USE OF PPE & CLOTH FACE COVERINGS FOR UN PERSONNEL IN NON-HEALTHCARE SETTINGS
IN AREAS OF COVID-19 COMMUNITY TRANSMISSION

2 June 2020

Introduction

WHO recommends that medical personal protective equipment (PPE) (e.g. medical/surgical masks and N95 respirators) should be prioritised for 1) health care workers/carers of COVID-19 patients, and 2) symptomatic COVID-19 patients.

In this context, this document provides guidance on the use of PPE and cloth face coverings for all UN personnel who engage in work tasks that require close and frequent interaction with people whose infectious status is unknown. (Such individuals could include uniformed personnel, security personnel, patrol units, receptionists, drivers, personnel involved in food distribution, humanitarian workers...etc.) Please note that all task-specific requirements and existing SOPs for wearing protective equipment and taking general precautions would still apply, and should not be superseded by this guidance. The WHO guidance on Rationale Use of PPE should also be reviewed.

This guidance focuses on personnel working in a non-healthcare setting, and in areas of significant community transmission of COVID-19.

The recommendations in this document should be adapted to the context in which you are working, and you should take into account your local health authorities' advice. Where cloth masks and other PPE are mandated by the government, all UN personnel should abide by such regulations. The implementation of this guidance should also abide by the findings of the risk assessment done in your duty stations as part of response to COVID-19.

Evidence Base for Masks

COVID-19 is thought to spread via two main routes of transmission – respiratory droplets and contact.

- It has been scientifically demonstrated that an infected/ill person who wears a medical mask can prevent the spread of infectious droplets from that infected person to someone else.

- WHO states that for well and non-ill persons, there is currently no scientific evidence that wearing a mask will prevent them from becoming infected with respiratory viruses, including COVID-19.

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1 Medical masks are also known as “surgical” or “procedure” masks
2 E.g. N95 or FFP2 or FFP3 respirators
3 Such persons may not be a known or suspect case of COVID-19.
5 If needed, please contact your local medical service and/or local WHO office to check if your duty station meets the criteria. Further PPE guidance specific to healthcare settings is available at the “UN Medical Directors COVID-19 Pandemic Guidelines” available at https://www.un.org/en/coronavirus/reference-documents-administrators-and-managers
6 Respiratory droplets are generated when an infected person coughs or sneezes. Any person who is in close contact (within 1-2 m) with someone who has respiratory symptoms (coughing, sneezing) is at risk of being exposed to potentially infective respiratory droplets. Droplets may also land on surfaces where the virus could remain viable; thus, the immediate environment of an infected individual can serve as a source of transmission (contact transmission)
• For healthy persons, there is no strong evidence either in favour of or against the widespread use of masks by members of the general public.

• There is currently no evidence that cloth masks will prevent the spread from the wearer of the mask to other.

• Cloth masks are not indicated in the healthcare setting.

• The above could change however, as new evidence emerges.

**Recommended PPE and Cloth Face Coverings for UN Personnel According to Activities**

The following table outlines recommendations related to use of PPE and cloth face coverings for UN personnel who come into contact with the general public as part of their work duties. The recommendations consider both universal precautions principles, as well as specific COVID-19 related masks/PPE guidance from WHO.

As noted above, there is no evidence of the effectiveness of usage of masks for well persons – as such, the below PPE and cloth face covering masks are optional and for consideration only as the local supply allows. Note that PPE shortages are anticipated in every category during the COVID-19 response, and PPE should always be critically reserved for healthcare workers and symptomatic patients.

Please note that all task-specific requirements and existing SOPs for wearing protective equipment and taking general precautions would still apply, and should not be superseded by this guidance.
Table 1: Recommended PPE and Cloth Face Coverings According to Activities Undertaken

<table>
<thead>
<tr>
<th>Category No.</th>
<th>Activities Undertaken by Personnel</th>
<th>Type of PPE / Cloth Face Covering Required to Reduce COVID-19 Exposure</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Able to maintain at least 2m distance from others</td>
<td>No PPE required.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Cloth face covering can be considered for use.</td>
</tr>
<tr>
<td>2</td>
<td>Not able to maintain at least 2m distance from others</td>
<td>Cloth face covering can be considered for use.</td>
</tr>
<tr>
<td></td>
<td>No physical contact with others</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Not able to maintain at least 2m distance from others</td>
<td>Cloth face covering and gloves can be considered as local supply allow.</td>
</tr>
<tr>
<td></td>
<td>Have direct physical contact with others</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Not able to maintain at least 2m distance from others</td>
<td>Cloth face covering, medical mask, eye protection, and gloves and can be considered as supply allows and as per one’s risk assessment of situation</td>
</tr>
<tr>
<td></td>
<td>Anticipate splashes or exposure to bodily fluids.</td>
<td></td>
</tr>
</tbody>
</table>

Management of Masks

Always remember that mask usage cannot replace other critical measures like physical distancing and hand hygiene.

If an individual decides to use cloth face coverings, below are useful resources on non-medical masks:

**IFRC**: http://prddsgofilestorage.blob.core.windows.net/api/sitreps/3972/Cloth_mask_guidance_IFRC_Covid.pdf

For any type of mask, appropriate use and disposal are essential to ensure that they are effective and to avoid any increase in transmission. Pay attention to the correct use of masks as follows:

- Masks are effective only when used in combination with frequent hand hygiene with alcohol-based hand rub or soap and water.
- Place the mask carefully, ensuring it covers the mouth and nose, and tie it securely to minimize any gaps between the face and the mask.
- Avoid touching the mask while wearing it.
- Masks should be changed whenever they become dirty or moist.
- Replace masks as soon as they become damp with a new clean, dry mask.
- Remove the mask using the appropriate technique: do not touch the front of the mask but untie it from behind.
- After removal or whenever a used mask is inadvertently touched, clean hands using an alcohol-based hand rub or soap and water if hands are visibly dirty.
- Do not re-use single-use masks.
- Discard single-use masks after each use and dispose of them immediately upon removal.
- Cloth face coverings should be washed after each use.
- Cloth face coverings should be completely dry after washing before using them.

For any questions, please contact dos-dhmosh-public-health@un.org

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