



London Ambulance Service **NHS**  
NHS Trust

**Policy on the use of tight-fitting respiratory protective equipment**

## DOCUMENT PROFILE and CONTROL.

**Purpose of the document:** Sets out the Trust's position as well as the expectations of employees as regards to the use of tight-fitting respirators

**Sponsor Department:** Human Resources

**Author/Reviewer:** Senior HR Manager. To be reviewed by August 2019.

**Document Status:** Final

<b>Amendment History</b>			
Date	*Version	Author/Contributor	Amendment Details
04/10/16	1.2	IG Manager	Document Profile and Control update
23/08/16	1.1	IG Manager	Document Profile and Control update
19/08/16	1.0	Senior HR Manager	Version as agreed by ELT.
30/11/15	0.5	Senior HR Manager	Clinical Director's comments reflected in changes to Section 8.
13/11/15	0.4	Senior HR Manager	Fourth draft – amendments following EMT 11/11/15
2/11/15	0.3	Senior HR Manager	Third draft – includes minor amendments to 5.4, 7.2 and 7.4 in response to comments from staffside.
22/9/15	0.2	Senior HR Manager	Second draft – includes amendments to 4.3, 5.2 and 7.5 in line with comments from Ops.
22/9/15	0.1	Senior HR Manager	First draft

**\*Version Control Note:** All documents in development are indicated by minor versions i.e. 0.1; 0.2 etc. The first version of a document to be approved for release is given major version 1.0. Upon review the first version of a revised document is given the designation 1.1, the second 1.2 etc. until the revised version is approved, whereupon it becomes version 2.0. The system continues in numerical order each time a document is reviewed and approved.

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The Pulse (v1.2)	04/10/16	Governance Administrator	G&A
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The RIB	11/10/16	IG Manager	G&A

Equality completed on	Analysis	By
02/09/16		HR/Staff Side
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<b>Links to Related documents or references providing additional information</b>		
	Title	Version
	HSE – Guidance on Filtering Face Piece (FFP) masks (2009)	

	A guide to the FFP respirator (NHS England) (2013)	
	The effect of wearer stubble on the protection given by Filtering Facepieces Class 3 (FFP3) and Half Masks (prepared by the Health and Safety Laboratory for the Health and Safety Executive 2015)	
	Employment Act 1989 (as amended)	
	Respiratory Protective Equipment at Work, a Practical Guide HSG53 (Fourth edition, published 2013)	

Document Status: This is a controlled record as are the document(s) to which it relates. Whilst all or any part of it may be printed, the electronic version maintained in P&P-File remains the controlled master copy. Any printed copies are not controlled nor substantive.

## **1. Introduction**

- 1.1 This document sets out the Trust's Policy position as well as the expectations of employees as regards to the use of tight-fitting respirators (specifically FFP3 respirators) in the course of their work and is written in line with Health and Safety Executive (HSE) and NHS England guidance.
- 1.2 It is not intended to be a technical document but to inform and support any technical or other guidance that is issued to employees concerning the use of tight-fitting respirators.

## **2. Scope**

- 2.1 The guidelines are applicable to all employees delivering face-to-face patient care.

## **3. Objectives**

- 3.1 To set out the Trust's position on the use of tight-fitting respirators and the responsibilities of both managers and staff in relation to this.

## **4. Responsibilities**

- 4.1 Managers are responsible for ensuring that this Policy is drawn to the attention of their staff and for dealing with any initial queries regarding its application.
- 4.2 All staff involved in face-to-face patient care are responsible for using tight-fitting respiratory protective equipment (RPE) in line with this Policy and to raise any issues of concern regarding the wearing of such respirators with their line-manager at the earliest possible opportunity.
- 4.3 The Director of Operations and Medical Director will, as circumstances dictate, request that all patient-facing staff use tight-fitting respirators. They will also, when it is believed that any significant risk has passed, announce when this is no longer necessary.
- 4.4 The Emergency Preparedness, Resilience and Response (EPRR) Department will issue technical and other documentation as necessary in regards to the use of tight-fitting respirators.
- 4.5 The Health and Safety Department is responsible for providing advice to managers and staff in regards to the application of this Policy e.g. any employee relations issues arising from a decision that employees need to wear respirators. Human Resources may provide further advice as necessary.

## **5. Definitions**

- 5.1 This Policy refers to the 3M 7500 series FFP3 (filtering face piece, Particulate level 3 respirators) of the level of protection currently issued to staff – it is

recognised that terminology and technology may change but for the purposes of this policy FFP3 should be taken as meaning any tight-fitting respirator.

- 5.2 Staff have a responsibility to wear the FFP3 mask alongside all other Personal Protective Equipment (PPE).
- 5.3 An FFP3 provides a high level of protection and should be worn in line with any technical advice issued; broadly this will be in the following circumstances:
- Carrying out potentially infectious aerosol generating procedures;
  - Where a patient is known/suspected to have an infection spread via the aerosol route;
  - When caring for patients known/suspected to be infected with a newly identified respiratory virus.
- 5.4 The definition of 'clean-shaven' for the purpose of this Policy means the expectation that an employee would shave his face shortly before leaving home to report for his shift.

