

















# PPE GUIDANCE FOR COMMUNITY PHARMACIES

<b>Pharmacy Activity During Red Alert – <u>High Community Transmission</u></b>	<b>Precautions Required</b>  Frequent hand hygiene  Surgical mask <sup>2</sup>  P2/N95 Respirator  Eye Protection <sup>3</sup>				
<b>PATIENT/CUSTOMER MUST WEAR A MASK</b> Everyone entering the pharmacy should undergo COVID-19 risk screening. Individuals with COVID-19 symptoms should not enter the pharmacy					
<b>Direct patient/customer facing clinical services including vaccination</b> (e.g. OTP dosing, disease screening, COVID-19 risk screening, over the counter advice, wound care, inhaler technique). Keep physical distancing (1.5m) if the patient/customer needs to remove their mask for a short period.	<b>STANDARD PRECAUTIONS<sup>1</sup></b>				 Face shield preferred
<b>Direct patient/customer facing activities</b> (e.g. prescription handling)					
<b>All other staff in pharmacy (not involved in patient/customer facing roles)</b>					
<b>GLOVES<sup>4</sup> AND APRONS/GOWNS<sup>5</sup> ARE NOT REQUIRED IN ANY OF THESE SITUATIONS</b>					

**Notes:**

1. [Standard Precautions](#) represent the minimum infection prevention measures that apply to all patient care, regardless of suspected or confirmed infection status of the patient, including but not limited to hand hygiene, cough etiquette, cleaning and disinfection of the environment and shared equipment.

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2. Surgical masks (included on the Australian Register of Therapeutic Goods by the Therapeutic Goods Administration) are required for all staff. For extended use, surgical masks can be worn for up to 4 hours. Masks should be changed when wet or moist or contaminated with blood or bodily fluids. After changing your mask clean your hands.
3. Eye protection can also remain on between patients/customers. After removal reprocess if reusable or discard if single use. Prescription glasses are not protective eyewear.
4. Gloves may be required for reasons other than prevention of infection such as handling hazardous medicines.
5. Aprons/Gowns are not routinely required unless exposure to body fluids or blood is anticipated. Aprons/gowns are not required to provide COVID-19 vaccination. Refer to CEC [COVID-19 Infection Prevention and Control Manual](#) Chapter 4.

## **General recommendations for community pharmacies:**

As the COVID-19 pandemic continues to change, it is important that all pharmacists stay up to date with local outbreaks, changing regulations and advice for managing infection risks and supporting patients. NSW Health [Advice for community pharmacies on COVID-19](#) provides more information on regulatory changes for medicines supply, assisting patients in self-isolation and practical infection prevention and control steps pharmacies can implement.

Practical infection prevention and control steps for community pharmacies include:

- Ensuring a staff member screens patients prior to entry to the pharmacy for COVID-19 risk including symptoms and close contact with cases and mandatory QR check-in
- Ensuring all patients/customers entering the premises are wearing a face mask
- Displaying signage/posters in the pharmacy to encourage patients with symptoms to seek testing. [Posters and print resources](#) are available from NSW Health
- Encouraging physical distancing of 1.5 metres where possible, for example through floor markings and barriers to create space at counters, seated areas, etc.
- Providing delivery of medicines where people are symptomatic or must self-isolate
- Encouraging all staff to get vaccinated for COVID-19, including pharmacy assistants and retail staff
- Ensuring any staff with COVID-19 symptoms are immediately excluded from work, get tested and isolate until a negative result. Ensuring staff identified as close, close secondary or casual contacts only return to work according to public health advice
- Contingency planning to maintain core pharmacy services in the event the pharmacy is exposed to a COVID-19 case including considerations for staff rostering and medicine supply (including [contingency planning for Opioid Treatment Program dosing points](#))
- Minimising congregating in staff areas by restricting staff from sharing lunch areas and directing staff to take breaks outside.
- Ensuring staff providing clinical services are familiar with the elements of [COVID-19 exposure risk assessment for health care workers](#) to support an awareness of risk