

Facial hair and ensuring the adequate performance of respiratory protective equipment

Queensland Health Position Statement v0.4

Purpose

The purpose of this document is to state Queensland Health's position and to provide instruction in relation to the requirement for workers with facial hair for whom it is necessary in the performance of employment duties to use respiratory protective equipment. It is a risk control measure to require workers to partially or fully remove facial hair to ensure an adequate facial seal for the respiratory protective equipment can be achieved. This is important not only to ensure front line workers in Queensland Health are adequately protected but also to ensure the safety of those accessing our health services.

Background

Respiratory protective equipment is a form of personal protective equipment (PPE) used as a risk control measure within the hierarchy of infection prevention and control measures. Respiratory protective equipment is worn by clinical and non-clinical healthcare workers when attending to patients with a confirmed or suspected airborne disease and when performing aerosol-generating procedures on a patient with a known or suspected respiratory infection or disease transmitted via the airborne or droplet route.

Where it is not reasonably practicable to eliminate risks, the *Work Health and Safety Regulation 2011* (Qld) places duties on Queensland Health (which includes the Hospital and Health Services) as a 'person conducting a business or undertaking' to:

- a. minimise risks to health and safety so far is reasonably practicable by doing one or more of the following;
 - a. substitution or isolation from the hazard giving rise to the risk or by engineering controls;
 - ii. if the risk remains, administrative controls;
 - iii. if the risk remains, by ensuring the provision of PPE that is selected to minimise risk, ensuring that the PPE is:
 - a. suitable having regard to the nature of work and hazard associated with the work; and
 - b. a suitable size and fit, and reasonably comfortable for the worker to wear.
 - iv. in directing the carrying out of work:
 - a. provide the worker with information, training and instruction in the proper use and wearing of PPE; and
 - b. ensure the PPE is used or worn by the worker so far is reasonably practicable.

For tight-fitting respiratory protective equipment, such as P2/N95 type masks, *Australian Standard 1715:2009 Selection, use and maintenance of respiratory protective equipment*, recommends that 'suitable fit' is verified through two complementary methods of 'fit testing' to meet AS/ NZS1715:2009 being qualitative or quantitative fit testing. Additionally, a 'fit check', which is a quick check undertaken by the user each time a respirator is put on, is required.

Position in relation to the partial or full removal of facial hair by workers where necessary to ensure adequate performance of respiratory protective equipment

The fitting of all types of respiratory protective equipment must always be in accordance with the manufacturer's instructions. Initial sizing/fitting must be carried out by a competent person who has received appropriate training.

Particular attention must be paid to the presence of facial hair during the fitting process as an adequate seal with a tight-fitting respirator may be difficult to achieve for people with facial hair. Excessive stubble, moustaches or beards may prevent a satisfactory seal between the respirator and skin. This may result in inadequate protection being provided.

When a worker is required in the performance of employment duties to use tight-fitting respiratory protective equipment as a risk control measure, unless alternative risk control measures are approved following a risk assessment, the worker must ensure that any facial hair between the skin and the facepiece sealing surface is removed, so as achieve a suitable fit. This requirement is to be undertaken in accordance with AS/NZS 1715 (Appendix B).

Note: Additional factors that may interfere with facial seal includes jewellery, facial makeup and creams.

Where an adequate seal with tight-fitting respiratory protection equipment is not able to be achieved due to a worker not being able to remove or refusing to remove facial hair

It is acknowledged that some workers may not be able to remove facial hair for cultural, religious or medical reasons.

While it is imperative that safety remains the paramount consideration, appropriate consultation with a worker should occur to ensure that all relevant issues or concerns are considered by all parties, prior to any final decision being made.

Where reasonable adjustment for cultural, religious or medical reasons can be made, this should be facilitated on a risk-assessed basis. Depending on the circumstances, this may include assessing whether alternative PPE can be made available, or alternative or concurrent risk control measures are appropriate, transfer to a lower risk setting or temporary remote or flexible work arrangements. Where appropriate including having regard to the risk of transmission of infectious diseases to other persons, this may include the use of a suitable loose-fitting powered air-purifying respirator (PAPR). However, it is also possible that in some circumstances, where the work simply cannot be safely undertaken without the proper usage of respiratory protective equipment, that the worker may not be able to perform the work for which they are engaged. This may arise despite the availability of PAPR in some circumstances.

The intention of these control measures is to ensure the health, safety and wellbeing of all workers. Where a worker has a reasonable excuse to not comply with a reasonable instruction or co-operate with any reasonable policy, such as cultural, religious or medical reasons, and there are no reasonable alternative arrangements, the usual employer processes in addressing conduct and performance may apply. It is recommended that these are assessed by Human Resource delegates on a case-by-case basis and are in addition to undertaking reasonable informal dispute resolution processes between the parties.