## **6. Health and Safety Executive (HSE) / Legal guidance**

- 6.1 An FFP3 must be fit-tested on individuals and HSE research indicates that any facial stubble can negatively affect this testing insofar as the stubble does not allow the mask to be as tight against the skin as it may otherwise be (Respiratory Protective Equipment at Work, a Practical Guide HSG53).
- 6.2 Similarly, research for the HSE indicates that the growth of stubble will negatively impact on the effectiveness of the FFP3 mask when providing patient care. It further states that, in general, the longer the growth of any stubble/beard then the poorer the fit and therefore the increased risk of inward leakage (The effect of wearer stubble on the protection given by Filtering Facepieces Class 3 (FFP3) and Half Masks).
- 6.3 Legally the Trust can require staff to be clean-shaven on the basis that it is a proportionate means of achieving a legitimate aim – the legitimate aim being to safeguard the health and safety of the member of staff as well as others with whom he may come into contact.

## **7 The Trust's Position**

- 7.1 The Trust seeks to be proportionate in its application of the HSE advice whilst ensuring as far as reasonable, that staff safety and the safety of others with whom they come into contact is prioritised.
- 7.2 All staff are strongly encouraged to be clean-shaven at the point that they are fit-tested for FFP3 respirators.
- 7.3 All other patient-facing staff who are involved in face-to-face patient care should be aware that having stubble or a beard is likely to negatively impact upon the effectiveness of the FFP3. Therefore all employees are strongly encouraged to be clean shaven at all times in order to be prepared if there is a requirement to wear an FFP3.
- 7.4 The Director of Operations and Medical Director, if circumstances dictate (e.g. a flu or MERS epidemic / pandemic), will request that all patient-facing staff

be clean shaven and that tight-fitting FFP3 respirators are worn. Guidance will also be issued to staff about the circumstances in which respirators must be worn. Staff in these circumstances will be required to comply with the request to be clean shaven.

- 7.5 It is recognised that there will be some staff for whom the use of FFP facemasks may be unsuitable e.g. for medical reasons or for reasons of religion or belief. Advice on how to manage these circumstances is set out below.

## **8. Issues concerning grounds of religion or belief/Medical reasons**

- 8.1 It is recognised that some employees may wear a beard for reasons of religion or belief and this will therefore potentially lessen the effectiveness of the FFP3.
- 8.2 Similarly there may be medical reasons as to why an individual may not be able to wear an FFP3 mask, for example relating to a specific allergy or facial surgery.
- 8.3 Given that an epidemic / pandemic situation may potentially arise at any time then staff with medical or concerns arising out of religion or belief around the use of the FFP3 must contact their manager and arrange to meet with him or her at the earliest possible opportunity - this is with the aim of achieving a mutually acceptable solution in advance of any potential epidemic/pandemic.
- 8.4 The manager, in such cases, will discuss the issue with the member of staff to identify whether there is a means of resolving the situation. The meeting, to which the employee may wish to be supported by a trade union or workplace colleague will discuss the individual's personal circumstances and is likely to involve clarification around the potential risks to the employee. Medical and/or other evidence may be sought to help inform these discussions. It is recognised that potential solutions may differ depending upon whether the member of staff is undertaking everyday work where the use of an FFP3 mask is required on an ad hoc basis or in epidemic/pandemic circumstances.
- 8.5 If for the reasons set out in Section 8 of this Policy staff are unable either to wear an FFP3 (i.e. medical reasons) or wear the FFP3 with the necessary fit (i.e. religious/belief reasons) then in circumstances of an epidemic/pandemic the Trust will seek to redeploy those affected to another role for the period of the epidemic/pandemic.
- 8.6 The manager should contact their HR manager in order to liaise about any potential temporary redeployment. It is likely that in such circumstances issues that will need to be addressed will include a shortening of the usual redeployment process and ensuring that the Member of staff is fully trained in the role in advance of any potential redeployment.
- 8.7 Any alternative role should make full use of the employee's skills and qualifications (e.g. redeploying a paramedic in the Clinical Hub) and the employee will be required to work such hours that reflect any regular 'unsocial hours' payments that they regularly receive. Any such role will be on a temporary basis and only for the period of any epidemic/pandemic after which the individual will return to their substantive position. The arrangements will be confirmed in writing to the member of staff.

## **9 Hazardous Area Response Team**

- 9.1 Due to the specialised nature of the work of HART and other resilience operations and the need to wear FFP3s and other tight-fitting RPE on a regular basis, those working in these departments are required to be clean shaven when on duty and there will be no exceptions to this rule when applied to these managers and staff.

<b>IMPLEMENTATION PLAN</b>				
<b>Intended Audience</b>	All male managers and staff delivering face-to-face patient care.			
<b>Dissemination</b>	Via Pulse			
<b>Communications</b>	Via Pulse			
<b>Training</b>	Training re use of tight-fitting respirators is rolled out separately.			
<b>Monitoring:</b>				
<b>Aspect to be monitored</b>	<b>Frequency of monitoring AND Tool used</b>	<b>Individual/ team responsible for carrying out monitoring AND Committee/ group where results are reported</b>	<b>Committee/ group responsible for monitoring outcomes/ recommendations</b>	<b>How learning will take place</b>
Employees not willing to be clean shaven following request by Medical Director and Director of Operations.	Reporting via operational managers in the event of epidemic/ pandemic.	Reported to workforce committee or any temporary body established in such circumstances.	Workforce Committee.	Reports to Workforce Committee.