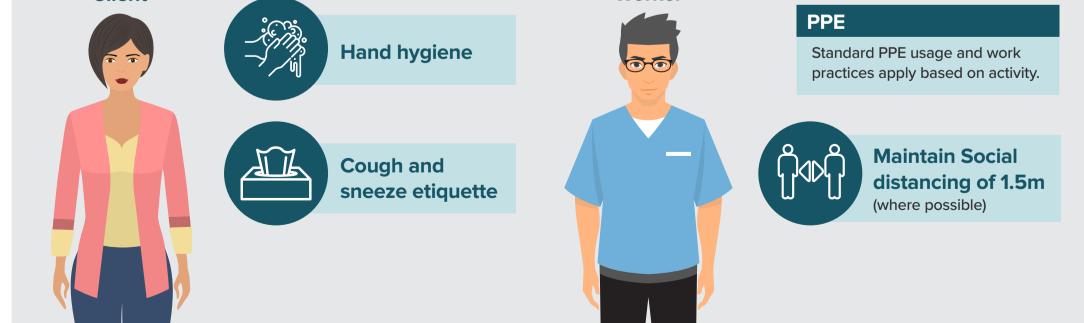
Hand Hygiene

- Wash hands with soap and water for at least 20 seconds
 - Or
- Cover all hand surfaces with hand santiser and rub until dry

2 – Low risk - Best Practice and PPE requirement

Client









Need some more information on the safe use and disposal of PPE? Find out more at www.sahealth.sa.gov.au







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