

**WEEK 2 WHAT ARE THE PRACTICAL IMPLICATIONS FOR RESPONDING TO
COVID-19?**
STEP 2.12 INFECTION PREVENTION AND CONTROL IN A HEALTH CARE SETTING

Frequently asked questions

Question	Answer
How can health care workers protect themselves when there is little/no Personal Protective Equipment (PPE) available?	It is challenging when there is not enough material to abide by recommendations. These situations can be avoided as far as possible by preparation and adapting ways of working. Use reusable PPE that can be decontaminated locally when possible. Strengthen stock keeping and procurement systems to plan ahead as far as you are able. Work through all the ways that PPE use can be minimised by adapting ways of working. For example setting up a telephone call line for people to report illness to reduce health care visits in person. Put in plastic screens for protection at reception desks, or gates to maintain physical distancing at entrances or visiting areas. Reusable face shields and cotton surgical gowns may be decontaminated locally using a laundry and detergent/ disinfectant. This reduces the need for constant resupply of expensive single use PPE.
Does 'out of date' PPE offer any protection?	It is good practice to adhere to expiry dates, but some equipment might be functioning also after that date, one cannot be sure.
Are cloth masks effective to interrupt transmission of COVID-19?	This is still a controversial issue because the evidence is unclear. The published research on cloth masks is based on very old studies and/or different diseases. The evidence doesn't show that cloth or improvised face coverings significantly reduces transmission of other respiratory diseases within community settings. Medical masks do protect health care workers, not just because of the way they are constructed but because health care workers are trained how to put on and take off the mask correctly and they only put them on when indicated. In laboratory studies, cloth masks have not passed the same stringent tests that medical or surgical masks undergo. However there is much to learn in the context of this pandemic and a lot of very urgent research is happening right now to answer questions about how modern materials behave and how masks may be used to protect people from COVID-19.

	<p>Requiring widespread use of masks in the community is an intervention into a complex system. We do not know how face masks will affect human behaviour and adherence with other measures. Face masks may act as a visual reminder to do hand hygiene and maintain physical distancing, conversely if people feel safer they may neglect to attend to these other measures. If masks are uncomfortable people may touch their face more often and risk contaminating their mucous membranes; if masks are removed and replaced without being decontaminated (e.g. to eat or drink) they could become a source of contamination themselves. We do not know at the moment what the impact of facemasks will be on disease transmission in the community if masks are used in these settings.</p> <p>If widespread wearing of cloth masks is recommended in your country it is vitally important that all the other hygiene measure are maintained and encouraged. It should be seen as an additional measure, not an alternative.</p>
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