

Standard operating procedure for cleaning (decontamination) of reusable eye protection for care homes.

NHS guidance as of **02/03/2020** states that eye protection in a community setting can be worn for sessional use.

A session refers to a period of time where a health and social worker is undertaking duties in a specific clinical setting or exposure environment and ends when the worker leaves the environment.

Ensure that the eye protection is not for single use only. If it is it will display this symbol and must be used only once and disposed of into clinical waste.



National guidance states that use of reusable eye/face protection may be appropriate only if it is adequately cleaned/decontaminated between uses.

If eye protection is being shared between colleagues it must be decontaminated between each user.

Advice on suitable decontamination of eyewear should always be sought from the manufacturers.

Eye/face protection should be stored away from direct sunlight, heat sources and liquids including chemicals, in an area that is clean and protects it from contamination.

If the eye protection is reusable then they should be cleaned in an area normally used for cleaning equipment and stored in a clean area.

Gloves should be worn when cleaning and disinfecting these devices in accordance with COSHH requirements.

Eye protection should be physically cleaned with detergent in warm water with a disposable cloth or paper towel then dried thoroughly with paper towels.

Disinfection will be required if the eye wear has become contaminated with infectious material, blood or body fluids. The method of chemical disinfection that is recommended for use in care homes is use of a chlorine releasing agent 10,000ppm.

Rinse thoroughly and dry.

All reusable non-invasive care equipment must be rinsed and dried following decontamination then stored clean and dry.

Wash hands after cleaning equipment

Ensure that the eyewear is suitable for this process by following manufacturer's guidelines.

Decontamination refers to a range of processes which remove or destroy contamination, preventing micro-organisms or other contaminants reaching a susceptible site in sufficient quantities to cause infection or other harmful response. The processes include effective cleaning, disinfection and/or sterilisation, used to render reusable medical devices and equipment safe for further use.

Cleaning refers to a basic level of washing and cleansing, such as with ordinary soap and hot water. This may be all that is required for certain low-risk items and is an essential pre-requisite for higher level disinfection

Disinfection refers to a process which cleans an item or a surface and reduces the number of viable micro-organisms but is not necessarily effective against all bacterial spores or some viruses. Chemicals that achieve this result are known as “disinfectants” and are intended to reduce contamination to reasonably safe levels.

This level of decontamination is appropriate for medium-risk items, which are items that come into contact with intact mucous membranes, such, reusable face protection

Eye protection is not necessary for all contact with residents. The recommended PPE poster below can be found at;

<https://www.gov.uk/government/collections/coronavirus-covid-19-list-of-guidance#guidance-for-health-professionals>

Recommended PPE for primary, outpatient and community care by setting, NHS and independent sector

Setting	Context	Disposable Gloves	Disposable Plastic Apron	Disposable fluid-resistant coveralls/gown	Surgical mask	Fluid-resistant (Type III) surgical mask	Filtering face piece respirator	Eye/face protection ¹
Any setting	Performing an aerosol generating procedure ² on a possible or confirmed case ³	✓ single use ⁴	✗	✓ single use ⁴	✗	✗	✓ single use ⁵	✓ single use ⁶
Primary care, ambulatory care, and other non-emergency/outpatient and other clinical settings e.g. optometry, dental, maternity, mental health	Direct patient care – possible or confirmed case ³ (within 2 metres)	✓ single use ⁴	✓ single use ⁴	✗	✗	✓ single or seasonal use ⁷	✗	✓ single or seasonal use ⁸
	Working in reception/communal area with possible or confirmed case ³ and unable to maintain 2 metres social distance ⁹	✗	✗	✗	✗	✓ seasonal use ⁷	✗	✗
Individuals own home (patient place of residence)	Direct care to any member of the household where any member of the household is a possible or confirmed case ³	✓ single use ⁴	✓ single use ⁴	✗	✗	✓ single or seasonal use ⁷	✗	✓ risk assess single or seasonal use ⁸
	Direct care or visit to any individuals in the extremely vulnerable group or where a member of the household is within the extremely vulnerable group undergoing shielding ⁹	✓ single use ⁴	✓ single use ⁴	✗	✓ single use ⁴	✗	✗	✗
	Home birth where any member of the household is a possible or confirmed case ³	✓ single use ⁴	✓ single use ⁴	✓ single use ⁴	✗	✓ single or seasonal use ⁷	✗	✓ single or seasonal use ⁸
Community-care home, mental health inpatient and other overnight care facilities e.g. learning disability, hospices, prison healthcare	Facility with possible or confirmed case ³ – and direct resident care (within 2 metres)	✓ single use ⁴	✓ single use ⁴	✗	✗	✓ seasonal use ⁷	✗	✓ risk assess seasonal use ⁸
Any setting	Collection of nasopharyngeal swabs ¹⁰	✓ single use ⁴	✓ single or seasonal use ⁴	✗	✗	✓ single or seasonal use ⁷	✗	✓ single or seasonal use ⁸

Table 2

1. This may be single or reusable face/eye protection (full face visor or goggles).
 2. The fulfil of aerosol generating procedure (AGP), as within the HPS guidance (see AGPs are undergoing a further review at present).
 3. A case is any individual meeting case definition for a possible or confirmed case (http://www.gov.uk/government/uploads/system/uploads/attachment_data/file/460006/nhs-uk-hps-investigation-of-possible-cases-in-wednesday-and-friday-clinical-management-of-possible-cases-of-norovirus-coronavirus-infection).
 4. Single use refers to disposal of PPE or decontamination of reusable items e.g. eye protection or respirator after each patient and/or following completion of a procedure, task, or session; dispose or decontaminate reusable items after each patient contact as per Standard Infection Control Procedures (SICPs).
 5. A single session refers to a period of time where a health care worker is undertaking duties in a specific care setting/episode environment e.g. on a ward round, providing ongoing care for inpatients. A session ends when the health care worker leaves the care setting/episode environment. Seasonal use should always be risk assessed and considered where there are high rates of hospital cases. PPE should be disposed of after each session or when it is damaged, soiled, or uncleanable.
 6. Non-critical staff should maintain 2m social distance, though meeting out a controlled distance. Seasonal use should always be risk assessed and considered where there are high rates of community cases.

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Health and Social Care Act

<https://www.nhshighland.scot.nhs.uk/Publications/Documents/Leaflets/Infection%20Control%20Guidelines%20for%20Care%20Homes.pdf>

Guidance on the use of respiratory and facial protection equipment.

J Hosp Infect. 2013 Nov;85(3):170-82. doi: 10.1016/j.jhin.2013.06.020. Epub 2013 Sep 17.
 Coia JE¹, Ritchie L, Adisesh A, Makison Booth C, Bradley C, Bunyan D, Carson G, Fry C, Hoffman P, Jenkins D, Phin N, Taylor B, Nguyen-Van-Tam JS, Zuckerman M; Healthcare Infection Society Working Group on Respiratory and Facial Protection.