



1275 K Street, NW, Suite 1000
Washington, DC 20005-4006
Phone: 202/789-1890
Fax: 202/789-1899
apicinfo@apic.org
www.apic.org

September 13, 2013

John Howard
Director
National Institute for Occupational Safety and Health
Centers for Disease Control and Prevention
NIOSH Docket Office
Robert A. Taft Laboratories
MS-C34, 4676
Columbia Parkway
Cincinnati, Ohio 45226.

RE: CDC-2013-0016; NIOSH-129-A; Framework for Setting the NIOSH PPT Program Action Plan for Healthcare Worker Personal Protective Equipment: 2013-2018

The Association for Professionals in Infection Control and Epidemiology (APIC) wishes to thank the National Institute for Occupational Safety and Health (NIOSH) for the opportunity to provide input into its draft "Framework for Setting the NIOSH PPT Program Action Plan for Healthcare Worker Personal Protective Equipment: 2013-2018."

We are pleased that NIOSH has put forward a thorough and comprehensive action plan and we agree with the overarching goal of improving healthcare personnel (HCP) personal protective equipment (PPE) compliance, where PPE is appropriate for use and we submit to your attention the following comments:

- APIC believes all PPE regulations and guidance must be based on valid science, especially in regards to fit testing requirements and we encourage decision-making based upon studies in actual healthcare settings.
- We encourage NIOSH to continue research into transmission of viral respiratory disease and the relationship to PPE use and effectiveness of PPE.
- We encourage NIOSH to have an ongoing dialogue with epidemiologists, infection preventionists and other stakeholders on their experiences with PPE use and needs during the H1N1 pandemic to help ascertain frontline information.
- We recognize and appreciate NIOSH's attempt to align goals and actions among agencies. This helps to reduce confusion, duplicative efforts, and waste of scarce healthcare resources.
- APIC appreciates NIOSH's recognition of the importance of strategies to develop cost-effective standards for facemasks and shields. We encourage product vendors to consider the shelf-life of PPE as part of this strategy.
- In lines 120-131 of the action plan, APIC agrees that there is no one solution to address all reasons for PPE non-compliance. We point out that the HCP understanding of the



need for protecting themselves, as well as the patients they care for, must be the starting point. We believe guidelines that are well-articulated, based on sound science, and can be operationalized will promote a culture of safety and contribute to HCP compliance with PPE.

- As NIOSH has pointed out, funding will dictate the agency's ability to accomplish the comprehensiveness of this action plan, so once funding is determined, APIC respectfully suggests that the agency's top consideration should include credible guidelines based on sound science to ensure readily available PPE for use when needed.
- When guidelines and regulatory requirements are developed, they should be appropriate for the specific facility type and setting of care for which they are intended.

Thank you again for carefully considering our comments on the Action Plan. We stand ready to assist you further with your efforts.

Sincerely,

A handwritten signature in blue ink that reads "Patricia S. Grant". The signature is fluid and cursive, with the first name being the most prominent.

Patricia S. Grant, RN, BSN, MS, CIC
2013 APIC President