Any decisions by Queensland Health (or a Hospital and Health Service) as a “public entity”, including a decision to commence a disciplinary process, must comply with the requirements of the *Human Rights Act 2019* (Qld).

If the use of loose-fitting PAPR is to be considered, the below recommendations apply:

1. The decision to use a loose-fitting PAPR should be made only after careful consideration and a risk assessment specific to the individual situation. The risk assessment must consider the likelihood and potential consequences of transmission of infection to patients and fellow workers.
2. An individualised plan must be developed for the worker’s use of the device.
3. Local policies and procedures must be developed for the use, putting on and taking off, cleaning, disinfection and storage of the PAPR. These policies and procedures must be in line with the manufacturer’s guidance and instructions for use, relevant Australian Standards, and relevant state and national guidance.
4. The user and other staff working closely with the user will require training in the use, putting on, and taking off, of the device.
5. A documented process and relevant staff must be identified for the cleaning and disinfection of the device, and the relevant staff will require training in the process.
6. During moderate- and high-risk PPE escalation, the below additional controls must be used:
 - a. A surgical mask is to be worn under the hood of the PAPR (this may only be done with PAPR of the type with an inner neck collar or inner shroud, NOT with PAPR of the type with an elasticised face seal).
 - b. A long-sleeved gown should also be worn, with the gown put on after the PAPR, so that the yoke of the hood sits below the collar of the gown. This will assist to direct and filter expired air that escapes under the hood. The long-sleeved gown must be changed between each patient interaction to allow for effective hand hygiene.
 - c. The PAPR user should undertake daily rapid antigen testing for COVID-19 prior to commencing their shift.
7. A loose-fitting PAPR should not be worn to undertake invasive procedures where asepsis is required, or directly over a surgical field.
8. If a TGA-listed loose-fitting PAPR is available, this device should be preferentially chosen. If no TGA-listed device is available, non-TGA-listed devices must be assessed

for suitability and must meet the requirements of *Australian/New Zealand Standard 1716:2012 Respiratory protective devices*.

- a. The health service organisation should seek legal advice at the local level as concerns the use of a non-TGA-listed item of PPE in the context of the individual situation.

Legislation and Standards

Work Health and Safety Act 2011 (Qld)	Provides a nationally consistent framework to secure the health and safety of workers and workplaces. Workers and other persons at the workplace (including patients and visitors etc.) must also take reasonable care for their own health and safety; and care that their conduct, acts or omissions do not adversely affect the health and safety of others.
Work Health and Safety Regulation 2011 (Qld)	Division 5, Section 44 (3) of the Regulation describes how to prevent or minimise risk at the workplace and includes provisions specifically regarding PPE suitability, size, fit, maintenance, hygiene and use.
How to manage work health and safety risks Code of Practice 2021	This Code of Practice on how to manage work health and safety risks is an approved code of practice under section 274 of the Work Health and Safety Act 2011 (the WHS Act).
Australian/New Zealand Standards	AS/NZS 1715:2009 - Selection, use and maintenance of respiratory protective equipment AS/NZS 1716:2012 - Respiratory protective devices AS 4381:2015 - Single-use face masks for use in healthcare A/NZS 2243.3 – Safety in Laboratories.
International Standard	ISO 16975-3 Respiratory protective devices, selection use and maintenance- Part 3 Fit-testing procedures First Edition 2017-09
Australian Guidelines for the Prevention & Control of Infection in Healthcare (2019)	Recommends that where there is a high probability of airborne transmission due to the nature of the infectious agent or procedure then a correctly fitted P2/N95 respirator should be worn Recommendation 27: It is suggested that a correctly fitted P2 respirator be worn when entering the patient-care area when an airborne-transmissible infectious agent is known or suspected to be present.
National Safety and Quality Health Service Standards: Standard 3 - Preventing and Controlling Infections Criterion 3.7.1	Requires infection prevention and control consultation regarding policies and procedures that address personal protective equipment.
Health, safety and wellbeing risk management Standard, QH-IMP-401-3:2020	This Queensland Health Standard establishes the requirements for managing work health and safety (WHS) hazards and risks.

<p><u>Human Rights Act 2019 (Qld)</u></p>	<p>The <i>Human Rights Act 2019</i> requires government to consider human rights in all decision-making and action, and only limit human rights in certain circumstances and after careful consideration.</p> <p>The human rights protected under the <i>Human Rights Act 2019</i> are not absolute. This means that the rights must be balanced against the rights of others and public policy issues of significance.</p>
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Endorsement

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Document custodian

PPE Working Group, Working Group of the COVID-19 Health System Response Advisory Group (CRG).

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